

### ***Use of Inclusive Language***

Inclusive language acknowledges diversity, conveys respect to all people, is sensitive to differences, and promotes equal opportunities. Content should make no assumptions about the beliefs or commitments of any reader; contain nothing which might imply that one individual is superior to another on the grounds of age, gender, race, ethnicity, culture, sexual orientation, disability, or health condition; and use inclusive language throughout. Authors should ensure that writing is free from bias, stereotypes, slang, reference to dominant culture, and cultural assumptions. Seek gender neutrality by using plural nouns (“clinicians, patients/clients”) as default/wherever possible to avoid using “he, she,” or “he/she.” We recommend avoiding the use of descriptors that refer to personal attributes such as age, gender, race, ethnicity, culture, sexual orientation, disability, and health condition unless there is scientific or clinical relevance. Statements and claims about personal attributes should be factual and supported by an evidentiary reference. These guidelines are meant as a point of reference to help identify appropriate language but are by no means exhaustive or definitive.

### ***Capitalization of Racial and Ethnic Terms***

Racial and ethnic groups are designated by proper nouns and are capitalized. Therefore capitalize “Black,” “White,” and “Brown” to align with the capitalization preference applied to other racial and ethnic categories. Use the capitalized term as an adjective in a racial or ethnic sense: Blacks are disproportionately affected by COVID-19 (proper noun usage); diabetes disproportionately affects the Black population (adjectival usage).

### ***Reporting Sex, Gender, or Both in Research***

The terms *male* and *female* should be used when describing the sex of human participants or other sex-related biological or physiological factors. Descriptions of differences between males and females should carefully refer to “sex differences” rather than “gender differences.” Gender comprises the social, environmental, cultural, and behavioral factors and choices that influence a person’s self-identity and health. Gender includes gender identity (how individuals and groups perceive and present themselves), gender norms (unspoken rules in the family, workplace, institutions, and global culture that influence individual attitudes and behaviors), and gender relations (the power relations between individuals of different gender identities). Authors should consider appropriate use of the words *sex* and *gender* to avoid confusing both terms.

### ***LGBTQ+ Terminology***

When content is referring to the lesbian, gay, bisexual, transgender, queer, or questioning community, Elsevier’s suggested terminology is LGBTQ+.

### ***Religion and Politics***

Religious and political beliefs and practices must be described with accuracy. Statements and claims about religion and politics should be factual and supported by an evidentiary reference. If no reference exists, one should be requested and provided.