Some alternatives to *we* to consider are *people, humans, researchers, psychologists, nurses,* and so on. *We* is an appropriate and useful referent:

Correct:

As behaviorists, we tend to dispute . . .

Incorrect:

We tend to dispute . . .

3.10 Linguistic Devices

Devices that attract attention to words ...nds, or other embellishments instead of ... ideas are inappropriate in scientific ...Avoid heavy alliteration, rhyming, poet... expressions, and clichés. Use ... ...ngly; although they can help simpli... complicated ideas, metaph... Avoid mixed metaphors (e.g., *a th...* *ory representing one h...* *evidence*) and words with surplu... or unintended me... which may distract if not actua... ly mislead the ...straint and colorful expressio... with care ...

3.1

Authors ... The fit between auth... and strat... Three approache... to achievin... ...ing from an ou... line; (b) putti... ...) asking a colleag... to review and ...

Writing from ...ie research itself. An outli... identifies main ide... ...s you discipline your writing an... avoid tangential exc... ...ce omissions. In an outline, you ca... also identify the subhe... ...ed in the article itself.

Rereading your own ...cing it aside for a few days permits a fres... approach. Reading the pape... ...nables you not only to see faults that you overlooke... on the previous reading but a... to hear them. When these problems are corrected, give ... polished copy to a colleague—preferably a person who has published in a related field bu... who is not familiar with your own work—for a critical review. Even better, get critique... from two colleagues, and you will have a trial run of a journal's review process.

These strategies, particularly the latter, may require you to invest more time in ... manuscript than you had anticipated. The results of these strategies, however, may b... greater accuracy and thoroughness and clearer communication.

Reducing Bias in Language

Scientific writing must be free of implied or irrelevant evaluation of the group ... groups being studied. As an organization, APA is committed both to science and to th... fair treatment of individuals and groups, and this policy requires that authors wh... write for APA publications avoid perpetuating demeaning attitudes and biase...

assumptions about people in their writing. Constructions that might imply bias against persons on the basis of gender, sexual orientation, racial or ethnic group, disability, or age are unacceptable.

Long-standing cultural practice can exert a powerful influence over even the most conscientious author. Just as you have learned to check what you write for spelling, grammar, and wordiness, practice rereading your work for bias. Another suggestion is to ask people from targeted groups to read and comment on your material.

What follows is a set of guidelines and discussions of specific issues that affect particular groups. These are not rigid rules. You may find that some attempts to follow the guidelines result in wordiness or clumsy prose. As always, good judgment is required. If your writing reflects respect for your participants and your readers and if you write with appropriate specificity and precision, you will be contributing to the goal of accurate, unbiased communication. Specific examples for each guideline are given in the Guidelines for Unbiased Language, which can be found on the APA Style website (www.apastyle.org).

General Guidelines for Reducing Bias

Guideline 1: Describe at the Appropriate Level of Specificity

Precision is essential in scientific writing; when you refer to a person or persons, choose words that are accurate, clear, and free from bias. The appropriate degree of specificity depends on the research question and the present state of knowledge in the field of study. When in doubt, be more specific rather than less, because it is easier to aggregate published data than to disaggregate them. For example, using *man* to refer to all human beings is simply not as accurate as the phrase *women and men.* To describe age groups, give a specific age range ("ages 65–83 years") instead of a broad category ("over 65 years"; see Schaie, 1993). When describing racial and ethnic groups, be appropriately specific and sensitive to issues of labeling. For example, instead of describing participants as Asian American or Hispanic American, it may be helpful to describe them by their nation or region of origin (e.g., Chinese Americans, Mexican Americans). If you are discussing sexual orientation, realize that some people interpret *gay* as referring to men and women, whereas others interpret the term as referring only to men (the terms *gay men* and *lesbians* currently are preferred).

Broad clinical terms such as *borderline* and *at risk* are loaded with innuendo unless properly explained. Specify the diagnosis that is borderline (e.g., "people with borderline personality disorder"). Identify the risk and the people it involves (e.g., "children at risk for early school dropout").

Gender is cultural and is the term to use when referring to women and men as social groups. *Sex* is biological; use it when the biological distinction is predominant. Note that the word *sex* can be confused with *sexual behavior. Gender* helps keep meaning unambiguous, as in the following example: "In accounting for attitudes toward the bill, sexual orientation rather than gender accounted for most of the variance. Most gay men and lesbians were for the proposal; most heterosexual men and women were against it."

Part of writing without bias is recognizing that differences should be mentioned only when relevant. Marital status, sexual orientation, racial and ethnic identity, or the fact that a person has a disability should not be mentioned gratuitously.

Guideline 2: Be Sensitive to Labels

Respect people's preferences; call people what they prefer to be called. Accept that preferences change with time and that individuals within groups often disagree about the designations they prefer. Make an effort to determine what is appropriate for your situation; you may need to ask your participants which designations they prefer, particularly when preferred designations are being debated within groups.

Avoid labeling people when possible. A common occurrence in scientific writing is that participants in a study tend to lose their individuality; they are broadly categorized as objects (noun forms such as *the gays* and *the elderly*) or, particularly in descriptions of people with disabilities, are equated with their conditions—*the amnesiacs, the depressives, the schizophrenics, the LDs,* for example. One solution is to use adjectival forms (e.g., "gay *men,*" "older *adults,*" "amnesic *patients*"). Another is to "put the person first," followed by a descriptive phrase (e.g., "people diagnosed with schizophrenia"). Note that the latter solution currently is preferred when describing people with disabilities.

When you need to mention several groups in a sentence or paragraph, such as when reporting results, do your best to balance sensitivity, clarity, and parsimony. For example, it may be cumbersome to repeat phrases such as "person with _____." If you provide operational definitions of groups early in your paper (e.g., "Participants scoring a minimum of X on the X scale constituted the high verbal group, and those scoring below X constituted the low verbal group"), it is scientifically informative and concise to describe participants thereafter in terms of the measures used to classify them (e.g., ". . . the contrast for the high verbal group was statistically significant, $p = .043$"), provided the terms are inoffensive. A label should not be used in any form that is perceived as pejorative; if such a perception is possible, you need to find more neutral terms. For example, *the demented* is not repaired by changing it to *demented group,* but *dementia group* would be acceptable. Abbreviations or series labels for groups usually sacrifice clarity and may offend: *LDs* or *LD group* to describe people with specific learning difficulties is offensive; *HVAs* for "high verbal ability group" is difficult to decipher. *Group A* is not offensive, but it is not descriptive either.

Recognize the difference between *case,* which is an occurrence of a disorder or illness, and *patient,* which is a person affected by the disorder or illness and receiving a doctor's care. "Manic–depressive cases were treated" is problematic; revise to "The patients with bipolar disorders were treated."

Bias may be promoted when the writer uses one group (often the writer's own group) as the standard against which others are judged, for example, citizens of the United States. In some contexts, the term *culturally deprived* may imply that one culture is the universally accepted standard. The unparallel nouns in the phrase *man and wife* may inappropriately prompt the reader to evaluate the roles of the individuals (i.e., the woman is defined only in terms of her relationship to the man) and the motives of the author. By contrast, the phrases *husband and wife* and *man and woman* are parallel. Usage of *normal* may prompt the reader to make the comparison with *abnormal,* thus stigmatizing individuals with differences. For example, contrasting lesbians with "the general public" or with "normal women" portrays lesbians as marginal to society. More appropriate comparison groups might be *heterosexual women, heterosexual women and men,* or *gay men.*

Also be aware of how order of presentation of social groups can imply that the first-mentioned group is the norm or standard and that later mentioned groups are

deviant. Thus the phrases *men and women* and *White Americans and racial minorities* subtly reflect the perceived dominance of men and Whites over other groups. Similarly, when presenting group data, consider how placing socially dominant groups such as men and Whites on the left side of graphs and/or top of tables may also imply that these groups are the universal standard (Hegarty & Buechel, 2006). Avoid a consistent pattern of presenting information about socially dominant groups first.

Guideline 3: Acknowledge Participation

Write about the people in your study in a way that acknowledges their participation but is also consistent with the traditions of the field in which you are working. Thus, although descriptive terms such as *college students, children,* or *respondents* provide precise information about the individuals taking part in a research project, the more general terms *participants* and *subjects* are also in common usage. Indeed, for more than 100 years the term *subjects* has been used within experimental psychology as a general starting point for describing a sample, and its use is appropriate. *Subjects* and *sample* are customary when discussing certain established statistical terms (e.g., *within-subject* and *between-subjects* design). Further, the passive voice suggests individuals are *acted on* instead of being actors ("the students *completed* the survey" is preferable to "the students *were given* the survey" or "the survey was *administered* to the students"). "The subjects *completed* the trial" or "we *collected* data from the participants" is preferable to "the participants *were run.*" Consider avoiding terms such as *patient management* and *patient placement* when appropriate. In most cases, it is the treatment, not patients, that is managed; some alternatives are *coordination of care, supportive services,* and *assistance.* Also avoid the term *failed,* as in "eight participants failed to complete the Rorschach and the MMPI," because it can imply a personal shortcoming instead of a research result; *did not* is a more neutral choice (Knatterud, 1991).

As you read the rest of this chapter, consult www.apastyle.org for specific examples of problematic and preferred language in the Guidelines for Unbiased Language as well as further resources and information about nondiscriminatory language.

Reducing Bias by Topic

3.12 Gender

Remember that *gender* refers to role, not biological sex, and is cultural. Avoid ambiguity in sex identity or gender role by choosing nouns, pronouns, and adjectives that specifically describe your participants. Sexist bias can occur when pronouns are used carelessly, as when the masculine pronoun *he* is used to refer to both sexes or when the masculine or feminine pronoun is used exclusively to define roles by sex (e.g., "the nurse . . . *she*"). The use of *man* as a generic noun or as an ending for an occupational title (e.g., *policeman* instead of *police officer*) can be ambiguous and may imply incorrectly that all persons in the group are male. Be clear about whether you mean one sex or both sexes.

There are many alternatives to the generic *he* (see the Guidelines for Unbiased Language at www.apastyle.org), including rephrasing (e.g., from "When an individual conducts this kind of self-appraisal, *he* is a much stronger person" to "When an individ-

ual conducts this kind of self-appraisal, that person is much stronger" or "This kind of self-appraisal makes an individual much stronger"), using plural nouns or plural pronouns (e.g., from "A therapist who is too much like his client can lose *his* objectivity" to "Therapists who are too much like their clients can lose *their* objectivity"), replacing the pronoun with an article (e.g., from "A researcher must apply for *his* grant by September 1" to "A researcher must apply for *the* grant by September 1"), and dropping the pronoun (e.g., from "The researcher must avoid letting *his* own biases and expectations influence the interpretation of the results" to "The researcher must avoid letting biases and expectations influence the interpretation of the results"). Replacing *he* with *he or she* or *she or he* should be done sparingly because the repetition can become tiresome. Combination forms such as *he/she* or *(s)he* are awkward and distracting. Alternating between *he* and *she* also may be distracting and is not ideal; doing so implies that he or she can in fact be generic, which is not the case. Use of either pronoun unavoidably suggests that specific gender to the reader. Avoid referring to one sex as the *opposite sex:* an appropriate wording is the *other sex*. The term *opposite sex* implies strong differences between the two sexes; however, in fact, there are more similarities than differences between the two sexes (e.g., Hyde, 2005).

The adjective *transgender* refers to persons whose gender identity or gender expression differs from their sex at birth; *transgender* should not be used as a noun (National Lesbian & Gay Journalists Association, 2005). The word *transsexual* refers to transgender persons who live or desire to live full time as members of the sex other than their sex at birth, many of whom wish to make their bodies as congruent as possible with their preferred sex through surgery and hormonal treatment (American Psychiatric Association, 2000; Meyer et al., 2001). *Transsexual* can be used as a noun or as an adjective. The terms *female-to-male transgender person, male-to-female transgender person, female-to-male transsexual,* and *male-to-female transsexual* represent accepted usage (Gay & Lesbian Alliance Against Defamation, 2007). Transsexuals undergo *sex reassignment,* a term that is preferable to *sex change. Cross-dresser* is preferable to *transvestite.*

Refer to a transgender person using words (proper nouns, pronouns, etc.) appropriate to the person's gender identity or gender expression, regardless of birth sex. For example, use the pronouns *he, him,* or *his* in reference to a female-to-male transgender person. If gender identity or gender expression is ambiguous or variable, it may be best to avoid pronouns, as discussed earlier in this section (for more detailed information, see www.apastyle.org).

3.13 Sexual Orientation

Sexual orientation refers to an enduring pattern of attraction, behavior, emotion, identity, and social contacts. The term *sexual orientation* should be used rather than *sexual preference.* For a person having a bisexual orientation, the orientation is not chosen even though the sex of the partner may be a choice. For more information, see *Guidelines for Psychotherapy With Lesbian, Gay, and Bisexual Clients* (APA Committee on Lesbian, Gay, and Bisexual Concerns Joint Task Force on Guidelines for Psychotherapy With Lesbian, Gay, and Bisexual Clients, 2000; see also www.apastyle.org).

The terms *lesbians, gay men, bisexual men,* and *bisexual women* are preferable to *homosexual* when one is referring to people who identify this way. *Lesbian, gay,* and *bisexual* refer primarily to identities and to the culture and communities that have developed among people who share those identities. As such, the terms *lesbians, gay men,*

and *bisexual individuals* are more accurate than *homosexual.* Furthermore, the term *homosexuality* has been and continues to be associated with negative stereotypes, pathology, and the reduction of people's identities to their sexual behavior. *Gay* can be interpreted broadly, to include men and women, or more narrowly, to include only men.

3.14 Racial and Ethnic Identity

Preferences for terms referring to racial and ethnic groups change often. One reason for this is simply personal preference; preferred designations are as varied as the people they name. Another reason is that over time, designations can become dated and sometimes negative. Authors are reminded of the two basic guidelines of specificity and sensitivity. In keeping with Guideline 2, use commonly accepted designations (e.g., Census categories) while being sensitive to participants' preferred designation. For example, some North American people of African ancestry prefer *Black* and others prefer *African American;* both terms currently are acceptable. On the other hand, *Negro* and *Afro-American* have become dated; therefore, usage of these terms generally is inappropriate. In keeping with Guideline 1, precision is important in the description of your sample (see section 2.06); in general, use the more specific rather than the less specific term.

Language that essentializes or reifies race is strongly discouraged and is generally considered inappropriate. For example, phrases such as *the Black race* and *the White race* are essentialist in nature, portray human groups monolithically, and often serve to perpetuate stereotypes. Authors sometimes use the word *minority* as a proxy for non-White racial and ethnic groups. This usage may be viewed pejoratively because *minority* is usually equated with being less than, oppressed, and deficient in comparison with the majority (i.e., Whites). Use a modifier (such as *ethnic* or *racial*) when using the word *minority.* When possible, use the actual name of the group or groups to which you are referring.

Racial and ethnic groups are designated by proper nouns and are capitalized. Therefore, use *Black* and *White* instead of *black* and *white* (the use of colors to refer to other human groups currently is considered pejorative and should not be used). Unparallel designations (e.g., *African Americans* and *Whites; Asian Americans* and *Black Americans*) should be avoided because one group is described by color while the other group is described by cultural heritage. For modifiers, do not use hyphens in multiword names, even if the names act as unit modifiers (e.g., *Asian American* participants).

Designations for some ethnic groups are described next. These groups frequently are included in studies published in APA journals. These examples are far from exhaustive but illustrate some of the complexities of naming (see the Guidelines for Unbiased Language at www.apastyle.org). Depending on where a person is from, individuals may prefer to be called *Hispanic, Latino, Chicano,* or some other designation; *Hispanic* is not necessarily an all-encompassing term, and authors should consult with their participants. In general, naming a nation or region of origin is helpful (e.g., *Cuban, Salvadoran,* or *Guatemalan* is more specific than *Central American* or *Hispanic*).

American Indian, Native American, and *Native North American* are all accepted terms for referring to indigenous peoples of North America. When referring to groups including Hawaiians and Samoans, you may use the broader designation *Native Americans.* The indigenous peoples of Canada may be referred to as *First Nations* or *Inuit* people. There are close to 450 Native North American groups, and authors are encouraged to name the participants' specific groups, recognizing that some groups prefer the name for their group in their native language (e.g., *Dine* instead of *Navajo, Tohono O'odham* instead of *Papago*).

The term *Asian* or *Asian American* is preferred to the older term *Oriental.* It is generally useful to specify the name of the Asian subgroup: Chinese, Vietnamese, Korean, Pakistani, and so on. People of Middle Eastern descent may also be identified by nation of origin: Iraqi, Lebanese, and so forth.

3.15 Disabilities

The overall principle for "nonhandicapping" language is to maintain the integrity (worth) of all individuals as human beings. Avoid language that objectifies a person by her or his condition (e.g., *autistic, neurotic*), that uses pictorial metaphors (e.g., *wheelchair bound* or *confined to a wheelchair*), that uses excessive and negative labels (e.g., *AIDS victim, brain damaged*), or that can be regarded as a slur (e.g., *cripple, invalid*). Use people-first language, and do not focus on the individual's disabling or chronic condition (e.g., *person with paraplegia, youth with autism*). Also use people-first language to describe groups of people with disabilities. For instance, say *people with intellectual disabilities* in contrast to *the retarded* (University of Kansas, Research and Training Center on Independent Living, 2008).

Avoid euphemisms that are condescending when describing individuals with disabilities (e.g., *special, physically challenged, handi-capable*). Some people with disabilities consider these terms patronizing and offensive. When writing about populations with disabilities or participants, emphasize both capabilities and concerns to avoid reducing them to a "bundle of deficiencies" (Rappaport, 1977). Do not refer to individuals with disabilities as *patients* or *cases* unless the context is within a hospital or clinical setting.

3.16 Age

Age should be reported as part of the description of participants in the Method section. Be specific in providing age ranges; avoid open-ended definitions such as "under 18 years" or "over 65 years." *Girl* and *boy* are correct terms for referring to individuals under the age of 12 years. *Young man* and *young woman* and *female adolescent* and *male adolescent* may be used for individuals aged 13 to 17 years. For persons 18 years and older, use *women* and *men.* The terms *elderly* and *senior* are not acceptable as nouns; some may consider their use as adjectives pejorative. Generational descriptors such as *boomer* or *baby boomer* should not be used unless they are related to a study on this topic. The term *older adults* is preferred. Age groups may also be described with adjectives. Gerontologists may prefer to use combination terms for older age groups (*young-old, old-old, very old, oldest old,* and *centenarians*); provide the specific ages of these groups and use them only as adjectives. Use *dementia* instead of *senility;* specify the type of dementia when known (e.g., *dementia of the Alzheimer's type*). For more references relating to age, see *Guidelines for the Evaluation of Dementia and Age-Related Cognitive Decline* (APA Presidential Task Force on the Assessment of Age-Consistent Memory Decline and Dementia, 1998) and "Guidelines for Psychological Practice With Older Adults" (APA, 2004; see also www.apastyle.org).

3.17 Historical and Interpretive Inaccuracies

Authors are encouraged to avoid perpetuating demeaning attitudes and biased assumptions about people in their writing. At the same time, authors need to avoid historical

interpretive inaccuracies. Historians and scholars writing literature reviews must careful not to misrepresent ideas of the past in an effort to avoid language bias. anges in nouns and pronouns may result in serious misrepresentation of the origi- author's ideas and give a false interpretation of that author's beliefs and intentions. such writing, it is best to retain the original language and to comment on it in the scussion. Quotations should not be changed to accommodate current sensibilities ee sections 4.08 and 6.06).

Contemporary authors may indicate a historical author's original term by follow- it with an asterisk the first time it appears and by providing historical context ectly following the quotation. Below is an example of historically appropriate use a term that is considered biased by today's standards.

> In forming the elite scientific society called the Experimentalists, Titchener "wanted above all to have free, informal interchange between older and younger men* in the area of experimental psychology, with the goal of socializing the next generation into the profession" (Furumoto, 1988, p. 105).

*In this example, the term *men* seems to convey Titchener's intention to exclude omen from the society. Substituting a more gender-neutral or inclusive term may be storically inaccurate.