

Short-Term Outcomes of a Diversity, Equity, and Inclusion Institute for Nursing Faculty

M. Rebecca O'Connor, PhD, RN; Wendy E. Barrington, PhD;
Diana Taibi Buchanan, PhD, RN; Dan Bustillos, PhD; Meghan Eagen-Torkko, PhD, ARNP;
Anne Kalkbrenner, MN, RN; Sharon S. Laing, PhD; Kerry W. Reding, PhD, RN; and
A.B. de Castro, PhD, RN, FAAN

ABSTRACT

Background: Student populations in the United States are increasingly diverse, prompting the need to make learning environments in schools of nursing more inclusive. Training for faculty is needed to support this work; however, evidence regarding best practices to make classrooms more inclusive is lacking. **Method:** A 3-day Diversity, Equity, and Inclusion (DEI) Institute was developed and conducted to create inclusive learning environments; facilitate crucial conversations on racism and other -isms, especially in the context of nursing and health equity; and practice these skills and develop or transform at least one actual class activity. **Results:** DEI Institute satisfaction and impact were overwhelmingly positive, and statistically significant increases in DEI-related teaching self-efficacy were observed post-Institute (p values ranging from .0004 to $< .0001$). **Conclusion:** The DEI Institute is one example of a successful approach that can create inclusive learning environments and address issues related to health equity. [*J Nurs Educ.* 2019;58(11):633-640.]

Dr. O'Connor is Assistant Professor, Dr. Barrington is Assistant Professor, Dr. Buchanan is Associate Professor, Ms. Kalkbrenner is Lecturer, Dr. Reding is Associate Professor, and Dr. de Castro is Associate Dean for Diversity, Equity, and Inclusion, University of Washington School of Nursing, Seattle, Dr. Bustillos is Assistant Professor, and Dr. Eagen-Torkko is Assistant Professor, University of Washington School of Nursing and Health Studies, Bothell, and Dr. Laing is Assistant Professor, University of Washington Nursing and Healthcare Leadership, Tacoma, Washington.

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Address correspondence to M. Rebecca O'Connor, PhD, RN, Assistant Professor, University of Washington School of Nursing, Box 357262, Seattle, WA 98195; e-mail: rebeccaow@uw.edu.

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Despite altruistic motives and a desire by university faculty to create inclusive learning environments in health sciences education, students from marginalized groups often report experiences of distress from microaggressions, bias, and/or exclusion in educational settings (Macy Foundation, 2018; O'Connor, 2017; Sue et al., 2013). In response to this, the American Association of Colleges of Nursing (AACN) has called on academic nursing programs to advance diversity, equity, and inclusion (DEI) efforts in order to improve the quality of nursing education through diverse and inclusive educational environments and prepare nurses to effectively care for an increasingly diverse population in the United States (AACN, 2017). Specifically, the AACN (2017) states that:

When diversity is integrated within inclusive educational environments with equitable systems in place, assumptions are challenged, perspectives are broadened, and socialization across a variety of groups occurs, resulting in intellectual and cognitive benefits for all learners. (p. 2)

A 2018 Josiah Macy Jr. Foundation report titled "Improving Environments for Learning in the Health Professions" echoes the call by the AACN and defines learning environments as "the social interactions, organizational cultures and structures, and physical and virtual spaces that surround and shape participants' experiences, perceptions, and learning [where] every participant is both a learner and a teacher" (p. 36). Among its recommendations, the Macy Foundation (2018) report calls for team-based training to establish the trust, knowledge, and skills necessary to recognize and mitigate the effects of explicit and implicit bias in learning environments; obtaining requisite skills to successfully engage historically marginalized groups; and the development of self-awareness and reflective practice. The report also asserts that learning environments should consider:

safety (including both physical and psychological), engagement (promoting collaborative learning), connectedness (fostering a sense of belonging), infrastructure (providing resources and leadership), access (providing a variety of resources with consideration of the Americans with Disabilities Act and equity issues), and climate (promoting inclusion). (Barton, 2018, p. 516)

Reports and position statements by organizations such as the AACN and the Macy Foundation highlight the need to make health sciences educational environments more inclusive as a requisite step to addressing the inequity and exclusion experienced by students of diverse identities. Nursing and other health sciences faculty and leaders must commit to and dedicate the necessary resources to this charge if inclusive learning envi-

ronments are to be realized. Although transformational change is essential to creating truly inclusive environments, it can be challenging—particularly when change also involves addressing institutional racism, power differences, privilege, and/or implicit biases. For example, antiracism and education scholar Derald Wing Sue (2013) stated that learning to effectively facilitate conversations on race “in education is especially urgent as difficult dialogues on race become unavoidable, and well-intentioned teachers find themselves unprepared to deal with the explosive emotions that result in polarization of students” (p. 664). Faculty have expressed that they do not feel prepared to address critical conversations on topics such as power, privilege, dominance, or institutionalized racism, and professional development on these topics is needed to support this work (Booker, Merriweather, & Campbell-Whatley, 2016; Mayo & Larke, 2011). Research by Sue et al. (2009) reveals that engaging in conversations about racism is particularly challenging for White faculty due to fears related to revealing personal biases/prejudices or losing control of classroom discussions and a lack of skills and knowledge, such as the ability to recognize or understand difficult discussion dynamics.

The context of nursing and health sciences education presents challenges to addressing DEI topics as well. First, faculty lack diversity—85% of nursing faculty nationally are White (National League for Nursing, 2015). The nature of nursing practice also makes the need to have constructive conversations and self-reflection particularly urgent given that schools of nursing (SONs) aim for not only an inclusive educational environment but for preparation of nurses who can provide equitable care for a diverse population. Thus, preparation of nurses should include an understanding about the influence of racism and other systems of marginalization and oppression, critical self-reflection, and lifelong learning. Accordingly, training that specifically addresses DEI in the classroom and curriculum is needed for faculty. It is important to note that our efforts to develop such a DEI training were concurrent with a number of other school-level initiatives (e.g., development and implementation of the SON’s DEI strategic plan, establishing an Office of DEI and hiring a permanent Associate Dean of DEI) and university initiatives (e.g., the University of Washington [UW] Race and Equity Initiative) to systematically address marginalization, discrimination, and inequities in education and nursing.

There is a dearth of research on the effectiveness of faculty training to improve the inclusivity of the educational experience in higher education. A search of PubMed®, CINAHL®, UW libraries, and Google™ Scholar using the terms *faculty*, *diversity*, *equity*, *inclusion*, and *training* identified two qualitative studies involving faculty trainings that focused on improving the educational experience for marginalized students and one quantitative study that specifically targeted gender bias in the classroom. Booker et al. (2016) conducted a week-long faculty training to incorporate culturally diverse teaching and assessment strategies based on multicultural education frameworks (e.g., Banks & Banks, 2013; Grant & Sleeter, 2011). Training content included enhancing participants’ awareness of inequities and importance to student experience, campus resources, and examples of how to make teaching more culturally diverse (Booker et al., 2016). Focus groups and interviews revealed that

faculty developed a greater understanding of issues related to diversity, became more aware of their language and personal impact in relation to course materials, and were intentional in their approach to increase inclusion in their teaching (Booker et al., 2016). Students stated that classrooms of faculty attendees were more inclusive, diversity was visible, and course activities added to their personal and professional growth and acceptance of *otherness* (Booker et al., 2016). Mayo and Larke (2011) described an initiative that sought to have a curriculum in all disciplines reflect multicultural best practices at a large public university. Training content included increasing participants’ awareness of the multicultural nature of the university, diverse learning styles and teaching approaches, discipline-specific content ideas, culturally enriched teaching techniques, culturally sensitive assessment strategies, effective intercultural and cross-cultural communication, and communication during difficult moments (Mayo & Larke, 2011). On training evaluations, faculty reported that the training was beneficial and would help them become more inclusive in their classrooms, whereas students of faculty who completed the training in one department responded that course readings reflected diverse voices (Mayo & Larke, 2011). Finally, Moss-Racusin et al. (2016) conducted a 2-hour bias workshop for life sciences faculty attending a National Academies Summer Institute for undergraduate education. Content included an active-learning approach, presenting diversity as a shared versus individual responsibility, and evidence-based interventions to address gender bias (Moss-Racusin et al., 2016). Compared to 2 weeks preworkshop, participants reported an increased awareness of gender bias ($p = .04$), expressed less gender bias ($p = .03$), and expressed a greater willingness to engage in actions to reduce gender bias ($p < .001$; Moss-Racusin et al., 2016).

Although limited research has explored the influence of faculty trainings on inclusivity in classrooms, other research has studied the effectiveness of anti-bias training more generally. For example, Devine et al. (2017; Carnes et al., 2015) have shown short- and long-term effectiveness of a prejudice habit-breaking intervention to address anti-Black bias among university students and gender bias among faculty in science, technology, engineering, math, and medical (STEMM) departments. The prejudice/bias habit-breaking intervention is based on adult learning and behavior-change principles, and the training approach conceptualizes prejudice/bias as a habit that requires time, motivation, and effort to change (Devine et al., 2017). Training content focused on increasing awareness, understanding the consequences of prejudice/bias, and learning evidence-based strategies shown to effectively reduce bias (i.e., individuation, perspective-taking, stereotype replacement, counter-stereotype imaging, and increased intergroup contact; Devine et al., 2017). Devine et al. showed that among 301 faculty in 46 STEMM departments at a large public research university who received the 2.5-hour gender bias training, statistically significant increases were observed in personal bias awareness ($p = .009$), internal motivation ($p = .028$), gender equity self-efficacy ($p = .026$), gender equity positive outcome ($p = .039$) 3 days posttraining, and in personal bias awareness ($p = .001$), and gender equity self-efficacy ($p = .013$) 3 months posttraining, compared with 1,153 faculty in 46 control depart-

TABLE 1
Overview of DEI Institute Activities and Objectives

Example Activities	Content Delivered by	Associated Objectives
Day 1		
Read aloud anonymous first-person instances of discrimination experienced by SON students and discuss how they impact the SON student experience	UW SON Innovative Educator Fellow	1) Create inclusive learning environments for all students
Share examples of how to generally create inclusive learning environments	UW Center for Teaching and Learning staff	1) Create inclusive learning environments for all students
Self-reflection, small and large group activities to understand privilege and address microaggressions	Professional Facilitators	2) Facilitate crucial conversations on racism and other -isms, especially in the context of nursing and health equity
Day 2		
Demonstrate and role-play strategies (e.g. how to interrupt, how to address audience resistance) to facilitate conversations on racism, other -isms in small and large groups	Professional Facilitators	2) Facilitate crucial conversations on racism and other -isms, especially in the context of nursing and health equity
Day 3		
Role-play strategies to facilitate difficult conversations using the HEALS model and real classroom examples	UW SON DEI mentors	3) Practice how to respectfully and effectively integrate diverse voices/individuals/communities into our nursing curriculum to include the actual development or transformation of at least one class activity in small groups
Create new or transform existing classroom activity that incorporates principles of DEI independently and in small groups with DEI mentor support	UW SON DEI mentors	
<p><i>Note. DEI = diversity, equity, inclusion; SON = School of Nursing; UW = University of Washington.</i></p>		

ments who did not receive the training (Carnes et al., 2015). In addition, compared with control departments, STEMM departments who received the intervention increased female faculty hires by 15% ($p = .07$) 2 years posttraining (Devine et al., 2017). Another randomized controlled trial of 292 non-Black university students using Devine’s prejudice-breaking intervention also showed long-term behavioral effects related to beliefs and attitudes toward Black individuals for students who received the intervention compared with controls at 2 weeks—for example, more likely to identify bias as wrong in themselves or others (odds ratio [OR] = 2.468, 95% confidence interval [CI] = [1.278, 4.984]) and 2 years after the intervention (more likely to publicly disagree with the statement “stereotypes are harmless” ($OR = 4.15$, 95% CI = [1.51, 12.84]; Forscher, Mitamura, Dix, Cox, & Devine, 2017).

To address the need to develop faculty knowledge and effectiveness in addressing DEI topics in teaching, we developed the DEI Institute based on the current evidence reviewed above and assessed the short-term outcomes of the DEI Institute using quantitative research methods. Specifically, the objectives of the DEI Institute were to provide SON faculty with the knowledge and skills to create truly inclusive learning environments,

facilitate crucial conversations on racism and other -isms, and incorporate DEI topics throughout all curricula.

METHOD

Exemption was granted from the UW Institutional Review Board to collect anonymous data from DEI Institute participants before and after the DEI Institute.

DEI Institute Planning, Development, and Training of Mentors

University-level funding was obtained, and 25% full-time equivalent was designated to support the planning and development of the DEI Institute. To guide the development of DEI Institute content (Table 1), learning objectives and outcomes were iteratively developed during the fall quarter 2017 through feedback from multiple stakeholders including students, faculty, and school-level and university-level leadership. Based on prior research discussed above (e.g., increasing awareness from Devine et al., 2017) and stakeholder feedback (e.g., faculty requests for opportunities to practice necessary skills), DEI Institute activities targeted awareness-building, creating inclusive environments for

diverse learners, managing difficult conversations on racism and opportunities to practice these skills, incorporating DEI into curriculum, normalizing mistakes when engaging in DEI work and how to handle mistakes with humility, and providing information on existing resources (Booker et al., 2016; Devine et al., 2017; Mayo & Larke, 2011; Sue, 2013). Specific DEI Institute content was then iteratively developed over the winter and spring quarters 2018 in collaboration with SON DEI mentors.

Additional university-level funding was also secured to train a group of SON DEI faculty mentors to support the integration of DEI into curriculum. Training multiple faculty mentors was intentional to (a) build capacity among multiple individual mentors across all three UW campus locations, (b) develop multiple individuals who faculty/students can seek out for support in DEI work and who are not in managerial or administrative roles, (c) demonstrate that DEI work does not rest with just a few individuals, and (d) develop a network of support and resources between the DEI mentors. The nine faculty mentors were identified based on their prior track record of incorporating DEI into their teaching practices. DEI mentors received additional DEI training together, iteratively helped develop the DEI Institute content, cofacilitated day 3 of the Institute, and continue to serve as DEI resources for their respective campus locations. DEI mentor training included a broader 5-hour training in inclusive teaching strategies; objectives included:

- How to model and facilitate cultural humility in the classroom/curriculum, led by the UW Center for Teaching and Learning staff.
- How to recover when things go wrong in the classroom, led by a UW educational consultant, and a 3-hour training on a specific method to initiate difficult conversations in the classroom, led by University of California San Francisco (UCSF) SON faculty (The HEALS [Halt, Engage, Allow, Listen, Synthesize] model; UCSF SON, 2017).

Based on DEI Institute objectives, outcomes, and existing literature, DEI mentors refined the content of the Institute during the latter portion of the planning year. In recognition of their time and effort, DEI mentors were provided a modest honorarium.

DEI Institute

The DEI Institute was scheduled for the final 3 weekdays (Wednesday through Friday) before the start of fall quarter 2018 in an effort to minimize conflicts with beginning of academic year retreats and teaching obligations. All SON faculty and instructors of any rank across all three UW system campuses were invited to attend. There are 112 full-time faculty and lecturers and approximately 50 adjunct/clinical instructors at all three SON campus locations.

Content experts delivered specific components of the DEI Institute in order to provide multiple viewpoints and relevant expertise (Table 1). During the first half of day 1, the SON innovative educator fellow facilitated an exercise where participants read aloud anonymous experiences of discrimination by her students in the SON to establish the need to create more inclusive learning environments and staff from the UW Center for Teaching and Learning—facilitated inclusion activities. During the second half of day 1 and day 2, local professional social

justice facilitators led activities on how to facilitate conversations on racism and other -isms. During the first half of day 3, SON DEI mentors facilitated training on how to address “hot moments” in the classroom using the HEALS model based on prior HEALS training by the mentors. During the second half of day 3, participants were given time to individually develop or transform a class activity that incorporated elements of DEI. DEI mentors served as resources to participants and facilitated small-group discussions on how to effectively deliver these activities based on the mentors’ prior training and experience with incorporating DEI in their own teaching.

Activities across all 3 days included a mix of active-learning content delivery, individual reflection, and small and large group activities. Of critical importance to self-efficacy, acquisition of knowledge and skills, and ultimately behavior change, we incorporated opportunities for participants to role-play various scenarios throughout the DEI Institute (e.g., addressing resisters in an audience, addressing microaggressions during a class) and to work individually and collectively to develop an activity that effectively incorporates DEI. To respect the intellectual property of facilitators, in-depth descriptions of specific DEI Institute activities will not be described in this article; however, some examples are provided in Table 1, and additional extensive resources can be found in *Diversity, Equity, and Inclusion: Strategies for Facilitating Conversations on Race* by Hollins and Govan (2015). Because we did not want to make attendance mandatory due to potential paradoxical outcomes (see Discussion below regarding the potential for diversity trainings to create more bias among attendees), we instead provided a \$500 honorarium and daily certificates of completion to document training hours as incentives for attending all 3 days of the DEI Institute.

Measures

Demographic Variables. Confidentiality is imperative when collecting data on sensitive topics such as DEI from colleagues who work together and have differing levels of power. Thus, we did not ask participants to divulge any demographic characteristics (identifiable or anonymous) because some attendee categories (e.g., racial/ethnic minorities, men, certain age groups) may only include one to two individuals, thus making them identifiable. Short-term outcomes of the DEI Institute were assessed by participants’ teaching self-efficacy related to DEI measured at the beginning of day 1 and the end of day 3 of the Institute, in addition to participants’ satisfaction with and impact of the DEI Institute.

DEI Teaching Self-Efficacy. Self-efficacy—defined as what skills an individual perceives she or he has or what skills can be effectively implemented in a given situation (DeChenne, Koziol, Needham, & Enochs, 2015)—is widely accepted to be a prerequisite to behavior change (Bandura, 1991; Carnes et al., 2015). Our ultimate outcome of interest is to determine whether behavior change among DEI Institute participants results in more inclusive learning environments for nursing students, measured by participant reports and student-reported measures of inclusion from course evaluations over the 2018–2019 academic year compared with the 2017–2018 academic year. Given that self-efficacy is requi-

site for behavior change, we identified DEI-related teaching self-efficacy as our main short-term outcome of interest. We were unable to identify a DEI-specific teaching self-efficacy measure. Thus, we adapted a previously validated measure developed by DeChenne et al. (2015) and used with graduate teaching assistants in STEM. The 18-item instrument's reliability has been determined to be very good (Cronbach's $\alpha = .90$). We adapted each item by adding "DEI content" or "related to DEI content" as appropriate to the end of each question (e.g., "Make students aware that I have a personal investment in them and in their learning" became "Make students aware that I have a personal investment in them and in their learning related to DEI content"). We used 17 of the 18 instrument items (the last item "Spend the time necessary to plan my classes" was not included because the DEI Institute would not affect this). DEI teaching self-efficacy was obtained by self-administered survey before the start of day 1 of the Institute and at the end of day 3 of the Institute.

DEI Institute Evaluation. Seven Likert scale questions and four open-ended questions were used to evaluate participants' satisfaction with and impact of the DEI Institute (Table 2). Evaluation questions were adapted from the work by Hollins and Govan (2015), *Diversity, Equity, and Inclusion: Strategies for Facilitating Conversations on Race*. Institute evaluation was measured in person at the end of each day and/or speaker of the DEI Institute.

Data Analysis

Distributions of the 17 DEI-related self-efficacy variables were examined for all participants who completed pre-Institute measures at the beginning of day 1 ($N = 43$) and post-Institute measures at the end of day 3 ($N = 33$). Differences in distributions were evaluated using the nonparametric Kolmogorov–Smirnov test for equality of distributions (Table A; available in the online version of this article). Domains of self-efficacy were then created to be consistent with DeChenne et al. (2015) and included teaching orientation (questions 1, 5, 11), engaging students (questions 2, 4, 7, 8), supporting students and the classroom environment (questions 3, 6, 9, 10), evaluating students (questions 12, 13, 14), and designing curricula (questions 15, 16, 17). Self-efficacy scores were created for each of the five domains by summing responses to corresponding survey items, and mean scores were calculated for each domain pre- and post-Institute (Table 3). Differences in mean scores pre- and post-Institute were examined among participants with complete data only ($N = 28$) and tested using paired t tests (Table 3). All analyses were conducted using STATA® SE version 13.0. Means for satisfaction with the DEI Institute were calculated from pooled satisfaction measures for all individual DEI Institute speakers.

RESULTS

Forty-four faculty and instructors from three UW SON campuses attended the DEI Institute—approximately 27% of all full-time and part-time faculty and instructors. Forty-two of the 44 participants attended all 3 days of the Institute. Satisfaction with the DEI Institute was consistently high among

the seven Likert-scale measures, with mean scores ranging from 1.49 to 1.66 (1 = *strongly agree* to 7 = *strongly disagree*; Table 2). Participants almost exclusively shared the perspective that the impact of the DEI Institute was very positive (e.g., "Thank you so much for this opportunity—it was awesome to have these resources invested in me as faculty") and plan on changing their teaching to incorporate DEI content (e.g., "Try HEALS"; Table 2). DEI-related teaching self-efficacy significantly increased for 13 of 17 items on the Self-Efficacy measure immediately after the DEI Institute, compared with immediately before the Institute (Table A). Analysis also shows increases in the aggregated post-Institute means for each of the five DEI-related teaching self-efficacy domains compared with pre-Institute measures (p values ranging from .002 to $< .0001$) (Table 3).

DISCUSSION

Rigorous research is lacking related to efforts that seek to create inclusive learning environments (Booker et al., 2016; Macy Foundation, 2018; Mayo & Lark, 2011; Moss-Racusin et al., 2016; Sue et al., 2009). To our knowledge, only three previous studies (Booker et al., 2016; Mayo & Larke, 2011; Moss-Racusin et al., 2016) examining the effects of faculty trainings on inclusive classroom environments have been published. Although these studies provide important information on the topic, their findings are either limited to qualitative reports or focused only on gender bias. The current study begins to address this gap by providing quantitative assessment of the short-term outcomes of a 3-day DEI faculty training designed to create more inclusive learning environments in an SON.

Faculty and instructor participants uniformly rated their satisfaction with the DEI Institute highly and expressed that they believed the DEI Institute had a positive influence on them and their teaching in open-ended questions. These findings are consistent with the research done by Booker et al. (2016) and Mayo and Larke (2011). Further, increases in post-Institute DEI teaching self-efficacy were noted for nearly all individual items of the DEI Teaching Self-Efficacy measure and all five self-efficacy domains, compared with pre-Institute levels. It should be noted that high pre-Institute measures may explain why pre- and post-differences were not significant for three other self-efficacy items: the majority of attendees responded that they *agree* or *strongly agree* with the statement in questions 5, 6, and 11 before the DEI Institute (65.7%, 64.5%, and 83.1%, respectively), leaving little room for higher ratings after the DEI Institute. These results highlight the promise that interventions such as the one described here must create more inclusive learning environments. Additionally, given that we were unable to identify measures of quantitative outcomes related to trainings focused on faculty and inclusive learning environments in existing literature, our findings can inform future similar work.

As noted previously, it is important to acknowledge that significant institutional support at both the university- and school-level facilitated the success of the DEI Institute. The AACN (2017), the Macy Foundation (2018), and others have identified institutional support as a critical element and requisite to engage in meaningful DEI work (Dobbin & Kalev, 2018; Mayo

TABLE 2
Summary of DEI Institute Evaluations

Question	N	Mean Score (1 = <i>Strongly Agree</i> , 6 = <i>Strongly Disagree</i>)	Example Quotes
The presenters clearly communicated the subject matter	22	1.49	
The presenters were skilled in facilitating discussions and activities	22	1.54	
To the extent circumstances permitted, the presenters encouraged interaction among participants and allowed time for questions and answers	22	1.66	
Discussion, exercises, and presentations stimulated me to think about the subject matter to a greater extent than I had before	22	1.56	
The presentation was well organized and activities clearly emphasized major points	22	1.50	
The content of the presentation enhanced my overall understanding of the topic	22	1.65	
The materials provided were helpful	22	1.66	
What aspects of the Summer DEI Institute contributed most to your learning?	20		<p>“Deep, meaningful conversations and interactions”</p> <p>“1) Modeling skills to address microaggressions and biases that are presented in class. 2) Ability to role-play.”</p>
How could the Summer DEI Institute be improved?	16		<p>“More time to debrief after each deep, meaningful conversation/interaction.”</p> <p>“More time to connect with the group as a whole; explicitly addressing power differentials in the room”</p>
What other DEI professional development would you like to participate in?	11		<p>“1) I would love to have faculty report back in 6 to 8 months and tell us what they have tried, what worked well and not so well. 2) Have a retreat with one of the sister campuses. 3) Faculty should publish and disseminate their DEI teaching pedagogy at conferences.”</p> <p>“Lots! LGBTQ issues—seems like there is a major lack of knowledge on these issues. We should all have the certification from the Q Center.”</p>
What is one thing you will do differently or one strategy you will try as a result of what you learned in the Summer DEI Institute?	13		<p>“Take more risks and more directly and courageously take on these conversations.”</p> <p>“1) Will be more aware of the importance of addressing issues and having difficult conversations. 2) Will be using HEALS.”</p>

Note. DEI = diversity, equity, inclusion. Adapted from “Diversity, Equity, and Inclusion: Strategies for Facilitating Conversations on Race,” by C. D. Hollins and I. M. Govan, 2015, London, United Kingdom: Rowman & Littlefield. Copyright 2015 by C. D. Hollins and I. M. Govan. Adapted with permission.

& Larke, 2011; Penner, Blair, Albrecht, & Dovidio, 2014). Another key factor for success was the designated 25% full-time equivalent for planning and development of DEI Institute objectives, content, and outcomes. Finally, the commitment and participation of the DEI faculty mentor group from across

three SON university campuses was critical to the successful development, implementation, and follow-up work of the DEI Institute.

Another important aspect to consider in the success of the DEI Institute is that participants self-selected to attend the

TABLE 3
Change in DEI Group Self-Efficacy Scores Pre- and Postparticipation in the DEI Institute

Variable	Preparticipation (N = 28)		Postparticipation (N = 28)		p Value ^a
	Mean	SD	Mean	SD	
Teaching orientation (range = 3 to 15)	11.6	2.3	13.3	1.4	.0004
Engage students (range = 4 to 20)	12.6	3.0	16.5	2.4	< .0001
Support students (range = 4 to 20)	13.2	2.6	15.6	2.2	< .0001
Evaluate students (range = 3 to 15)	7.3	2.6	10.6	2.1	< .0001
Design curricula (range = 3 to 15)	9.5	2.8	12.5	1.6	< .0001

Note. DEI = diversity, equity, and inclusion.

^a Difference in mean efficacy scores tested using paired t test.

training. Although this selection bias may limit the findings of this study to all nursing faculty (see Limitations), we made the intentional decision to not make the DEI Institute mandatory. Rather, we chose to offer a \$500 honorarium and certificates of completion that can be used toward continuing education hours to encourage participation. Our decision to make the DEI Institute optional was based on substantial evidence that suggests mandatory diversity trainings may have the opposite effect and actually cause some participants to exhibit more discriminatory behaviors or increase bias (Anand & Winters, 2008; Dobbin & Kalev, 2018; Kulik, Pepper, Roberson, & Parker, 2007; Legault, Gutsell, & Inzlicht, 2011; Moss-Racusin et al., 2016; Paluck & Green, 2009).

Although the DEI Institute was widely viewed as a success in terms of participant satisfaction, perceived impact, and statistically significant increases in DEI-related teaching self-efficacy, areas of improvement were also identified. An informal debrief discussion with participants was facilitated by DEI mentors at the end of day 3. During the discussion, DEI mentors asked participants what worked well during the DEI Institute and what could be improved, and a few participants shared challenges in how they experienced two Institute activities. These concerns were further discussed among DEI faculty mentors and will be addressed in the future as appropriate. Additionally, in Institute evaluations, participants expressed a desire for more time to debrief after each “deep, meaningful conversation/interaction” (referring to both small- and large-group activities), more time to connect with the group as a whole, and that power differentials in the room be explicitly acknowledged. In future DEI Institutes, we will conduct debrief sessions at the end of each day, we will ask that participants switch tables each day to increase connections between them, and we will acknowledge power differentials and how these may affect the experience of participants at the beginning of day 1.

Creating inclusive learning environments requires that faculty and instructors effectively address complex and difficult topics such as racism and power, which cannot be achieved by a singular event or type of approach (Carnes et al., 2015; Dobbin & Kalev, 2018; Penner et al., 2014; Williams & Mohammed, 2013). Multiple resources and activities in the SON will

continue to support the work started at the DEI Institute. The SON’s Office of DEI sponsors additional training opportunities on various DEI topics. Quarterly brown-bag lunch events led by DEI mentors serve as open forums to discuss challenges and successes related to incorporating DEI into the curriculum, share ideas and resources, and discuss hot topics such as free speech on campuses. Additionally, DEI mentors continue to serve as informal peer advisors for faculty and staff and provide colleague teaching evaluations or advice upon request.

LIMITATIONS

Although outcomes of the DEI Institute were positive and suggest that this approach holds much promise, some limitations to the current study exist. First, this study included only one SON. Activities to prioritize and promote DEI throughout the UW SON may have created an environment where faculty feel more comfortable engaging in DEI work and attending the Institute, compared with other schools that do not have DEI initiatives. Second, because we prioritized participant anonymity, a lack of demographic data precluded the ability to identify potential confounding factors associated with DEI Institute outcomes. Third, we did not independently assess the reliability and validity of the adapted self-efficacy measure. However, we believe that the adaptations made to the instrument (adding “DEI content” or “related to DEI content” to the end of each item) are not likely to substantially affect the meaning of each item; therefore, assuming similar reliability of the adapted measure to the original measure is reasonable. Finally, DEI Institute participants were self-selected, so it is likely that faculty who were more willing to integrate DEI into their curriculum were more likely to attend the Institute. Thus, it is unclear whether DEI Institute outcomes would be the same for faculty who are hesitant to incorporate DEI into their curriculum.

CONCLUSION

There is a critical need to make nursing—and all higher education instruction—truly inclusive for increasingly diverse student populations. Faculty training to develop the knowledge

and skills necessary to achieve such inclusion are needed. One successful example of such training is the 3-day DEI Institute described in the current study. Satisfaction and impact of the DEI Institute was overwhelmingly positive among faculty and resulted in improved DEI self-efficacy at the conclusion of the 3-day training. Ongoing support and training opportunities are needed for faculty to continue to incorporate DEI into their curriculum and address challenging topics such as racism when they arise in the classroom. We hope the DEI Institute can serve as an example that can be modified by other SONs and areas of higher education to fit school-specific needs in an effort to make learning environments more inclusive for all students.

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Table A

DEI Self-Efficacy Among Attendees Pre- and Postparticipation in the DEI Institute

Question	Preparticipation (N = 43)			Postparticipation (N = 33)			p Value ^a
	N	% ^b	Mean Score (1 = Not at All Confident, 5 = Very Confident)	N	% ^b	Mean Score (1 = Not at All Confident, 5 = Very Confident)	
1. I can communicate personal investment in students and DEI content.			3.70			4.39	.02
Strongly disagree	1	3.1		0	0		
Disagree	2	6.3		0	0		
Neutral	9	28.1		0	0		
Agree	15	46.9		19	59.4		
Strongly agree	5	15.6		13	40.6		
2. I can promote student participation in DEI content.			3.23			4.18	< .0001
Strongly disagree	0	0		0	0		
Disagree	9	28.1		0	0		
Neutral	11	34.4		2	6.3		
Agree	11	34.4		22	68.8		
Strongly agree	1	3.1		8	25		
3. I can promote positive climate for DEI content.			3.65			4.16	.03
Strongly disagree	0	0		0	0		
Disagree	4	12.5		1	3.2		
Neutral	9	28.1		1	3.2		
Agree	16	50		21	67.7		
Strongly agree	3	9.4		8	25.8		
Missing	0			1			
4. I can encourage student questions re: DEI content.			3.33			4.09	.05
Strongly disagree	1	3.1		0	0		
Disagree	6	18.8		1	3.1		
Neutral	11	34.4		6	18.8		
Agree	12	37.5		15	46.9		
Strongly agree	2	6.3		10	31.3		
5. My students are active receivers of DEI content.			3.81			4.33	.27
Strongly disagree	0	0		0	0		
Disagree	2	6.3		0	0		

Neutral	9	28.1		3	9.4		
Agree	14	43.8		15	46.9		
Strongly agree	7	21.9		14	43.8		
6. I can promote a positive learning attitude among students for DEI content.			3.59			4.15	.36
Strongly disagree	1	3.2		0	0		
Disagree	5	16.1		1	3.1		
Neutral	5	16.1		4	12.5		
Agree	17	54.8		17	53.1		
Strongly agree	3	9.7		10	31.3		
Missing	1			0			
7. I can encourage students to interact with each other re: DEI content.			3.09			4.00	< .0001
Strongly disagree	1	3.1		0	0		
Disagree	7	21.9		2	6.3		
Neutral	17	53.1		5	15.6		
Agree	6	18.8		17	53.1		
Strongly agree	1	3.1		8	25		
8. I can actively engage my students in learning activities related to DEI content.			3.24			4.24	< .0001
Strongly disagree	1	3.1		0	0		
Disagree	6	18.8		0	0		
Neutral	14	43.8		4	12.5		
Agree	7	21.9		17	53.1		
Strongly agree	4	12.5		11	34.4		
9. I can provide support/encouragement to students who are having difficulty learning DEI content.			3.14			3.88	.004
Strongly disagree	1	3.1		0	0		
Disagree	7	21.9		2	6.3		
Neutral	14	43.8		6	18.8		
Agree	7	21.9		18	56.3		
Strongly agree	3	9.4		6	18.8		
10. I can let students take initiative for their own learning related to DEI content.			2.91			3.45	.09
Strongly disagree	2	6.3		2	6.3		
Disagree	8	25		1	3.1		
Neutral	15	46.9		12	37.5		

Agree	7	21.9		15	46.9		
Strongly agree	0	0		2	6.3		
11. I can show my students respect through my actions related to DEI.			4.05			4.45	.84
Strongly disagree	1	3.1		0	0		
Disagree	1	3.1		0	0		
Neutral	4	12.5		2	6.3		
Agree	15	46.9		14	43.8		
Strongly agree	11	34.4		16	50		
12. I can accurately evaluate my students' academic capabilities related to DEI content.			2.67			3.58	.002
Strongly disagree	3	9.4		0	0		
Disagree	14	43.8		2	6.3		
Neutral	9	28.1		12	37.5		
Agree	6	18.8		16	50		
Strongly agree	0	0		2	6.3		
13. I can provide students with detailed feedback about their academic progress related to DEI content.			2.60			3.48	.004
Strongly disagree	5	15.6		0	0		
Disagree	13	40.6		4	12.5		
Neutral	9	28.1		12	37.5		
Agree	4	12.5		13	40.6		
Strongly agree	1	3.1		3	9.4		
14. I can approximately grade my students' exams/assignments related to DEI content.			2.70			3.66	.006
Strongly disagree	5	15.6		0	0		
Disagree	11	34.4		3	9.7		
Neutral	9	28.1		10	32.3		
Agree	6	18.8		14	45.2		
Strongly agree	1	3.1		4	12.9		
15. I can clearly identify course objectives related to DEI content.			3.21			4.24	.001
Strongly disagree	1	3.1		0	0		
Disagree	9	28.1		0	0		
Neutral	10	31.3		4	12.5		
Agree	8	25		17	53.1		
Strongly agree	4	12.5		11	34.4		

16. I can prepare teaching materials related to DEI content.			3.05			4.18	< .0001
Strongly disagree	2	6.5		0	0		
Disagree	10	32.3		0	0		
Neutral	9	29		4	12.5		
Agree	7	22.6		18	56.3		
Strongly agree	3	9.7		10	31.3		
Missing	1			0			
17. I can stay current in my knowledge related to DEI content.			3.33			4.15	.01
Strongly disagree	1	3.1		0	0		
Disagree	6	18.8		1	3.1		
Neutral	11	34.4		4	12.5		
Agree	10	31.3		17	53.1		
Strongly agree	4	12.5		10	31.3		

Note. DEI = diversity, equity, and inclusion.

^a Kolmogorov–Smirnov test for equality of distributions.

^b Percent totals may not sum 100 due to rounding.

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