Equity-Centered Language Guidance for AcademyHealth's Annual Research Meeting

In the interest of creating an inclusive conference environment and uplifting best practices, AcademyHealth offers the following communication guidance adapted from the CDC's "Health Equity Guiding Principles for Unbiased, Inclusive Communication," and the AMA and AAMC's "Advancing Health Equity: A Guide to Language Narrative and Concepts."

Key Principles	Instead of this	Try this
Avoid use of adjectives such as vulnerable, marginalized and high-risk. These terms can be stigmatizing. These terms are vague and imply that the condition is inherent to the group rather than the actual causal factors. Try to use terms and language that explain why and/ or how some groups are more affected than others. Also try to use language that explains the effect (i.e., words such as impact and burden are also vague and should be explained).	Vulnerable groups Marginalized communities Hard-to-reach communities Underserved communities Underprivileged communities Disadvantaged groups High-risk groups High-burden groups	Groups that have been economically/ socially marginalized Groups that have been historically marginalized or made vulnerable; historically marginalized Groups that are struggling against economic marginalization Communities that are underserved by/with limited access to (specific service/resource) Under-resourced communities Groups experiencing disadvantage because of (reason) Groups placed at increased risk/put at increased risk of (outcome) Groups with higher risk of (outcome) For scientific publications: Disproportionately affected groups Groups experiencing disproportionate prevalence/rates of (condition)
Avoid dehumanizing language. Use person-first language instead. Describe people as having a condition or circumstance, not being a condition. A case is an instance of disease, not a person. Use patient to refer to someone receiving health care. Humanize those you are referring to by using people or persons.	The obese or the morbidly obese COVID-19 cases The homeless Disabled person Handicapped Inmates Victims Cases or subjects (when referring to affected persons) Individuals	People experiencing (health outcome or life circumstance) People with obesity; people with severe obesity Patients or persons with COVID-19 People who are experiencing (condition or disability type) Person with mobility disability Person with vision impairments People who are experiencing homelessness Survivors
Remember that there are many types of subpopulations. General use of the term minority/ minorities should be limited, in general, and should be defined when used. Be as specific as possible about the group you are referring to (e.g., be specific about the type of disability if you are not referring to people with any disability type).	Minorities Minority Ethnic groups Racial groups	Specify the type of subpopulation:

Avoid saying target, tackle, combat or	 Target communities for 	Engage/prioritize/collaborate with/serve (population of
other terms with violent connotation	interventions	focus)
when referring to people, groups or	Target population	Consider the needs of/Tailor to the needs of
communities. These terms should also	 Tackle issues within the 	(population of focus)
be avoided, in general, when	community	Communities/populations of focus
communicating about public health	Aimed at communities	Intended audience
activities.	Combat (disease)	Eliminate (issue/disease)
	War against (disease)	
Avoid unintentional blaming. Consider	Workers who do not use	People with limited access to (specific
the context and the audience to determine	PPE	service/resource)
if language used could potentially lead to	 People who do not seek 	Workers under-resourced with (specific
negative assumptions, stereotyping,	healthcare	service/resource)
stigmatization, or blame. However, these		
terms may be appropriate in some		
instances.		

Context for this next section

"In all cases, pursuing equity requires disavowing words that are rooted in systems of power that reinforce discrimination and exclusion. Our primary goal is not to provide a definitive list of "correct" terms, but rather, to give some guidance on equity-focused, person-first language." (AMA and AAMC, 2021)

Below, AcademyHealth offers definitions for six foundational concepts in hopes that this builds a shared understanding of essential concepts for this work. We also recognize the need for professional cultural humility and offer the following reminders as you engage with others throughout the conference:

- DO: Use appropriate titles as indicated by individual's name tags and qualifications.
- DON'T: Address people outside of the name on their badge unless they say so.
- DO: Refrain from speaking over others or conversing during sessions.

Foundational Concepts

Accessibility: The design, construction, development, and maintenance of facilities, information and communication technology, programs, and services so that all people, including people with disabilities, can fully and independently use them. Accessibility includes the provision of accommodations and modifications to ensure equal access to employment and participation in activities for people with disabilities, the reduction or elimination of physical and attitudinal barriers to equitable opportunities, a commitment to ensuring that people with disabilities can independently access every outward-facing and internal activity or electronic space, and the pursuit of best practices such as universal design. (White House, 2021)

Diversity: Refers to the identities we carry. There are many kinds of diversity, based on race, gender, sexual orientation, class, age, country of origin, education, religion, geography, physical or cognitive abilities, or other characteristics. Valuing diversity means recognizing differences between people, acknowledging that these differences are a valued asset, and striving for diverse representation as a critical step towards equity. (AMA and AAMC,2021)

Equity: Refers to fairness and justice and is distinguished from equality. While equality means providing the same to all, equity requires recognizing that we do not all start from the same place because power is unevenly distributed. The process is ongoing, requiring us to identify and overcome uneven distribution of power as well as intentional and unintentional barriers arising from bias or structural root cause. (AMA and AAMC, 2021)

Inclusion: Providing equal opportunity to all people to fully engage themselves in creating an environment and a cultural attitude whereby everyone and every group feels accepted, has value, and is supported by a foundation based on trust and mutual respect. (<u>AcademyHealth</u>, 2020)

Health Equity: Everyone should have a fair opportunity to attain their full health potential and no one should be disadvantaged from achieving this potential." Other valuable definitions include that of Paula Braveman: "Health equity is the principle underlying a commitment to reduce—and, ultimately, eliminate—disparities in health and in its determinants, including social determinants. Pursuing health equity means striving for the highest possible standard of health for all people and giving special attention to the needs of those at greatest risk of poor health, based on social conditions... Health equity means social justice in health (i.e., no one is denied the possibility to be healthy for belonging to a group that has historically been economically/socially disadvantaged)." Another is from Camara Jones: "Health equity is assurance of the conditions for optimal health for all people. Achieving health equity requires valuing all individuals and populations equally recognizing and rectifying historical injustice, and providing resources according to need." (AMA and AAMC, 2021)

SOGI: An abbreviation for sexual orientation and gender identity. Sexual orientation is an inherent or immutable enduring emotional, romantic or sexual attraction to other people. *Note: an individual's sexual orientation is independent of their gender identity.* Gender identity refers to how people conceptualize themselves as gendered beings, including one's innate and personal experience of gender. This may or may not align with one's gender expression or biological sex. (AMA and AAMC, 2021)

References

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