INCLUSIVE LANGUAGE

Diversity, Equity, and Inclusion

CME OUTFITTERS

Inclusive Language

When selecting terms to describe people, whether their race and ethnicity, gender, physical ability, or even immigration status, the key is to select the most inclusive and affirming language for all potential learners. While not all-encompassing, the concepts presented here can be used in other contexts, such as discussing age, body size, socioeconomic status, education, and more. Language matters and removing potentially harmful phrases will improve our educational content and design and make them more welcoming to a broader range of learners.

THINGS TO KEEP IN MIND:

- **People First** – people are people first, not an identifier. A *person with obesity*, not an *obese person*. Two exceptions could include the Deaf and Autistic communities; members often prefer condition/identifier first. It should also be noted that any individual has a right to identify with a label as they see fit. If a person specifies they use their condition as an identifier, that should be respected regardless of common practice.

- Consider if wording could be demeaning or degrading to a person or group.

  - Does the term blame the individual for structural inequities placed on them? Is someone disadvantaged or intentionally excluded? For example, use person-first language to say *person with a substance use disorder* instead of *drug user/addict*.

  - *Minority* implies the group is less than. Are they underrepresented or have they been historically marginalized? People are not vulnerable; they are made vulnerable. Instead, use the phrase *underserved populations*. For more specificity, say *racial and ethnic underserved populations*. Always use patient-first language.

  - Avoid pejorative and dehumanizing terms, such as *ex-con*, *felon*, *illegal immigrant*, etc. Instead consider a person-first narrative, such as *person with a history of incarceration*, *returning citizen*, *undocumented immigrant*.

- *Non-compliance* places blame on the patient; the ideal term, *non-adherence*, reflects that there may be barriers that limit patient adherence.

- *Equity* is preferred. *Equity* is the process of providing individuals what they need to access the same things. *Equality* is providing the same resources without acknowledging the barriers some individuals or groups experience.

NOTE

Inclusive Language Assistance

Office has a built-in inclusive language feature. This will flag language that may show age, ethnic, gender, racial, or sexual orientation bias. The following link outlines steps on how to add it to Word and Outlook

[University of North Carolina Microsoft Office Instructions](#)

- *Health disparities* are differences in health status among distinct segments of the population (gender, race or ethnicity, education or income, disability, geographic location, etc). *Health inequities* are disparities in health/health care and are considered unfair and unjust due to their systemic, avoidable nature.

- *Cultural humility*, not *cultural competence*. No one can become competent on the nuanced and multi-varied cultural norms of patients. *Cultural humility* acknowledges this and demonstrates that practitioners are on a journey to learn more about their patients with the understanding that they will never completely know another's culture.

- Avoid terms that imply violence, such as *tackle*, *combat*, *target*, in relation to people or groups.

- Move away from race-based protocols and risk assessment tools toward race-conscious, where racism and its effects are the focus

- Avoid framing that implies that one group is *normal* and the other is *abnormal* (or one is the default and one or more have deviated from that)

Below is a brief outline of some common and more general terms to consider when developing educational activities. As language evolves, these terms may be updated. If a situation is not outlined below, use the principles above to determine appropriate terminology. For more information and a more complete list, see the references.

NOTE

Document Accessibility

To make documents accessible, use the built-in features in Microsoft Office products. For example, use styles for headings and text so that document readers will key in on the hierarchical components in the document. Avoid using color, bold, font size, etc. to emphasize a point, as screen readers are unable to detect these. Ensure hyperlink references are clear and specific (avoid *click here*). See the link in the inclusive language note above. Add alt-text to photos and graphics. Check your document's accessibility by going to Tools: Check Accessibility.

Ability Status

Individuals with disabilities are the largest minority group in the world—roughly 16% of the world's population and 1 in 4 adults in the United States has a disability. Over 90% of these individuals have an *invisible disability*, which is a physical, mental, or neurological condition that is not visibly apparent and/or does not present outwardly but still limits and impacts normal day-to-day activities. Disability relates not only to health but also to social identity and leads to inequities. Identify someone as *with a disability*, not a *disabled person*. *Disabled* and *handicapped* refer to facilities, not people. If possible, ask about what terms someone prefers.

Preferred Accessibility Terms	Terms to Avoid
Non-disabled, person without disability	Able-bodied, normal, healthy
Person with disability, person with invisible disability	Abnormal, handicapped, special, differently abled
Person with drug addiction/substance use disorder/alcoholism	Addict, alcoholic, drug abuser
Person in active use, person who misuses alcohol	Drunk, junkie
Person in recovery, person who previously used drugs	Former addict, reformed addict
Substance use disorder, drug addiction	Habit, substance abuse
Visually impaired (all-encompassing term; however, be specific when possible) Blind (complete loss of sight); legally blind (almost complete loss of sight); limited or low vision/partially sighted/visually impaired (neither legally nor completely blind)	Blind
Deaf and hard of hearing community (for people with all forms of hearing loss); partial hearing loss or partially deaf (those with some hearing loss) People who are deaf Deaf when referring to Deaf culture or the community of Deaf people	Deaf and dumb, deaf-mute, hearing impaired Note: the Deaf community typically prefers condition/identifier to person-first language
Person who uses a wheelchair/wheelchair user	Wheelchair-bound, handicapped, crippled
Lives with, has, with x	Suffers from, victim of, stricken with Similarly, do not use the word *brave* to describe someone with chronic illness

Gender and Sexuality

LGBTQ+ covers both gender and sexuality, but these should not be conflated. *Gender* is how one labels themselves while *sexuality* refers to the spectrum of whom one is attracted to; while these definitions may be applicable in general, each individual has a right to identify with the label(s) of their choosing. Gender is cultural and many cultures recognize multiple genders. In addition, *sex* is biological, and although usually considered binary, this is an oversimplification, due to the genetic and developmental differences that exist. Where possible, use gender-neutral descriptive words. Utilize and respect the name and pronouns communicated to you in all settings, regardless of whether the person is present.

Gender and/or Sexual Identity	Definition	Important Info
LGBTQ+	Shorthand/umbrella term for non-hetero/cis-normative gender or sexuality. It stands for: Lesbian, Gay, Bisexual, Transgender, and Queer. The + refers to other non-hetero/cis-normative identities not included in the acronym	See also: LGBTQIA+
SOGI	Sexual Orientation and Gender Identity	Questions asked of patients on these topics help to reduce misgendering and assumptions based on gender or sex at birth. Remember that *man* and *male* as well as *woman* and *female* are not and should not be used as synonyms. *Man/woman* relate to gender identity whereas *male/female* are adjectives that refer to sex assigned at birth
SGM	Sexual and Gender Minority	This is used more often in academic settings in place of LGBTQ+
Lesbian	Women who are sexually and/or romantically attracted primarily to women	Do not use homosexual or WSW (women who have sex with women) unless for medical accuracy
Gay	Men who are sexually and/or romantically attracted primarily to men	Do not use homosexual or MSM (men who have sex with men) unless for medical accuracy
Bisexual	Individuals who are sexually and/or romantically attracted to more than one gender	See also: pansexual

Gender and/or Sexual Identity	Definition	Important Info
Transgender	Denoting or relating to a person whose gender identity does not correspond with the sex registered for them at birth	Do not use *transgendered*
Queer	Umbrella term to describe individuals who do not identify as straight and/or cisgender	As this can be applied in a derogatory way, consider context when using. Do not use *a* in front of it.
Ally	Someone, typically straight and/or cisgender, who supports and respects members of the LGBTQ+ community	The A in LGBTQIA+ stands for *Asexual/Aromantic*, not Ally. Ally is not part of the acronym
Cisgender	Gender descriptor for when someone's gender identity matches sex assigned at birth	
Gender non-conforming	Gender identity label indicating a person who identifies outside of binary gender (man/woman). May use *they/them*: pronouns or other combination of pronouns	Also: non-binary, gender fluid, gender queer
Intersex	Individuals whose anatomy and/or physiology are not in alignment with anatomical and/or physiological features typically associated with male or female biology, due to hormonal, genetic, or developmental differences. These differences in sexual development can intersect with gender and sexuality	Do not use *hermaphrodite*. These are not "conditions" to be corrected. Medical treatment of infants to "assign" sex is discouraged

REMEMBER

Where possible, use gender-neutral descriptive words:

- *Patient* instead of *man*
- *Parent* instead of *mother*
- *Chair* instead of *Chairman*
- Etc.

Gender-Neutral Terms

The chart below provides inclusive terminology that can help to prevent erasure of some members of the LGBTQIA+ community. While these may apply primarily to topics of maternal health, HIV/PREP, and mental health, gender-neutral or inclusive terms are recommended for all educational materials when appropriate to ensure inclusion of all applicable/relevant patient populations.

In clinical situations, avoid assumptive or gendered terms for pronouns, relationships, and/or bodies until the practitioner has had a chance to establish patient consent and preference regarding terminology. After that, it is important to use the names and terms that patients have provided.

Of note, all terminology should be considered on a case-specific basis and are not recommendations for replacement of terminology in general.

Traditional Terms	More Inclusive Terminology
Both sexes, both genders	All sexes, all genders
Biological sex	Assigned sex at birth
Gay or lesbian relationship	Same-sex relationship
Man, woman	Patient, individual, person, people, adult
Women's health	Reproductive health
Pregnant woman/women	Pregnant person/people
Birthing woman	Birthing person
Motherhood/fatherhood	Parenthood

Pronoun Usage

Pronouns are important, as they affirm gender identities and form safe spaces for individuals. Do not assume someone's pronouns based on factors like appearance. Common pronouns are *he/him/his*, *she/her/hers*, and *they/them/theirs*, but there are others or they may be used in combinations (for example: *he/they*). If you are unsure about someone's pronouns, ask politely.

NOTE

Placing pronouns in a title or signature block.

Generally, pronouns are found on the line below a person's name and before their affiliation.

For example:

John Smith
(they/them/theirs) ◄ *this can be italicized or 'Pronouns: they/them/their'*
Professor of Medicine
Boston General Hospital

Race, Ethnicity, National Origin

Race is a social—not biological—construct and differs from culture to culture. The terms below relate to common American identities and/or usage but are not universal. If the group being described is known to have a preferred term, that term should be used. All terms are capitalized when used. If referring to a study/clinical trial, use the group designators specified in the reference, unless they fall within the Avoid section.

Race, Ethnicity, National Origin Identity	Explanation	Avoid
People from x racial and ethnic group or **underserved population** If more specificity is needed, use **racial and ethnic underserved populations**	Following current company standards, the preferred phrase is *(racial and ethnic) underserved populations/communities/ groups*. This term is more inclusive without causing erasure or mislabeling of specific groups of people *Minority* implies oppression and discrimination and can continue to promote structural racism through repeated use of the term (due to minimization and stereotypes of said term). Of note, by 2055, there will be no racial and/or ethnic majority group in the United States	Do not pluralize racial and ethnic groups (*Whites*, *Blacks*, etc.) to use as nouns *Colored people* *Minority/minorities* *Marginalized*
African American/Black	The terms are not always interchangeable, as some do not identify as African or American; if possible, ask a person's preference	*Blacks* (use *Black people* or *Black patients*)
Asian/Asian American/ Pacific Islander	*Asian* refers to people with ancestry from the Asian continent, so specify nationality or group(s) whenever possible	Same as above
Hispanic/Latin(a/o)/ Latine/Latinx	*Hispanic* refers to people from Spanish-speaking countries *Latino/a* is a person of Latin American descent. For example, people from Brazil are Latino/a but not Hispanic, and people from Guatemala are both Be specific (ask for preference)	Same as above Latinx can be controversial and may not always be appropriate
Native American/Alaska Native/Indigenous	*Native American*, *Alaska Native*, and *Indigenous* are preferred unless a specific group/tribe is known	Do not use the term *Indian*, unless referring to someone from India. However, one exception is the use of *American Indian/Alaska Native (AI/AN)*
White	If specificity is appropriate and/or warranted, can include nationality or European descent	*Caucasian* is an antiquated term that in reality refers only to individuals from the Caucasus region of Eurasia

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