



NURSING FOR ALL

nurses empowering nurses worldwide



20 STRATEGIC 26 PLAN

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Executive Summary

Nursing for All (NFA) enters the 2026–2028 period at an important moment of opportunity and transition. In Liberia, recent disruptions in donor financing, shifts toward government-to-government funding, and continued pressure on the health workforce are reshaping how care is delivered and sustained. At the same time, NFA has demonstrated that its nurse-led, community-based model works - supporting frontline care, strengthening continuity, and elevating local leadership in communities where access and stability remain fragile.

This strategic plan builds on that progress. It is designed to strengthen what is already working, while ensuring the organizational foundation, leadership capacity, and funding structure are strong enough to sustain impact and adapt in a changing environment. The plan is intentionally sequenced, prioritizing organizational stabilization and clarity first, while preparing the organization to deepen impact and pursue growth as readiness allows.

Strategic Focus and Sequencing

NFA's strategy is organized around five priorities, intentionally sequenced to build on existing strengths and advance over time in ways that support sustainable impact. The sequencing reflects board input and reinforces a shared focus on long-term sustainability.

Foundational priorities (2026–2027) focus on strengthening the organization itself:

- 1. Build Capacity by Strengthening Organizational Infrastructure:** Strengthen internal systems, leadership support, and governance so the organization can sustain momentum and support nurses effectively.
- 2. Clarify and Elevate NFA's Model and Impact:** Clearly define and communicate NFA's distinctive nurse-led public health model and its impact in Liberia.
- 3. Diversify and Grow Funding Streams:** Expand and diversify funding to reduce risk, support core operations, and enable thoughtful planning.

Readiness-based priorities will be advanced as these foundations are in place:

- 4. Ensure Program Sustainability and Local Capacity Building:** Deepen nurse leadership, quality, and learning to ensure durable, high-quality community impact.
- 5. Prepare for Thoughtful Expansion:** Build readiness for geographic or programmatic growth, prioritizing depth, quality, and partnership-based approaches over rapid scale.

Strategic Principles

Throughout this strategic period, NFA will be guided by several core principles:

- Prioritizing depth of impact over breadth of expansion.
- Pursuing growth only when organizational, financial, and leadership readiness are aligned.
- Centering Liberian nurse leadership and local decision-making in all programs and partnerships.
- Strengthening systems and people in ways that expand the leadership base while supporting longterm continuity.
- Maintaining existing organizational policies and safeguards that promote ethical practice, staff well-being, and program integrity .

What Success Looks Like by 2028

The strategic plan advances all five priorities in parallel, with different levels of intensity as organizational capacity stabilizes, emphasizing activation first, strengthening second, and readiness assessment by 2028. By the end of this strategic period, Nursing For All aims to demonstrate:

- **A strong and well-supported organizational structure**, with added operational leadership capacity and clear roles and accountability to support future growth.
- **Increased and more diversified funding**, with reduced reliance on any single source and greater flexibility to support core operations.
- **A clearly articulated and widely shared nurse-led model**, reflected across programs, communications, fundraising, and reporting.
- **Stronger local capacity and leadership in Liberia**, supported through quality systems, more/greater learning opportunities, and additional partnerships that continue to align with national priorities.

Board Role and Strategic Alignment

This plan is intended to support organizational alignment around:

- Priority sequencing and readiness-based growth.
- Near-term investment in organizational and leadership capacity.
- Clear guardrails that balance long-term goals with sustainability.

Together, these priorities position Nursing For All to strengthen its foundation, amplify its nurse-led model, and continue delivering meaningful, locally grounded impact in a changing global health environment. The below table summarizes how the strategy advances over time, illustrating how each priority is activated, strengthened and assessed as organizational capacity grows.

Strategic Priority	2026: Strengthen Capacity	2027: Build Consistency	2028: Grow with Intention
Build Capacity	Operational leadership in place with defined onboarding structure; governance and roles clarified	Leadership and board operating smoothly with clear cadence	Capacity sustained through shared leadership and governance
Clarify Model & Impact	Mission, vision, and nurse-led model defined and aligned	Model embedded across communications and fundraising	Impact reflected consistently across programs, communications and reporting
Diversify & Grow Funding	Fundraising strategy launched; unrestricted revenue growing	Funding diversified - 1-2 grants obtained	Financial stability achieved and sustained doubling the operating budget
Ensure Program Sustainability	Shared understanding of program quality and learning priorities established	Local partnerships and learning systems documented and normalized	Program consistency and effectiveness well documented and maintained
Prepare for Thoughtful Expansion	Early board conversations on future growth and board expansion, grounded in ongoing awareness of the Liberian landscape	Program expansion options clarified and new partnership pathways explored	Board prepared to assess and decide on future growth plans; growth

The Liberian Landscape & Implications for Nursing For All

This section summarizes key features of Liberia’s health landscape that shape Nursing For All’s strategic choices for 2026–2028.

Background

Liberia is located on the West African coast and is bordered by Sierra Leone (west), Guinea (north), and Côte d’Ivoire (east), with the Atlantic Ocean to the south. The country is divided into 15 counties, with population density heavily concentrated along the coast and in a few regional hubs inland. Currently NFA funds nurse-led programs in **Monrovia (Montserrado County)** which serves as the political, economic, and health-system center of the country, and in **Ganta (Nimba County)**, a major inland city that serves surrounding rural communities and draws patients, workers, and trade from across northeastern Liberia and neighboring Guinea and Côte d’Ivoire.

Figure 1&2. Liberia with Major Population Centers and NFA Program Locations (Monrovia and Ganta)



Current Needs in Liberia

Liberia is a low-income country with a largely rural population, where long travel distances and limited transportation continue to shape access to care. Two civil wars between 1989 and 2003 severely damaged health infrastructure and depleted the health workforce, and while the 2014–2016 Ebola epidemic further weakened routine services, it also accelerated investments in surveillance and epidemic preparedness (PubMed Central).

Health needs most frequently cited by the Government of Liberia and global partners include:

- **Maternal, newborn, and child health:** Maternal mortality remains among the highest in the world, with UNFPA estimating 854 maternal deaths per 100,000 live births (2022) (UNFPA Liberia).
- **Preventable child deaths and basic primary care:** Under-five mortality remains high, with persistent disparities between urban and rural areas, reflecting gaps in access to preventive and routine services (Liberia Institute of Statistics and Geo-Information Services).

- **Infectious diseases and routine prevention:** Malaria, tuberculosis, and HIV continue to be major contributors to morbidity and mortality, underscoring the importance of immunization, community case management, and nurse-led prevention efforts. 6
- **System constraints that drive outcomes:** Chronic shortages of trained health workers, frequent commodity stockouts, fragile supply chains, limited diagnostic capacity, weak referral systems, and uneven quality across facilities continue to undermine care delivery (USAID Global Health Supply Chain Program).
- **Health security and outbreak readiness:** While progress has been made in laboratory systems and disease surveillance, financing instability and workforce shortages remain significant risks to sustained preparedness (Frontiers).

Liberia and USAID Funding Shifts

In 2025, Liberia experienced one of the most abrupt and visible impacts of the U.S. foreign assistance pullback, with immediate consequences for frontline service delivery. Reporting from mid-2025 described empty medicine shelves, loss of contraceptives and nutrition supports, grounded ambulances, and disruptions to community health worker payments, particularly in rural areas (AP News).

The scale of this disruption reflects Liberia’s historic reliance on U.S. support. USAID assistance has been estimated at approximately 2.6 percent of Liberia’s gross national income and nearly 48 percent of the national health budget, with an estimated \$290 million in undisbursed funding affected in 2025 (AP News). HIV programs also reported service interruptions linked to the funding freeze, affecting staffing, continuity of care, and program operations (UNAIDS).

More recently, the United States announced a new **U.S.–Liberia Bilateral Health Cooperation Memorandum of Understanding** under the *America First Global Health Strategy*. This agreement signals a shift toward government-to-government financing arrangements, with explicit expectations for increased domestic health spending and a transition toward greater national self-reliance (U.S. Department of State; U.S. Embassy in Liberia). Public materials describe a five-year framework with U.S. support capped at a defined level and corresponding commitments by Liberia to raise domestic health investments. Draft versions of the agreement also reference workforce absorption targets beginning in 2027, including the integration of doctors, nurses, and other health cadres into the government payroll which is an important consideration for the 2026–2028 strategic outlook (Health Policy Watch).

Strengths & Challenges

Strengths in Liberia for NFA to build on

Liberia has several important strengths that create a solid foundation for NFA’s work. At the national level, there is a clear and increasingly coherent policy direction for child, maternal, and community health, which provides a “north star” for partners seeking to align programs, metrics, and advocacy. At the community level, Liberia has continued to invest in its community health workforce, with community health workers more fully integrated into national plans and supported by improvements in supply-chain approaches such as kitting and last-mile delivery. There has also been measurable progress in specific health-system functions, including laboratory governance, workforce development, and quality systems which are critical assets for diagnostics, surveillance, and outbreak preparedness. While macroeconomic improvements do not directly translate into health gains, recent stabilization signals reported by the World Bank suggest a slowly improving environment for domestic resource mobilization, which is an important backdrop for longer-term sustainability. These conditions create an opportunity for nurse-led, community-based continuity strategies like NFA’s.

Challenges most relevant to NFA

At the same time, Liberia continues to face challenges that directly affect frontline nursing care and service continuity. The health system remains highly sensitive to financing volatility and donor transitions, with rapid funding shifts leading to stop-start programs, staffing gaps, and disruptions in essential commodities. Access to high-quality primary care is uneven, particularly in rural and hard-to-reach areas where distance, transportation constraints, workforce shortages, and facility readiness all play a role. Persistent weaknesses in supply-chain reliability, especially stockouts and limited warehousing and inventory systems, continue to undermine service delivery even where trained staff are present. Workforce development and retention remain ongoing concerns, as training capacity, rural deployment, and the pace of government payroll absorption lag behind need. These pressures are felt most acutely in services for women, adolescents, and families, where family planning and maternal health programs are especially vulnerable to political, operational, and funding disruptions. These pressures reinforce the need for NFA to strengthen systems for continuity, quality, data, and sustainability.

NFA 2026 & Beyond

As Nursing For All looks ahead to 2026 and beyond, the external environment in Liberia is shifting in ways that directly affect how and where the organization can have the greatest impact. This context underscores the importance of NFA's nurse-led model and highlights the need to continue a focused, adaptable strategy that balances near-term stabilization with longer-term system strengthening. This environment makes organizational infrastructure, model clarity, and diversified funding especially important over 2026–2028.

- **Nurse-led system strengthening remains a high-value opportunity.** In a constrained funding environment, Liberia and its partners are prioritizing fewer, higher-impact investments tied to primary care, workforce capacity, and outbreak readiness. NFA's focus on nursing workforce quality, community–facility linkages, and continuity support positions for the organization to deliver measurable value aligned with national and bilateral priorities.
- **The near-term environment is transitional, requiring flexibility and readiness.** The period from 2026–2028 is likely to be defined by stabilization following 2025 disruptions, alongside new government-to-government financing frameworks and expectations for increased domestic workforce absorption. NFA's ability to demonstrate impact, support service continuity, and adapt to evolving funding structures will be critical to sustaining and scaling its nurse-led model.

Together, these conditions reinforce the need for a nurse-led, systems-oriented strategy that prioritizes continuity, quality, and organizational readiness.

Strategic Priorities, Goals, and Objectives

Priority 1: Build Capacity – Strengthen Organizational Infrastructure

Rationale

NFA's nurse-led model is working well on the ground, and the organization has made meaningful progress in establishing core internal structures through committed, hands-on leadership. NFA's impact and ambition have grown, however, and the organization is reaching a point where its working-board model alone makes it difficult to move forward quickly, consistently, and strategically. Strengthening administrative, data, and fundraising capacity will help NFA build on what is already working, reduce pressure on a small group of leaders, and better position the organization to support nurses and demonstrate impact over time.

Goal: Build a sustainable and well-supported organizational structure that amplifies NFA's nurse-led programs, strengthens accountability, and supports leadership continuity as the organization grows.

Key Objectives

To advance this goal, NFA will focus on strengthening organizational and leadership capacity by:

1. Adding dedicated operational capacity (e.g., a part-time Director or Manager) with public health, operational, and fundraising experience to support day-to-day coordination and implementation of the strategic plan.
2. Clarifying and strengthening roles and decision-making, including documenting responsibilities, reporting relationships, and governance pathways for the Board, Program Officers, and Nurse Leaders.
3. Enhancing data and performance systems to support consistent data collection, quarterly metrics, dashboards, and clearer insight into program quality and outcomes.
4. Continuing and supporting regular feedback and accountability touchpoints including staff and board check-ins aligned with strategic priorities and milestones.
5. Strengthening board capacity and diversity over time to support future growth, including expertise in fundraising, global health, and business strategy.

Priority 2: Clarify and Elevate NFA's Model and Impact

Rationale

NFA's nurse-led, community-based model is one of the organization's greatest strengths. The model's uniqueness, however, is not always fully understood by donors, partners, or external audiences who may be more familiar with physician-led or externally driven global health approaches. NFA's model and impact can be elevated by more clearly and confidently articulating what makes its work distinct, why nurses are central to impact, and how nurse-led programs translate into meaningful and measurable outcomes for communities in Liberia.

Goal: Clearly document and communicate NFA's distinctive nurse-led public health model and its impact in Liberia.

Key Objectives

1. Revisit and approve updated mission and vision statements and develop core values that reflect NFA's next phase of growth.
2. Document and publish a clear Nurse-Led Public Health Model framework grounded in Liberian leadership, prevention, and local ownership with a coherent operating system that aligns governance, accountability, and learning around a nurse-led, community-based model.
3. Strengthen storytelling by capturing nurse and patient experiences and integrating them into fundraising, communications, and advocacy.
4. Update NFA's branding and website to reflect program outcomes, nurse leadership, and community impact.
5. Produce an annual impact report co-created with Program Officers and Nurse Leaders.

Priority 3: Diversify and Grow Funding Streams

Rationale:

There is strong confidence in NFA's mission, reputation, and donor relationships, but a more intentional and professionalized fundraising approach to support its next phase is needed. Diversifying funding sources will allow NFA to reduce financial risk, better support core infrastructure, and plan more strategically over multiple years, particularly in a constrained and competitive funding environment.

Goal: Expand and diversify NFA's funding base to support program stability, infrastructure, and thoughtful growth.

Key Objectives

1. Develop a three-year fundraising strategy with clear targets for individual donors, foundations, and institutional partners.
2. Increase unrestricted annual revenue from approximately \$100,000 to at least \$200,000 by 2028.
3. Reintroduce and professionalize annual fundraising events and donor engagement efforts.
4. Explore Liberia-based or mission-aligned revenue opportunities that support program sustainability.

Priority 4: Ensure Program Sustainability and Local Capacity Building

Rationale

Sustaining ongoing services such as mental health, family planning, and chronic disease support are of importance to NFA's future. NFA's long-term impact depends not only on reach, but on consistent program quality, continuous learning, and strong nurse leadership at the community level. Identifying opportunities to build on existing strengths by investing more intentionally in continuing education, peer learning, and quality assurance, will ensure that programs remain effective, resilient, and adaptable over time.

Goal: Strengthen the Liberian nursing workforce and program operations to ensure durable, high-quality community impact.

Key Objectives

1. Continue recognition efforts and explore new incentives or micro-grants to encourage excellence, leadership, and innovation among nurses. 10
2. Deepen collaboration with Liberia's Ministry of Health and nursing institutions to align with national priorities and share data and lessons learned.
3. Ensure regular quality assurance activities, including site visits and patient feedback mechanisms.
4. Explore continuing education, leadership or peer learning opportunities for Nurse Leaders and Project Officers focused on clinical excellence, management, and data literacy.

Priority 5: Prepare for Thoughtful Expansion

Rationale

NFA is enthusiastic about expanding its reach, particularly deeper into rural Liberia to increase access to care and improve health. Expansion, however, will be guided by data, capacity, and alignment with NFA's nurse-led model, rather than by opportunity alone. Building a strong, well-recognized model and partnerships to help to extend impact and preserve quality and local ownership will also be explored.

Goal: Build organizational and programmatic readiness for geographic and programmatic expansion aligned with NFA's mission and capacity.

Key Objectives

1. Strengthen board capacity and diversity to support future growth, including expertise in fundraising, global health, and business strategy.
2. Continue to engage Program Officers and local partners to inform future growth and partnership decisions grounded in the Liberian context.
3. Develop clear expansion criteria and readiness indicators related to staffing, funding, partnerships, and data.
4. Explore replication of the NFA model through partnerships in neighboring countries rather than direct expansion.

