

# The Upstate Bias Checklist Manual

A Checklist for Assessing Bias in Health Professions Education Content

The Upstate Bias Checklist was developed by Dr. Amy Caruso Brown and adapted for The Ohio State University College of Medicine.

The checklist is intended to promote reflection regarding how race, gender, and other indicators are represented in health professions education. The checklist was designed facilitate evaluation of a particular piece of health professions education content, such as a lecture, standardized patient encounter, small group session, or written examination. “Content” may include slides, lecture notes, handouts, assigned readings, examination questions, problem-based learning cases, or anything said by the presenter during a learning encounter

For more information about the Checklist, visit [Amy Caruso Brown’s Upstate Bias Checklist website](#) (external link). A [fully accessible, text-only version of this Manual](#) is available on the website.

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## INSTRUCTIONS FOR USING THE CHECKLIST

Consider whether each indicator—each of which is associated with marginalization and inequality in healthcare, access to care, and health outcomes—is present in the content you are reviewing. As you review, ask yourself:

- Why might this part of the content be at risk for bias?
- How might it impact learners?
- What is the goal or learning objective for this part of the content?
- Why was it included in the first place?
- Should it be changed?
- How should it be changed?

A recommendation to change the content may indicate that the content should be removed, replaced, revised or updated, or simply acknowledged with an apology.

### Definitions

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Term	Definition
Bias	Preconceived opinion or inclination that is not rigorously based on reason, experience or evidence (though it may have roots in these things); can be positive, negative or both; occurs on a spectrum from implicit (or unconscious) to explicit (or consciously endorsed)
Discrimination	Unfair or prejudicial treatment of people and groups based on characteristics such as race, gender, age or sexual orientation (APA)
Shame	In the healthcare context, more accurately termed “medical shaming”; process by which patients are judged by healthcare professionals to be more responsible for their own situation (including their health, social and economic status) and less deserving of health and healthcare than the “ideal” patient (Serani, 2019)
Stereotype	Fixed, overgeneralized and oversimplified image or idea of a particular type of person or thing; often widely held and applied to whole groups of people.
Stigma	“Powerful social process characterized by labeling, stereotyping, and separation, leading to loss of social status and discrimination, all occurring in the context of power”; in the context of healthcare, stigma can be related to living with a specific disease or health condition and is often associated with judgment or blame regarding the condition; a barrier to healthcare (Nyblade et al., 2019)

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## RACE AND ETHNICITY

### Definitions

Term	Definition
Ethnicity	Groups (e.g., Fijian, or Sioux) that share a common identity-based ancestry, language, or culture; often based on religion, beliefs, and customs as well as memories of migration or colonization (Cornell & Hartmann)
Race	Grouping of humans based on shared physical or social qualities into categories generally viewed as distinct by a society; importantly, race is a social, not a biological construction, and a person's racial grouping will vary between countries and societies

### Examples of Content that Promote Shame, Bias, Stereotype or Stigma

- Teaching the practice of race "correction" for highly variable physiological measures such as spirometry values and glomerular filtration rate, based on outdated studies and neglecting to recognize intrinsic variation within racial groups
- Presenting associations between race and disease incidence without context
- Showing two photos side-by-side during an obesity lecture: one depicting a family comprised of thin white individuals sitting down to a healthy dinner and one depicting a family of overweight black individuals sitting in front of fast food
- Consistently showing images of black individuals when addressing diabetes or obesity
- Implying that all Latino patients are undocumented immigrants / migrant workers
- Stating or implying that all patients from a particular culture participate in certain practices or reject certain medical interventions (e.g., "Muslim women are not permitted to be examined by male physicians")
- Any comment about this subject that is meant to elicit laughter
- These examples require some awareness of content across sessions, units and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

### References

Hoffman KM, Trawalter S, Axt JR, Oliver MN. *Racial bias in pain assessment and treatment recommendations, and false beliefs about biological differences between*

*blacks and whites*. Proceedings of the National Academy of Sciences. 2016 Apr 19;113(16):4296-301.

Tsai J, Ucik L, Baldwin N, Hasslinger C, George P. *Race matters? Examining and rethinking race portrayal in preclinical medical education*. Academic Medicine. 2016 Jul 1;91(7):916-20.

Vyas DA, Eisenstein LG, Jones DS. *Hidden in plain sight “reconsidering the use of race correction in clinical algorithms.”* N Engl J Med 2020; 383:874-882

## VISUAL IMAGES

### References

Jackson-Richards D, Pandya AG, editors. *Dermatology atlas for skin of color*. Springer; 2014 Jul 19.

Lupton D. *Digital media and body weight, shape, and size: An introduction and review*. Fat Studies. 2017 May 4;6(2):119-34.

Moiin A, editor. *Atlas of Black Skin*. Springer Nature; 2020 Jan 24.

Pratt L. *The (fat) body and the archive: Toward the creation of a fat community archive*. Fat Studies. 2018 May 4;7(2):227-39.

## CLINICAL VIGNETTES

When thinking about clinical vignettes, please consider the concept of intersectionality first developed by Kimberly Crenshaw. People have multiple identities. For example, a person may be a Muslim and also have a disability. Avoid reducing a person to one identity, especially the identity that is most obvious. Remember that people have other identities that impact their care.

“Individual lives cannot be fully understood by attending simply to narrow bands or categories of identity” gender, race, age, class, sexual identity, disability, immigration status, and so forth” in isolation. Rather, individuals must be considered at the intersection of their identity categories, where interrelated systems of oppression and discrimination, advantage and disadvantage are at play and determine access to the social and material necessities of life.”

### References

Blackie M, Wear D, Zarconi J. Narrative intersectionality in caring for marginalized or disadvantaged patients: Thinking beyond categories in medical education and care. Academic Medicine. 2019 Jan 1;94(1):59-63.

## SEX AND GENDER

### Definitions

Term	Definition
Gender	Range of characteristics pertaining to, and differentiating between, femininity and masculinity; depending on the context, these characteristics may include biological sex, sex-based social structures (i.e., gender roles), or gender identity.
Gender Identity	A socially and personally constructed identity that can be associated with masculinity, femininity, androgyny, any combination of these, or altogether different conceptions of gender
Sex	“The male, female, or intersex division of a species, especially as differentiated with reference to the reproductive functions”, including “the sum of the structural and functional differences by which male, female, and intersex organisms are distinguished, or the phenomena or behavior dependent on these differences” (Thesaurus.com)

### Examples of Content that Promote Shame, Bias, Stereotype or Stigma

- Pediatric vignettes in which patients are invariably accompanied by a mother (never a father, two fathers, two mothers, grandparents, etc.) or only involve nuclear families with heterosexual, married parents and biological offspring
- Suggesting that female students consider reproduction and family obligations in their career choices
- Disproportionate course content/contact hours devoted to conditions that impact men more than women (e.g., time spent in pharmacology on drugs for erectile dysfunction vs. time spent on contraceptives)
- Teaching students that intersex patients are really male or female, once diagnosed properly
- Failure to use preferred pronouns for gender-nonconforming patients in clinical vignettes
- Any comment about this subject that is meant to elicit laughter
- These examples require some awareness of content across sessions, units and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if every patient with that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

## References

Dubin SN, Nolan IT, Streed Jr CG, Greene RE, Radix AE, Morrison SD. *Transgender health care: improving medical students' and residents' training and awareness*. *Advances in medical education and practice*. 2018;9:377.

## SEXUALITY, SEXUAL BEHAVIOR AND SEXUAL ORIENTATION

### Definitions

Term	Definition
Sexuality	Capacity for sexual feelings.
Sexual behavior	Manner in which humans experience and express their sexuality
Sexual orientation	"An enduring pattern of romantic or sexual attraction (or a combination of these) to persons of the opposite sex or gender, the same sex or gender, or to both sexes or more than one gender; generally subsumed under heterosexuality, homosexuality, and bisexuality, while asexuality (the lack of sexual attraction to others) is sometimes identified as the fourth category" (Wikipedia)

### Examples of Content that Promote Shame, Bias, Stereotype or Stigma

- Using language in clinical vignettes or discussions of history-taking such as "The patient ADMITTED to having sex."
- Teaching students to take a sexual history that does not account for the full spectrum of sexual identities and encourages categorization
- Teaching students to label sexual identities and behaviors as "high-risk"
- Using value-laden terms like "prostitute" instead of the more neutral "sex worker"
- Any comment about this subject that is meant to elicit laughter
- These examples require some awareness of content across sessions, units and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if every patient with that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

## References

Coren JS, Coren CM, Pagliaro SN, Weiss LB. *Assessing your office for care of lesbian, gay, bisexual, and transgender patients*. *The health care manager*. 2011 Jan 1;30(1):66-70.

Duvivier RJ, Wiley E. *Health equity for LGBTQ people through education*. The Lancet. 2016 Apr 2;387(10026):1375.

Rowen TS, Stein S, and Tepper M. *Sexual health care for people with physical disabilities*. J Sex Med 2015;12:584-589.

## DISABILITY

### Definitions

Term	Definition
Disability	"Impairments, activity limitations, and participation restrictions; an impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; while a participation restriction is a problem experienced by an individual in involvement in life situations; complex phenomenon, reflecting an interaction between features of a person's body and features of the society in which he or she lives" (WHO)

### Examples of Content that Promote Shame, Bias, Stereotype, or Stigma

- Failing to recognize that most people with disabilities regard their quality of life as comparable to those without disabilities
- Assuming that people with disabilities' quality of life is not comparable to those without disabilities
- Assuming that preventive health is not as important to patients with disabilities
- Using "us" and "them" language when talking about patients with disabilities (failing to acknowledge that many learners and colleagues may be disabled)
- Any comment about this subject that is meant to elicit laughter
- Although we recognize that there are differences of opinion within different communities and the field of disability rights, we recommend that educators without personal experience and/or expertise use person-first language.
- These examples require some awareness of content across sessions, units and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if every patient with that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

## References

- Jain NR. *Political disclosure: resisting ableism in medical education*. *Disability & Society*. 2020 Mar 15;35(3):389-412.
- Santoro JD, Yedla M, Lazzareschi DV, Whitgob EE. Disability in US medical education: Disparities, programmes and future directions. *Health Education Journal*. 2017 Oct;76(6):753-9.
- Seidel E, Crowe S. The state of disability awareness in American medical schools. *American journal of physical medicine & rehabilitation*. 2017 Sep 1;96(9):673-6.

## MENTAL HEALTH AND SUBSTANCE ABUSE

### Definitions

Term	Definition
Mental health	Emotional, psychological, and social well-being; affect how we think, feel, and act; helps determine how we handle stress, relate to others, and make choices
Substance use	Use of drugs or alcohol, and includes substances such as cigarettes, illicit drugs, prescription drugs, inhalants and solvents; distinguished from a substance use disorder
Substance use disorder	Persistent use of substances despite substantial harm and adverse consequences

### Examples of Content that Promote Shame, Bias, Stereotype, or Stigma

- Implying that patients with mental health concerns are violent/dangerous
- Undermining the dignity of people with mental health concerns by not recognizing how some might value neurodiversity as well as wishing treatment for symptoms that cause suffering
- Using language of personal responsibility and self-control to discuss addiction, rather than acknowledging that it is a disease
- Referring to patients as "crazy", "insane", "addicts", "junkies", "drunks"
- Using "us" and "them" language when talking about patients with disabilities (failing to acknowledge that many learners and colleagues may experience mental health concerns or substance use)
- Any comment about this subject that is meant to elicit laughter
- These examples require some awareness of content across sessions, units and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if



every patient with that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

## WEIGHT

### Examples of Content that Promote Shame, Bias, Stereotype, or Stigma

- Describing overweight and obese patients as "noncompliant"
- Assuming that all overweight and obese are unhealthy when it is much more complicated biologically
- Any comment about this subject that is meant to elicit laughter
- These examples require some awareness of content across sessions, units, and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if every patient with that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

### References

- Brown, H. (2015). *Body of truth: How science, history, and culture drive our obsession with weight and what we can do about it*. Philadelphia, PA: Da Capo Press.
- Daniel, C. (2016). Economic constraints on taste formation and the true cost of healthy eating. *Social Science & Medicine*, 148, 34-41.
- Guthman, J. (2011). *Weighing in: Obesity, food justice, and the limits of capitalism*. University of California Press.
- Knowles, M., Rabinowich, J., de Cuba, S.E., Cutts, D.B., Chilton, M. (2016). "Do you wanna breathe or eat?": Parent perspectives on child health consequences of food insecurity, trade-offs, and toxic stress. *Maternal and Child Health Journal*, 20(1):25-32.

## IMMIGRATION STATUS, NATIONALITY, LANGUAGE, AND CULTURE

### Definitions

Term	Definition
Culture	Values, beliefs, systems of language, communication, and practices that a group of people and that can be used to define them as a collective; also includes the material objects that are common to the group or society

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<b>Immigration status</b>	Refers to the way in which a person is present in a country; everyone has an immigration status; examples in the U.S. include citizens (by birth or naturalization), legal permanent or conditional residents, non-immigrants (present on temporary visas, such as student visas) and undocumented immigrants
<b>Nationality</b>	Status of belonging to a particular nation whether by birth or naturalization
<b>Refugee</b>	Person who has fled their own country because they are at risk of serious harm (including human rights violations and persecution); the risks to their safety and life were so great that they felt they had no choice but to leave and seek safety outside their country because their own government cannot or will not protect them from those dangers; refugees have a right to international protection
<b>Undocumented immigrant</b>	Anyone residing in any given country without legal documentation from that country; includes people who enter a country without inspection and permission from the government, and those who enter with a legal visa but that remain after the visa expires

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### **Examples of Content that Promote Shame, Bias, Stereotype, or Stigma**

- Focusing only on language barriers in clinical encounters between physicians and patients who are immigrants (assumes immigrants never speak English and neglects other important features)
- Overemphasizing the burden on healthcare providers' time related to use of interpreters
- Assuming or implying that all Spanish-speaking patients are undocumented immigrants/migrant workers
- Any comment about this subject that is meant to elicit laughter
- These examples require some awareness of content across sessions, units, and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if every patient with that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

## **POVERTY AND SOCIOECONOMIC STATUS**

### **Definitions**

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<b>Poverty</b>	State or condition in which a person or community lacks the resources to meet basic and essential needs for a minimum
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**Socioeconomic status**

standard of living; below an income threshold set by the federal government in the U.S.

Social standing or class of an individual or group; often measured as a combination of education, income and occupation

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### **Examples of Content that Promote Shame, Bias, Stereotype, or Stigma**

- Presenting race as a risk factor for disease occurrence or outcome without explaining role of poverty, access to healthcare, etc.
- Presenting poor people as lazy or lacking in character
- Any comment about this subject that is meant to elicit laughter
- These examples require some awareness of content across sessions, units, and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if every patient with that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

## **AGE**

### **Examples of Content that Promote Shame, Bias, Stereotype, or Stigma**

- Focusing only on declining health/quality of life and need for advance directives/limitations of care
- Ignoring positive portrayals of aging and geriatric care
- Presuming that older adults are disabled and/or identify as disabled; some older adults will view disability as stigmatizing and will not identify as a person with a disability
- Neglecting consideration of sexual health at all ages
- These examples require some awareness of content across sessions, units and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if every patient with that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

## RELIGION AND FAITH TRADITION

### Definitions

Term	Definition
Monolithic	Intractably indivisible and uniform; in this context, refers to the tendency to perceive all members of another cultural or religious group (especially an unfamiliar group) as sharing the same values, beliefs, and practices, despite all such groups having significant intra-group variation

### Examples of Content that Promote Shame, Bias, Stereotype, or Stigma

- Mocking particular religious beliefs, especially those that are considered "outside" of the mainstream
- Presenting all deeply religious patients as rejecting mainstream medicine
- Treating religious objections to certain types of medical intervention as more worthy of consideration than other personal beliefs
- Any other comment about this subject that is meant to elicit laughter
- These examples require some awareness of content across sessions, units and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if every patient with that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

## PRISONERS

### Definitions

Term	Definition
Mass incarceration	Extremely high rate of incarceration in the U.S. for both adults and youth, disproportionately impacting Black adults and youth
Prisoners	People deprived of liberty and kept under involuntary restraint, confinement, or custody; especially those on trial or in prison; a vulnerable group accorded additional protections under federal research regulations (OHRP, 2021)
Systemic, institutional, and/or structural racism	Form of racism that is embedded through laws and regulations within society or an organization

## Examples of Content that Promote Shame, Bias, Stereotype, or Stigma

- Implying that prisoners are less deserving of healthcare than others
- Assuming the guilt of all those charged with crimes or incarcerated
- These examples require some awareness of content across sessions, units and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if every patient with that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

## RURAL RESIDENCE

### Examples of Content that Promote Shame, Bias, Stereotype, or Stigma

- Assuming that people living in rural areas are less educated than those in urban areas
- Assuming that people living in rural areas are less likely to have a healthy lifestyle or to adhere to healthcare recommendation
- Assuming that people living in rural areas are white, Christian and/or Republican
- These examples require some awareness of content across sessions, units and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if every patient with that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

## INTERPROFESSIONAL COMMUNICATION

### Definitions

Term	Definition
Gender-neutral pronouns	Third-person plural (e.g., 'they' is now widely accepted as a gender-neutral alternative)

### Examples of Content that Promote Shame, Bias, Stereotype, or Stigma

- Jokes about emergency physicians only being interested in admitting or discharging patients or orthopedic surgeons lacking basic medical knowledge outside the operating room
- Using masculine pronouns for physicians and feminine pronouns for nurses

- Implying that nurse practitioners and physician assistants are less competent than physicians, or that physicians are less likely to be emotionally invested in their patients' wellbeing
- These examples require some awareness of content across sessions, units and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if every patient with that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

## REFERENCES

- Blackie M, Wear D, Zarconi J. Narrative intersectionality in caring for marginalized or disadvantaged patients: Thinking beyond categories in medical education and care. *Academic Medicine*. 2019 Jan 1;94(1):59-63.
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## GLOSSARY

Term	Definition
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Culture	Values, beliefs, systems of language, communication, and practices that a group of people and that can be used to define them as a collective; also includes the material objects that are common to the group or society
Disability	"Impairments, activity limitations, and participation restrictions; an impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; while a participation restriction is a problem experienced by an individual in involvement in life situations; complex phenomenon, reflecting an interaction between features of a person's body and features of the society in which he or she lives" (WHO)
Discrimination	Unfair or prejudicial treatment of people and groups based on characteristics such as race, gender, age or sexual orientation (APA)
Ethnicity	Groups (e.g., Fijian, or Sioux, etc.) that share a common identity-based ancestry, language, or culture; often based on religion, beliefs, and customs as well as memories of migration or colonization (Cornell & Hartmann)
Gender	Range of characteristics pertaining to, and differentiating between, femininity and masculinity; depending on the context, these characteristics may include biological sex, sex-based social structures (i.e., gender roles), or gender identity.
Gender Identity	A socially and personally constructed identity that can be associated with masculinity, femininity, androgyny, any combination of these, or altogether different conceptions of gender
Gender-neutral pronouns	Third-person plural (e.g., 'they' is now widely accepted as a gender-neutral alternative)

Immigration status	Refers to the way in which a person is present in a country; everyone has an immigration status; examples in the U.S. include citizens (by birth or naturalization), legal permanent or conditional residents, non-immigrants (present on temporary visas, such as student visas) and undocumented immigrants
Mass incarceration	Extremely high rate of incarceration in the U.S. for both adults and youth, disproportionately impacting Black adults and youth
Mental health	Emotional, psychological, and social well-being; affect how we think, feel, and act; helps determine how we handle stress, relate to others, and make choices
Monolithic	Intractably indivisible and uniform; in this context, refers to the tendency to perceive all members of another cultural or religious group (especially an unfamiliar group) as sharing the same values, beliefs, and practices, despite all such groups having significant intra-group variation
Nationality	Status of belonging to a particular nation whether by birth or naturalization
Poverty	State or condition in which a person or community lacks the resources to meet basic and essential needs for a minimum standard of living; below an income threshold set by the federal government in the U.S.
Prisoners	People deprived of liberty and kept under involuntary restraint, confinement, or custody; especially those on trial or in prison; a vulnerable group accorded additional protections under federal research regulations (OHRP, 2021)
Race	Grouping of humans based on shared physical or social qualities into categories generally viewed as distinct by a society; importantly, race is a social, not a biological construction, and a person's racial grouping will vary between countries and societies
Refugee	"Person who has fled their own country because they are at risk of serious harm" (including human rights violations and persecution); the risks to their safety and life were so great that they felt they had no choice but to leave and seek safety outside their country because their own government cannot or will not protect them from those dangers; refugees have a right to international protection (Amnesty International, 2021)

Sex	“The male, female, or intersex division of a species, especially as differentiated with reference to the reproductive functions”, including “the sum of the structural and functional differences by which male, female, and intersex organisms are distinguished, or the phenomena or behavior dependent on these differences” (Thesaurus.com)
Sexuality	Capacity for sexual feelings.
Sexual behavior	Manner in which humans experience and express their sexuality
Sexual orientation	“An enduring pattern of romantic or sexual attraction (or a combination of these) to persons of the opposite sex or gender, the same sex or gender, or to both sexes or more than one gender; generally subsumed under heterosexuality, homosexuality, and bisexuality, while asexuality (the lack of sexual attraction to others) is sometimes identified as the fourth category” (Wikipedia)
Shame	In the healthcare context, more accurately termed “medical shaming”; process by which patients are judged by healthcare professionals to be more responsible for their own situation (including their health, social and economic status) and less deserving of health and healthcare than the “ideal” patient (Serani, 2019)
Socioeconomic status	“Social standing or class of an individual or group”; “often measured as a combination of education, income and occupation” (APA, 2021)
Stereotype	Fixed, overgeneralized and oversimplified image or idea of a particular type of person or thing; often widely held and applied to whole groups of people.
Stigma	“Powerful social process characterized by labeling, stereotyping, and separation, leading to loss of social status and discrimination, all occurring in the context of power”; in the context of healthcare, stigma can be related to living with a specific disease or health condition and is often associated with judgment or blame regarding the condition; a barrier to healthcare (Nyblade et al., 2019)
Substance use	Use of drugs or alcohol, and includes substances such as cigarettes, illicit drugs, prescription drugs, inhalants and solvents; distinguished from a substance use disorder
Substance use disorder	Persistent use of substances despite substantial harm and adverse consequences

Systemic,  
institutional,  
and/or structural  
racism

Form of racism that is embedded through laws and regulations within society or an organization

Undocumented  
immigrant

Anyone residing in any given country without legal documentation from that country; includes people who enter a country without inspection and permission from the government, and those who enter with a legal visa but that remain after the visa expires (Immigrants Rising, 2021))