The Crofter: Sustainable Communications

Editorial

Greetings from the croft! In June, the Sustainability Special Interest Group (SUS-SIG) marked its first year of existence and we have embarked on our second year with much enthusiasm. Kate Silverthorne has written an inspiring feature article in this issue on doughnut economics and its relationship to the healthcare industry and health technology assessment. (See p. 76.) And we have two contributions for The Crofter. The first is related to one of the SUS-SIG's founding objectives, which was to register EMWA as a UN sustainability partner organisation. *Medical Writing* Editor-in-Chief Raquel Billiones explains what this means and outlines the future activities the SUS-SIG aims to initiate and coordinate within EMWA. The second is on inclusive language by Daniela Nakagawa. I first became aware of inclusive language as a physical therapy student in the early 1990s and I thought I had a pretty good idea of what this entailed.

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But in reading Daniela's article, in which she discusses inclusive language and its role in mental health and sustainability, my eyes were opened, and it has given me food for thought. Speaking of food, perhaps now is a good time to grab a doughnut, sit down, and read. Enjoy!

Kimi

EMWA becomes a partner organisation in the UN Partnership for Sustainable Development Goals platform

One of the objectives of the Sustainability Special Interest Group is to register EMWA as a United Nations (UN) sustainability partner organisation in the UN global registry of voluntary commitments and multistakeholder partnerships for Sustainable Development Goals (SDGs). "The Partnership for SDGs platform is open to all stakeholders, including Member States, civil society, local authorities, private sector, scientific and technological community, academia, and others, to register a voluntary commitment or multistakeholder partnership which aims to drive the implementation of the UN 2030 Agenda and the SDGs."[1]

And we did it!

After receiving endorsement from the EMWA Executive Committee on May 21, 2021, we submitted our registration on June 26, 2021.

Of the 17 SDGs, we chose the following three as our focus, which are closely related to EMWA activities:

Goal 3 – Ensure healthy lives and promote well-being for all at all ages

Goal 4 – Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all

Goal 12 – Ensure sustainable consumption and production patterns

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Then we planned for deliverables within the scope of these SDGs. These goals were to be achievable (and their achievement measurable) within the remit of EMWA's activities as a professional organisation of medical writers and communicators. (See Table 1).

The SUS-SIG will coordinate these initiatives and will work with other SIGs and entities within EMWA, including the VetSIG, the MedComms SIG, the SIG on Communication with the Public, and the Education Committee (EC). The SUS-SIG will also monitor the progress of the deliverables and provide an update to the EC and the membership.

References

1. About SDGs Partnerships: Sustainable Development Knowledge Platform – United Nations Partnerships for SDGs platform [cited 2021 Jul 7]. Available from: https://sustainabledevelopment.un.org/ partnerships/about.

Table 1. EMWA deliverables as a UN SDG partner organisation

SDG	Deliverable	Specific activities	Measures of success
SDG 3	Best practice document(s) and position statement(s) on different aspects of scientific and health communications	Documents on responsible reporting, fact-checking, inclusive language, etc.	Number of documents developed, published, disseminated, and translated Social media metrics
SDG 4	Educational offerings on topics relevant to sustainability in the healthcare industry	Educational offerings (e.g., webinars, workshops, podcasts) on the regulatory requirements for environment risk assessment (ERA) of healthcare products	Number of workshops, webinars, podcasts, etc. Number of participants Geographic reach
SDG 12	Data on EMWA's carbon footprint, reduction strategies towards carbon neutrality	Examination of EMWA's conference activities, travel and reimbursement policies, contracts with vendors, etc.	Collection of baseline data on EMWA's carbon footprint Strategies for reduction and offsetting
SDG 3 and 12	Advocacy for initiatives that minimise waste of research resources and efforts, and foster public trust	Initiatives such as open access, open science, transparency, disclosure and data sharing, patient centricity, etc.	Number of webinars, seminars, symposia, journal articles, newsletters focusing on these initiatives, etc. Number of participants Social media metrics

Inclusive language: A hidden power at the hands of medical writers

To work as medical writers and medical communicators demands adaptability and open-mindedness. From adopting new technologies to keeping up with the constant evolution of languages, we must update the tools we use and the way we work. Incorporating inclusive language in the materials we produce, that is, "language that avoids the use of certain expressions or words that might be considered to exclude particular groups of people,"[1] requires precisely that. By doing so, we contribute to alleviating the psychological and physical pain of many. This article aims to describe the impact of language; discuss the connection between inclusive language, mental health, and sustainability; and provide examples of inclusive language and resources for further reference. After reading this article, I hope you are inspired to use inclusive language in your documents, communication, and daily life. It is not an easy task but is one worthy of our effort.

Our words carry more than their literal meaning. They also convey our emotions and thoughts about something or someone. Through the language we use and how we use it, we transmit what we consciously or unconsciously

> "Use language to describe, not to label."
>
> *Elle Graham-Dixon*[2]

think and feel.[3] Words and ways of communicating that we learned from social and cultural experience[4] express both their explicit meaning and stereotypes and biases associated with "undesirable" features in others. They are our tools to communicate but also a repository of our prejudices.[5] Through them, we reduce those carrying these features "from a whole and usual person to a tainted, discounted one."[6] Words such as *non-white, disadvantaged, the poor, real woman, bossy, non-straight, the elderly, wheelchair-bound* or *normal,* encode our thoughts about traits we must reject. When choosing a verb over another or the passive over the active voice, we influence who or what we attribute causality and social responsibilities to and reinforce discriminatory power structures.[7] By using certain words, verbs and voices in everyday-life communications, we normalise, make routine, and support discriminating behaviours, whether we are aware of this or not.

But words can also carry our explicit intention to include others. With inclusive language, we treat everyone as equal and with respect. Inclusive language is a positive alternative to sexist, racist, biased, discriminatory, and stigma-

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tising language that alienates the person we address. It counteracts language-based discriminatory patterns; for example, by replacing *non-white* with terms such as *people of colour*, *Black* or *Brown,* we acknowledge and validate people who are not white.

Failing to communicate inclusively alienates those who would otherwise participate in all society's affairs. It excludes them because it is hostile and offensive, and when offended at work, in a doctor's appointment, or among colleagues, who would want to participate? Unfortunately, the effects of discriminatory language go beyond not visiting a biased physician or not engaging with sexist colleagues. Racist verbal abuse, for example, is related to a higher chance of dying prematurely, having a respiratory illness, high blood pressure, depression and anxiety, stress, anger, psychosis, and feeling suicidal.[8–10] Moreover, underlying non-inclusive language are prejudices that those in charge translate into life-altering policies, decisions, and behaviours. For

Figure 1. The effects of using inclusive language spread beyond SDG #3

Inclusive language reduces inequality (SDG #10) and gender inequality (SDG #5), gives access to quality education (SDG #4), decent work and economic growth (SDG #8), it fosters building sustainable cities and communities (SDG #11) and facilitates cross-sector and cross-country collaborations (SDG #17). SDG: Sustainable Development Goal.

Figure created by EMWA's graphic team based on Figure 1 in this reference.[23]
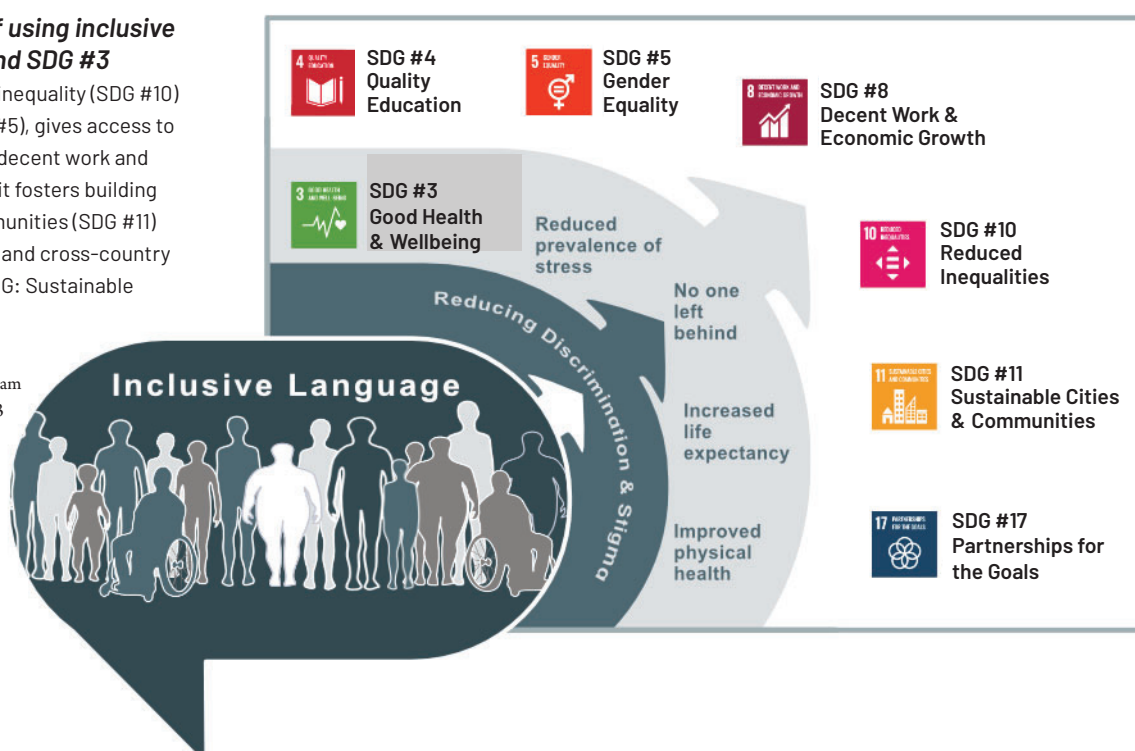
example, lower access to healthcare services and economic, political, social, and psychological processes cause health disparities[a] among different social groups.[13-18] The members of these groups have, in consequence, worse physical and mental health than those belonging to socially advantaged sections of society.

The role of inclusive language in mental health and sustainability

In 2015, the United Nations (UN) included mental health in the 2030 Agenda for Sustainable Development and the Sustainable Development Goals (SDGs).[19] Specifically, it was incorporated within SDG #3, which aims to "ensure healthy lives and promote wellbeing for all at all ages" by providing universal health coverage, including access to mental health treatment.

> Discrimination is, among others, one of the social adversities the WHO identifies as a determinant of mental disorders and a cause of physical illness.

But despite this critical step forward, the World Health Organization (WHO) Commission acknowledges that access to mental health treatment by itself will not relieve the world from the burden of mental disorders unless authorities address their causes: the adverse social conditions under which people live.[20,21] People in which some factors combine, such as belonging to a particular ethnicity, gender, age, income group, and education level, among others, are at an increased risk of having a mental health condition than those who do not share these life circumstances or characteristics.[22,23] Tackling these adversities is imperative if the UN is serious in fulfilling its commitment to SDG #3 because "social determinants are 'the causes of the causes' of ill health, including mental ill health."[22]

Discrimination is, among others, one of the social adversities the WHO identifies as a determinant of mental disorders and a cause of physical illness.[22] Like other social determinants of mental health, discrimination harms us through the body's stress response, which over time, negatively affects our psychology and physiology.[24] Members of a marginalised group (i.e. minority ethnicities and nationalities,

migrants, younger and older people, differently-abled persons, people with obesity, the LGBTQIA+ community, individuals without homes, and persons experiencing a medical ailment) are at risk of having mental health conditions in response to the discrimination they face every day.[25–28] To add insult to injury, those with mental disorders also experience stigma and discrimination, exacerbating their conditions.[29]

Given that discrimination causes mental health problems, and non-inclusive language transmits the stereotypes, stigmas, and biases by which we discriminate, using this language could perpetuate mental health problems in the population it targets. Inclusive language is a preventive way to take care of people's mental health. As medical writers and medical communicators, we are in a prime position to demonstrate and promote inclusive language in the documents and visuals we create and in our interactions with others. By doing so, we contribute to making SDG #3 a reality and simultaneously fulfilling the aims of other SDGs (see Figure 1).

Using inclusive words

According to the Linguistic Society of America (LSA), "inclusive language acknowledges diversity, conveys respect to all people, is sensitive to differences, and promotes equal opportunities."[30] In their *Guidelines for Inclusive Language*, the LSA describe its basic principles: [b]

- It does not stereotype individuals based on their group membership (e.g. "Asians are good at maths").
- It does not reference normativity, normality, or any standardised behaviour or way of being (e.g. *transexual and normal people*).
- It does not use descriptive euphemisms (e.g. *differently-abled*).
- It uses updated names for countries, professions, languages, and ethnicities (e.g., *high-, low-* or *middle-income country* instead of *first-, second-* or *third-world country*).
- It avoids the passive voice if it places individuals as the objects of others or if it

allows the subject not to be held accountable for their actions (e.g. "She was beaten").[7]

- It encourages using gender-neutral pronouns (*they, one* instead of *he, she*) and plural noun forms (e.g., *people, individuals* or *humanity* rather than *men* or *mankind*) and avoiding terms marked for masculine gender (e.g. *Congressman, mailman, fireman,* and *policeman;* use instead *Member of Congress, mail clerk, firefighter,* and *police officer*).
- It adds gender-specific modifiers (e.g. *male nurse* instead of *nurse*) or not (e.g. *boss* instead of *female boss*) to avoid the inference that the unmodified terms "only apply fully to those whose gender is not specified by the modifier."
- It uses person-first languages, which, as the term implies, refers first to the individual and secondly to the disability (e.g. "Pat is a person with schizophrenia" or "Pat has schizophrenia" rather than "Pat is schizophrenic" or "Pat is a schizophrenic person").[31,32]

Table 1 overleaf intends to provide you with some examples of inclusive terms. We invite you to incorporate them into your professional and personal life and keep yourself updated on this topic (go to the "To know more" section for more sources).

The power of sustainable communication

When we alienate people through our words and the way we use language, we all lose. Those

> Languages constantly change, evolve, and adapt to the times. They are living entities. This also holds for inclusive language.

alienated lose representation and suffer, and those already represented miss the benefits of diversity and people's diverse lived experiences. By using inclusive language across our work, medical writers and medical communicators show people, such as patients and clinical trial volunteers, that they matter and that we care. We also pave the way for those in charge, like practitioners and regulators, to treat others with respect and dignity. Words can either dehumanise or transmit that we are committed to building an egalitarian society where everybody has access to all it can provide: education, healthcare, employment, freedom of movement, housing, and in a more abstract way, acceptance, validation, and love.

To know more

Languages constantly change, evolve, and adapt to the times. They are living entities. This also

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[a] Also called *health inequalities*, the term refers to "systematic variations in the mental or physical well-being of members of different social groups that specifically result from inequitable economic, political, social, and psychological processes."[11,12]

[b] Most of items in the list are taken from the LSA's guidelines, otherwise it will be referenced.

Table 1. A nonexhaustive list of noninclusive terms and their more inclusive counterparts

Non-inclusive	Inclusive
Ethnicity, race, and nationality	
Afro-American, coloured, Negro	African, African American, Black
American	U.S. citizen, a person from the US.
Asians/Oriental	People of Asian/Southeast Asian descent, Asian American, or specify by nationality
Caucasian	White people
First World/Third World (country)	high-, low- and middle-income countries (LICs, MICs, LMICs)
gypsy, gyp/gip	Romani
Hispanic	use person's country of origin or nationality
mixed, mixed-race/blood/heritage, half, mulatto	biracial, multiracial
non-white, coloured	people of colour, minority
Sex and sexuality	
biological/born female, female-bodied	assigned female at birth (AFAB)
biological/born male, male-bodied	assigned male at birth (AMAB)
female-to-male (FTM)	transgender man
homosexual, non-straight	men who have sex with men, women who have sex with women (for behaviour)
	gay, lesbian, bisexual, pansexual, asexual, queer (for identity)
male-to-female (MTF)	transgender woman
sexual preference/identity, lifestyle choice	sexual orientation
transgender people and normal people	transgender people and cisgender people
Gender equality	
both genders, opposite sexes	all genders
gender non-conforming/neutral	gender non-binary
guys, girls, gals	everyone, all
husband, wife	spouse, partner
ladies and gentlemen	everyone, folks, honoured guests
mother, father	parent
Health	
able-bodied	non-disabled, enabled, "…does not have a disability"
addict, drug abuser/addict	someone experiencing/with a drug problem/addiction
birth defect	a person with a congenital disability/birth anomaly
clean/dirty test results	negative/positive test for drugs
die of/from AIDS	die from an AIDS-related illness/complications from AIDS
Cancer patient	a person with (type) cancer
Down's person	a person with Down Syndrome
drug abuse	drug misuse
an/the epileptic	a person with epilepsy/seizure disorder
a handicapped person, the handicapped/disabled/ deafblind, a/the paraplegic/quadriplegic	a person with (physical) disabilities/who is deafblind, a person with a spinal cord injury/ paraplegia, a person who is paralysed
HIV-positive person/people	person/people living with HIV
junkie	someone who misuses heroin
mental illness	mental health condition
mental retardation	intellectual/developmental disability
mute	a person who cannot speak/has difficulty speaking/uses synthetic speech/is non-vocal/non-verbal
senile/demented	a person with Alzheimer's disease/dementia, a person who has dementia
serostatus, seropositive, serodiscordant (a couple in which one member has HIV and the other does not)	HIV status, HIV positive, mixed-status
wheelchair-bound, confined to a wheelchair	wheelchair user
you are/suffer from (condition)	you have/live with (condition)

Non-inclusive	Inclusive
Appearance	
dwarf, midget	person of short stature, little person
the obese	ask [a]
Age	
nursing home	care centre
the elderly, the aged, seniors, geriatric (people)	older adults, older people, ages xx and older
Socioeconomic status	
at -risk, needy, disadvantaged	people with low income
the homeless	people experiencing homelessness/who are homeless/houseless
the poor	people experiencing poverty
Science	
Blacklist to list problematic entities	excluded list, denylist
Whitelist to list good, trustworthy entities	included list, allowlist, safelist

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a   The discussion is still ongoing. Some activists are reclaiming the word "fat" instead of more euphemistic adjectives like big, large, or curvy.[43]

holds for inclusive language. There is a continuous debate about what is offensive and what is not. Some terms that used to be offensive, like calling someone "queer", have been reclaimed by activists. We encourage you to (re-)visit these sources of information to keep up with the latest updates.

- American Medical Association (AMA) Manual of Style[44]
- American Psychological Association (APA) Bias-free language guidelines[45]
- Conscious Style Guide[46]
- Diversity Style Guide[34]
- LGBTQIA+ Glossary of Terms for Health Care Teams[47]
- Linguistic Society of America (LSA) Guidelines for Inclusive Language[30]

We also invite you to see these documentaries about mental health and the role that stigma plays in it:

- *The Me You Can't See*[48]
- *The Wisdom of Trauma*[49]

And finally, there is writing assistant software that can assist you in writing inclusively:

- Grammarly identifies offensive and non-inclusive words and expressions and offers a more inclusive alternative.[50]
- Microsoft Word's Editor: "Editor's inclusive language critique offers suggestions to replace language that may perpetuate biases around age, ability, gender, sexual orientation, religion, ethnic or racial slurs, as well as outdated or sensitive geopolitical references." [51]
- PerfectIt allows you to identify and eliminate words and phrases that might need consideration.[52]

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Conflicts of interest

The author declares no conflicts of interest.

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