

Diversity, Equity & Inclusion Guidelines

for Speakers & Presenters

AMERICAN COLLEGE
of RHEUMATOLOGY
Empowering Rheumatology Professionals

The members of the American College of Rheumatology represent a diverse global community. We commit to a diverse speaker faculty and inclusive presentation content that is mindful of the ways that data, themes, narratives and imagery are perceived by audiences of diverse backgrounds, lived experiences, cultures, genders, sexual orientation, and abilities.

The Diversity, Equity and Inclusion (DEI) Guidelines for Speakers & Presenters provide information and resources to support our shared commitment to inclusive communication. The Guide is a work in progress and will be continually reviewed and updated as language evolves.

Please review the DEI Speakers Guide as you develop your presentation.

The American Medical Association's (AMA's) Advancing Health Equity: A Guide to Language, Narrative and Concepts and the Centers for Disease Control's (CDC's), Health Equity Guiding Principles for Inclusive Communication are the main resources that inform the ACR's Guide.

Understand Your Audience

- **Ask questions about the demographic composition** and needs of your audience before you finalize your presentation. Or, assume the audience is broad.
- **Ask yourself if you have taken different life experiences** and perspectives into consideration when defining the purpose and objectives of your presentation.
- **Ask yourself if the images and words** you are using to communicate your messages will be received the same way by different people. If not, are there alternative images and words that you can use that would be more inclusive?
- **Share your presentation** with a fellow ACR/ARP member or RRF volunteer, a colleague from your organization, practice or local medical society who can provide feedback through a DEI lens.

Use Inclusive Images

INCLUDE:

- **Thoughtful consideration** of the gender, ability, and race or ethnicity of the people in the images used in communications. Avoid stereotypes and ensure equity with status.
- **Diverse gender representation** [e.g., not only women as parents, not only male physicians or female nurses].
- **Persons with visible disabilities in any communication**, not just those focused on communications dealing with ability status.
- **People from all racial/ethnic groups.** However, images should avoid unintentionally conveying that the efforts to address disparities are the responsibility of the people experiencing the disparities.
- **Only use cultural artifacts, products, or other items** when they have appropriate meaning to the communica-

tions [e.g., colors have specific, sometimes different meanings in various cultures].

AVOID:

- **Using traditional or cultural dress images** without proper context [e.g., Native American or Alaska Native person in a headdress, Asian person in cheongsam or hanbok, Black or African American person in a dashiki].
- **Showing stereotypes or inequity with status in images** [e.g., always showing a patient from a racial or ethnic minority group and a White doctor, a person who is homeless is from a racial or ethnic minority group].
- **Images that perpetuate unhealthy body images** [e.g., models in pictures are all excessively thin or **enforce narrow standards** of beauty, masculinity, femininity, or ability].
- **Caricatures of any racial or ethnic minority group** [e.g., red-inked caricature of Native

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American or Alaska Native persons, yellow-toned Asian persons].

Source: Adapted from CDC's guide to [Images Used in Communications](#)

Use Inclusive Language

General Principles from the CDC Health Equity Guidelines for Inclusive Communication

- **Avoid use of adjectives such as** vulnerable, marginalized and high-risk, as these general terms imply that the condition is inherent to the group rather than causal, systemic factors. Instead use terms such as "Communities that are underserved by/with limited access to" or "Groups placed at increased risk/put at increased risk of".

- **Use person first-language.** Describe people as having a condition or circumstance, not being a condition. For example, instead of diabetes patient, try person living with diabetes. Use patient when referring to someone within the context of receiving healthcare services.

A case is an instance of disease, not a person. Instead of using cases [when referring to people affected by a disease or condition] or subjects [when referring to people participating in a study], use reported cases of [disease/condition] [when referring to case reports, not people] and study participants.

- **Avoid saying** tackle, target, combat or other terms with violent connotation when referring to people, groups or communities. Instead of combat/fight against [disease] or tackle issues in the target population, try engage/prioritize/collaborate with/serve [population of focus].

Inclusive Language for Racial & Ethnic Groups

Key definitions:

RACE: *physical differences that groups and cultures consider socially significant*

ETHNICITY: *shared cultural characteristics such as language, ancestry, practices, and beliefs*

MORE INCLUSIVE:

- **Racial and ethnic groups** are designated by proper nouns and are capitalized. Use "Black" and "White" instead of "black" and "white."
- **When writing about people of Asian ancestry** from Asia, the term "Asian" is appropriate. For people of Asian descent from the United States or Canada, the appropriate term is "Asian American" or "Asian Canadian," respectively. To provide more specificity, "Asian origin" may be divided regionally, for example, into South Asia, Southeast Asia, and East Asia. The corresponding terms [e.g., East Asian] can be used; however, refer to the specific nation or region of origin when possible.

- **When writing about people of European ancestry**, the terms "White" and "European American" are acceptable.

- **When writing about Indigenous Peoples**, use the names that they call themselves. In general, refer to an Indigenous group as a "people" or "nation" rather than as a "tribe." Appropriate terms listed by region, but specify nation or people if possible:

- **North America:** "Native American" and "Indigenous North American" [avoid the term "Indian"]
- **Hawaiian Natives:** "Native American," "Hawaiian Native," "Indigenous Peoples of the Hawaiian Islands," and/or "Pacific Islander"
- **Canada:** "Indigenous Peoples" or "Aboriginal Peoples"
- **Alaska:** "Alaska Native people"; avoid the term "Eskimo"
- **Latin America and Caribbean:** "Indigenous Peoples"
- **Australia:** "Aboriginal People" or "Aboriginal Australians" and "Torres Strait Islander People" or "Torres Strait Island Australians"
- **New Zealand:** "Māori" or the "Māori people"

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■ **When writing about people of Middle Eastern and North African (MENA) descent,** state the nation of origin when possible. In some cases, people of MENA descent who claim Arab ancestry and reside in the United States may be referred to as “Arab Americans.”

■ **When writing about people who identify as Hispanic,** Latino/a/e/x, Chicano, or another related designation, authors should consult with their participants to determine the appropriate choice. The term “Latino” might be preferred by those originating from Latin America, including Brazil. Some use the word “Hispanic” to refer to those who speak Spanish; however, not every group in Latin America speaks Spanish. Because Spanish is a gendered language and the word “Latino” is gendered, the use of the word “Latin@” to mean both Latino and Latina can be used. “Latinx” or “Latine” can also be used as a gender-neutral or non-binary term inclusive of all genders.

■ **Use terms** like racial and ethnic minority groups or “underrepresented groups” rather than just “minorities”.

NOT INCLUSIVE:

■ **Do not use hyphens in multiword names** [e.g., write “Asian American participants,” not “Asian-American participants”].

■ **“African American” should not be used** as an umbrella term for people of African ancestry worldwide because it obscures other ethnicities or national origins; in these cases, use “Black.” The terms “Negro” and “Afro-American” are outdated.

■ **It is problematic to group “Asian” and “Asian American”** as if they are synonymous. The older term “Oriental” is primarily used to refer to cultural objects and is pejorative when used to refer to people.

■ **The use of the term “Caucasian”** as an alternative to “White” or “European” is discouraged because it originated as a way of classifying White people as a race to be favorably compared with other races.

■ **“Hispanic” is not necessarily an all-encompassing term,** and the labels “Hispanic” and “Latino” have different connotations.

■ **Nonparallel designations** [e.g., “African Americans and Whites”) should be avoided because one group is described by color, whereas the other group is not. Instead, use “Blacks and Whites” or “African Americans and European Americans.” Do not use the phrase “White Americans and racial minorities.”

■ **Avoid essentialism.** For example, phrases such as “the Black race” and “the White race” are essentialist in nature and considered inappropriate.

■ **Avoid the term “minority.”**

Rather, a “minority group” is a population subgroup within ethnic, racial, social, religious, or other characteristics different from the majority of the population. If a distinction is needed, use a modifier when using the word “minority” [e.g., ethnic minority, racial minority, racial-ethnic minority.”

■ **Do not assume members of minority groups are underprivileged.** Terms such as “economically marginalized” and “economically exploited” may be used rather than “underprivileged.”

Source: APA Style 7th Edition

Gender-Inclusive Language

Examples of gender-inclusive nouns for general use: everyone or everybody, distinguished guests, folks or folx, friends, humans, individuals, loved ones, person, people, y’all. Examples of gender-inclusive occupational nouns: chair or chairperson, congressperson or member of Congress, first-year student or first year. When describing a specific person, use that person’s pronouns [be sure to ask for their pronouns rather than assume].

Source: Brandeis University

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Gender Identity

Gender identity is a component of gender that describes a person's psychological sense of their gender. Many people describe gender identity as a deeply felt, inherent sense of being a boy, a man, or male; a girl, a woman, or female; or a nonbinary gender [e.g., genderqueer, gender nonbinary, gender-neutral, agender, gender fluid] that may or may not correspond to a person's sex assigned at birth, presumed gender based on sex assignment, or primary or secondary sex characteristics. Gender identity applies to all individuals and is not a characteristic only of transgender or gender-nonbinary individuals. Gender identity is distinct from sexual orientation; thus, the two must not be conflated [e.g., a gay transgender man has a masculine gender identity and a gay sexual orientation, a straight cisgender woman has a feminine gender identity and a straight sexual orientation].

Source: APA, 2015a

Sexual and Gender Minority Inclusive Language

The umbrella term “sexual and gender minorities” refers to multiple sexual and/or gender minority groups. The term is also used to write about “sexual orientation and gender diversity.” Abbreviations such as LGBTQ, LGBTQ+, LGBTQIA,

and LGBTQIA+ may also be used to refer to multiple groups. The form “LGBT” is considered outdated, but there is not consensus about which abbreviation including or beyond LGBTQ to use. If you use the abbreviation LGBTQ (or a related one), define it and ensure that it is representative of the groups about which you are writing. Be specific about the groups to which you refer [e.g., do not use LGBTQ and related abbreviations to write about legislation that primarily affects transgender people; instead, specify the impacted group]. These populations also encompass those who do not self-identify with one of these terms but whose sexual orientation, gender identity or expression, or reproductive development is characterized by nonbinary constructs of sexual orientation, gender, and/or sex.

Note: Consider your audience when using the term “queer”; not everyone receives this word positively. Many members of the LGBTQIA+ community have now reclaimed it.

Source: National Institute of Mental Health, n.d.

Gender and Pronoun Usage

Do not use the term “preferred pronouns” because this implies a choice about one's gender. Use the term “pronouns” or “identified pronouns” instead. When writing about a known individual, use that person's identified pronouns. When

referring to individuals whose identified pronouns are not known or when the gender of a generic or hypothetical person is irrelevant within the context, use the singular “they” to avoid making assumptions about an individual's gender. Use the forms “they,” “them,” “theirs,” and so forth.

Source: APA, 2020b

Sexual Orientation & Identity

Sexual orientation and identity: refer to an enduring disposition to experience sexual, affectional, or romantic attractions to men, women, nonbinary people, and so forth. It also encompasses an individual's sense of personal and social identity based on those attractions, behaviors expressing them, and membership in a community of others who share them. The term “homosexual” should not be used in place of “sexual orientation.”

Source: Brief for American Psychological Association et al., as Amici Curiae supporting petitioners, *Obergefell v. Hodges*, 2015, p. 7

For more information on problematic and preferred language use related to sexual orientation and gender diversity, please refer to the APA bias-free language guidelines for writing about sexual orientation and gender.

Source: APA, 2020b

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Inclusive Terminology

NOT INCLUSIVE:

- the elderly
- elderly people
- the aged
- aging dependents
- seniors
- senior citizens
- birth sex
- natal sex
- born a girl, born female
- born a boy, born male
- person with deafness
- person who is deaf
- person with blindness
- visually challenged person
- special needs
- physically challenged
- cripple
- invalid
- mentally challenged
- mentally retarded
- wheelchair-bound
- mentally ill
- nuts
- crazy
- the poor
- low-class people
- poor people
- homeless person
- prostitute
- child prostitute
- prisoner, convict
- slave
- victim, survivor
- AIDS victim
- brain damaged
- addict
- alcoholic
- drug addict

MORE INCLUSIVE:

- older adults
- older people
- persons 65 years and older
- the older population
- assigned sex
- sex assigned at birth
- assigned female at birth (AFAB)
- assigned male at birth (AMAB)
- deaf person
- blind person
- person who is visually impaired
- person who is vision impaired
- person with a disability
- person who has a disability
- disabled person
- people with intellectual disabilities
- child with a congenital disability
- child with a birth impairment
- physically disabled person
- person with a physical disability
- person who uses a wheelchair
- wheelchair user
- person in a wheelchair
- person living with a mental health condition
- person with a mental disorder
- person with a mental illness
- people whose incomes are below the federal poverty threshold
- people whose self-reported incomes were in the lowest income bracket
- person without housing
- person who engages in sex work
- child who has been trafficked

- person who is/has been incarcerated
- person who is/was enslaved
- person who has experienced/impacted by...
- person with AIDS person with a traumatic brain injury
- person with a substance use disorder
- person with alcohol use disorder
- person with a substance use disorder

Source: APA

Culturally Pejorative Language

- Indian-giver:** The term Indian-giver is offensive and is said to have roots in misunderstandings about trade customs in early relationships between Indigenous people in the Americas and White settlers. Suggested alternatives: take something back or rescind a gift.
- Powwow:** Using the word powwow erases the cultural roots, significance, and true meaning of the word. Suggested alternatives: meeting, party, or gathering.
- Spirit animal:** In some cultural and spiritual traditions, spirit animals refer to an animal spirit that helps guide and/or protect a person through a journey; equating this with an animal you like strips the term of its significance. Suggested alternatives: favorite animal, animal I would most like to be.

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- **Sold down the river:** This expression refers to enslaved people who were sold as punishment, separating them from their families and loved ones. Suggested alternative: betrayed.
- **To get gypped:** The offensive term “gypped” is derived from “gypsy,” connected to the racial stereotype that Romani people are swindlers. Suggested alternative: to get ripped off.
- **To get Jewed:** The term “Jewed” is based on the anti-Semitic stereotype that Jews are cheap and/or money hoarders. Suggested alternative: to get haggled down.
- **Guru:** In Buddhism and Hinduism, gurus are spiritual teachers or guides. The term should only be used in the cultural and spiritual context of these religions. Suggested alternatives: teacher, guide, pro.

Source: Brandeis University

Make Presentations Accessible to All

For People Who Are Blind & Visually Impaired

- **Use larger font (size 30+)** and high color contrast whenever possible in presentations and for handouts.
- **Use double spacing whenever possible** in presentations and in handouts for easier reading.
- **Provide the possibility of digital copies** of handouts because accessibility programs on computers/readers can be easier than paper copies.

- **Make sure that important information is presented in a way** that is suitable for color-blind audience members in presentations and in handouts.

- **Describe your slides adequately** for people who may not be able to see the slides or read the text.

For People Who Are Deaf & Hearing Impaired

- **Use captions in videos**, if possible, for people who are deaf or hard of hearing.
- **Ensure that any audio in a presentation** is broadcast through adequately loud and clear speakers.
- **Speak directly and clearly** into the microphone.
- **Do not turn your head or move around too much** if there are lipreaders in the room.
- **Provide sign language interpreters a copy of your presentation** (with notes if possible) prior to presenting.
- **Ask any sign language interpreters** if you need to slow down your rate of speech so that they can interpret effectively.

Appendix A

From the American Medical Association's Advancing Health Equity: A Guide to Language, Narrative and Concepts

Health equity work requires an acknowledgment and re-consideration of previously taken for granted beliefs about health (and how it is produced), the health care and public health systems (and how they

work), and society (and how it is set up to advantage some and disadvantage others). Central to this work is a consideration of our language, and the narratives that shape our thinking. As we explore in this guide, dominant narratives (also called malignant narratives), particularly those about “race,” individualism and meritocracy, as well as narratives surrounding medicine itself, limit our understanding of the root causes of health inequities. Dominant narratives create harm, undermining public health and the advancement of health equity; they must be named, disrupted, and corrected. Narratives, stories, and language are, of course, deeply interconnected. Importantly, opportunity exists at each level of this narrative ecosystem (see Figure 1) to either perpetuate the status quo or to challenge and dismantle existing injustice.

Much is at stake in whose narratives dominate, receive traction, and thrive. Narratives grounded in white supremacy and sustaining structural racism, for example, perpetuate cumulative disadvantage for some populations and cumulative advantage for white people, and especially white men. Patriarchal narratives enforce rigidly defined traditional norms, and reinforce inequities based on gender. Narratives that uncritically center meritocracy and individualism render invisible the very real constraints generated and reinforced by poverty, discrimination and ultimately exclusion. ■

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