NIH PRAGMATIC TRIALS COLLABORATORY

Rethinking Clinical Trials®

Equitable Language Cheat Sheet

Why Is Using Equitable Language Important?

The NIH Pragmatic Trials Collaboratory strives to use inclusive language when discussing pragmatic clinical trials. This cheat sheet includes examples of preferred terminology when referring to specific people, groups, and communities. Please note that language around identities is often situational and evolving. If possible, when referencing the identity of a specific person or community, it is best practice to ask how they identify and defer to their preference.

Preferred Terminology

Age

Terms to Avoid	Alternatives
• Elderly • Seniors	• Older person • Older adults or populations

Race and Ethnicity

Terms to Avoid	Alternatives
• Referring to people as their race/ethnicity (ie, Blacks, Hispanics) • Native American • The [racial/ethnic] community • BIPOC • People of color without specifying the groups included • Minority • Non-minority • Non-white • Racial and ethnic minorities • Mixed race • Brown people	• American Indian or Alaska Native persons/communities/populations • Indigenous people • Asian persons • Black or African American persons (Note: terms are not interchangeable) • white persons (Note: term is lowercase) • Native Hawaiian persons • Hispanic or Latino/Latinx/Latine persons • Country of origin or heritage (eg, Mexican or Mexican American, Nigerian or Nigerian American) • People who identify with more than one race • Minoritized group or populations • Members of underrepresented groups • Historically marginalized communities • Multiracial or multiethnic

Gender

Terms to Avoid	Alternatives
• He/she when referring to an unspecified person • Biologically or genetically male/female • Born male/female	• Neutral words such as *individual* or *one* • They • Designated or assigned male/female at birth • Gender nonconforming or nonbinary • Pregnant or birthing person/people • Expecting parent or parent-to-be

The guidelines below all underscore the importance of using "people first" language when possible (ie, people with/who/etc).

Differing Abilities

Terms to Avoid	Alternatives
- Disabled - Handicapped - Mentally challenged - Suffering with… - On the spectrum	- People with disabilities or a disability - People who use a mobility device - People with intellectual disabilities - Neurodivergent/neurotypical

Drug/Substance Abuse

Terms to Avoid	Alternatives
- Drug users/abusers - Addicts - Alcoholics - Smokers	- People who use drugs - People with substance use disorder - People taking/prescribed medications for opioid use disorder - People with alcohol use disorder - People who smoke

People Who Are Underserved, at Increased Risk, or Economically Marginalized

Terms to Avoid	Alternatives
- High-risk people - At-risk youth - Vulnerable populations - Underserved people/communities - Underprivileged - Poor/the poor - Rural people	- People who are underserved by… - People in medically underserved communities - People who are at increased/higher risk for… - People with lower incomes - People experiencing poverty - People who live in rural areas - Rural communities

Partners and Populations of Focus

Terms to Avoid	Alternatives
- Stakeholder - Target population	- Contributors - Partners - Allies - Community members - Interested parties/groups - Specific population - Group of focus

Additional Sources

CDC Resources & Style Guides for Framing Health Equity & Avoiding Stigmatizing Language
APA Style: Bias-Free Language
JAMA Inclusive Language Guide