

For July, NWONL has asked Debbie Brinker, MSN, RN, CNS, Washington State University Dean for Clinical Affairs and Faculty; AACN Clinical Scene Investigator, Academy Faculty and Leadership Consultant to reflect on her distinguished career and offer what are some key learnings from her work in DEI. With 46 years of Professional Nursing, Debbie humbly offers some lessons learned and a call to action for Nurse Leaders at all levels. We are truly grateful for her unwavering service and commitment to the Nursing Profession as well as NWONL.

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## Equity, Diversity, Inclusion & Belonging: Lessons Learned and a Call to Action

*“You’re never too old to learn and you’re never too young to lead” – Kofi Annan*

As with all of you the past year is one of self-reflection as our world swirled, engulfed with COVID, highlighting inequities and disparities in our population; a year where there is a societal cry to acknowledge and address issues of equity, diversity, and inclusion in our communities, workplace and in healthcare. It’s been a year to think differently and be open to possibilities...with the guts and grit to transition to something new, follow (and guide) the energy of individuals who are hungry and impatient for change. Will this be OUR TIME to lead, mentor, and follow as nursing leaders to address social justice and grow a culture of inclusion and belonging?

### Ask more, tell less.

I can think of examples when I explained why an offensive comment by a patient should be ignored when directed at myself, one of my staff or a student; examples of when I advised a student how to handle a situation, where I wish I had used better inquiry; or when it took me days to realize a family was resisting removing life support from their child because they needed to be outside so his soul could be released to the heaven (note: I was honored to be part of this beautiful experience once I listened and was an advocate). My realization: the more I know, the more I need to learn. Lean in with curiosity, inquiry, humility, and grace.

### Calling someone in versus calling someone out.

Being right to confront a colleague who was perceived to demonstrate racist or discriminatory behavior by calling one out can lead to humiliation. People don’t change by being shamed. Calling someone in is about inviting them to better understand how their behavior or communication was/can be perceived. Present with humility and gentility. Be brave enough to share examples when you felt badly – share how you unpacked the situation, provided grace and humbleness as you acknowledge it didn’t go well, and what you learned from it moving forward. Yes, there possibly is an individual that may need to not be on your team if behavior impacts individuals and the work environment. However, this is a lead-by-example situation. Mentor/coach and demonstrate to students and staff, to reinforce positive behavior around EDI.

## Teaching/leading efforts in new and different ways.

In my work with the Washington Center for Nursing, I've learned so much from mentors that have "invited me in" to see racism and discrimination with a new lens; that our efforts have been glacially slow, and we need to not just burden our colleagues of color but grow in our ally activism. NWONL and other organizations create opportunities to collectively learn from each other and lead change. Are we not all leaders? Be part of the change, don't sit on the sideline.

## Take more risk and support students/newer nurses to lead.

Our students and newer nurses are hungry for change. I've been privileged to co-facilitate a nursing elective at WSU re. antiracism and social justice in nursing. Each session was designed by students and included self-reflection and a call to action. How do we use students/new nurses' energy, guide them, and give them opportunities to be part of our EDI initiatives? They will learn more about the school/work culture, feel a sense of belonging and "mattering" to the organization, and will be guided in their efforts that synergize with the EDI strategic priorities. We have a catch-22 type situation on our hands... we want/need newer nurses to lead in the moments, but they are not optimal, *yet*. It means we must make space for them to practice, feedback and learn as much and as early as possible, even if it's rough edged and non-optimal (at first). They have the motivation, let's give them the space and support. Especially around EDI initiatives.

## Continue to learn and grow as leaders in our EDI journey.

Diversity is not inclusion. It's a starting point. It's a responsibility and a privilege to engage, lead, and follow to grow a learning culture with an unwavering commitment to equity. It's not enough to recruit underrepresented students or nurses...how do we "invite them in" to be a part and create a sense of belonging? There isn't a script or framework for overcoming this challenge. It is so very personal and intimate across many levels. However, I challenge all of us to contemplate this, as we have all invariably been "outside" and not invited in at some point in our lives.

Here's to having more questions than answers. To collectively sharing our struggles and successes that lead us to new thinking. I hope you join me in our collective EDI learning journey at NWONL and our Region.

### **Debbie Brinker, MSN, RN, CNS**

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