



## Equity Through Communication: Health Equity-Forward Language Tipsheet

Changing the words we use is not about using a kinder, or “more correct” word, but instead it is about using more accurate language to fundamentally change the framework through which we view the people we serve.

When we change the way we talk about people, their health, their strengths, and the context around all of these, we begin to understand how language impacts people, and we can start to untangle some commonly held notions. The goal of health equity language is not to be politically correct – it is to move toward understanding.

### 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.

Instead of this ...	Try this:
Vulnerable groups	Groups that have been economically/socially marginalized
Marginalized communities; hard-to-reach communities	Communities that have been historically marginalized or made vulnerable; communities struggling against economic marginalization
Underserved communities	Communities that are underserved by/with limited access to (specific service/resource); under-resourced communities
Disadvantaged groups	Groups experiencing disadvantage because of (reason)
High-risk groups or at-risk groups	Groups placed at increased risk/put at increased risk of (outcome)

### Avoid dehumanizing language.

Use person-first language instead. Describe people as having a condition, not *being* a condition.

Instead of this ...	Try this:
Cancer cases	Patients or persons with cancer
The homeless	People who are experiencing homelessness
Disabled person	People who are experiencing (disability type)
Inmates	People experiencing (health outcome or life circumstance)
Victims	Survivors
The obese or the morbidly obese	People with obesity; people with severe obesity

### Avoid unintentional blaming.

Consider the context and audience to determine if language used could potentially lead to negative assumptions, stereotyping, stigmatization, or blame. (Note: Terms may be appropriate in some cases.)

Instead of this ...	Try this:
Communities who do not (action)	Communities who are under-resourced with (specific service/resource)
People who do not seek healthcare	People with limited access to (specific service/resource)



## Equity Through Communication: Health Equity-Forward Language Tipsheet, continued

### 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.

Instead of this ...	Try this:
Ethnic groups	Specify the type of subpopulation:
Racial groups	(People from) racial and ethnic groups
Minorities	(People from) racial and ethnic minority groups
Minority	(People from) sexual/gender /linguistic/religious minority groups

### Avoid saying *target*, *tackle*, *combat* or other terms with violent connotations.

When referring to people, groups or communities these terms should also be avoided, in general, when communicating about public health activities.

Instead of this ...	Try this:
Target communities for interventions	Engage/prioritize/collaborate with/serve (population of focus)
Target population	Consider the needs of ... Tailor to the needs of (population of focus)
Tackle issues within the community	Communities/populations of focus
Aimed at communities	Intended audience
Combat or war against (disease)	Eliminate (issue/disease)

### Words Matter: Additional Equity-Focused Alternatives

Instead of this ...	Try this:	Reason
Disparity	Inequity	<i>Disparities</i> typically refer to differences, not avoidable, unnecessary, unfair and unjust health inequities
Equality	Equity	Seeking to treat everyone “the same” can ignore historical and current discrimination that limits opportunity
Non-compliance	Non-adherence	<i>Compliance</i> describes purely passive behavior in which patients follow instructions. Places blame for treatment failure solely on patients.
Cultural competence	Cultural humility, cultural safety, structural competence	No one can truly be competent in another person's culture

Learn more by downloading the full “Advancing Health Equity: Guide on Language, Narrative and Concepts” guide and access a more comprehensive glossary from the American Medical Association and Association of American Medical Colleges at: <https://www.ama-assn.org/about/ama-center-health-equity/advancing-health-equity-guide-language-narrative-and-concepts>