

## Medical journals, diversity, and cultural sensitivity



Dirk M. Elston, MD  
Charleston, South Carolina

The *Journal of the American Academy of Dermatology's* (JAAD's) mission is to help dermatologists improve patient outcomes. We publish a wide variety of articles with direct influence on patient care. As part of that mission, it is important to address skin disorders that affect patients of various backgrounds. Language can become emotionally charged, especially when dealing with aspects of human sexuality, ethnicity, and religion. Words and phrases may carry connotations that vary widely among cultural groups, and a phrase that seems innocuous to one group may be highly offensive to another. The American Academy of Dermatology and the JAAD have made considerable progress to help address the needs of all patient groups. This letter will address some of those efforts.

Our editorial board is chosen from our best reviewers. Decisions are data driven, rather than capricious, and based on aggregate data on timeliness and quality of reviews. Data captured by our editorial system include time to acceptance of the review assignment, number of reviews completed, number declined, timeliness of reviews, quality of the review, and number of reviews that are late or uninvited. We are also contacting diverse groups within our specialty, letting them know that we want them involved in this journal and sharing details on how the board is chosen because encouraging broad involvement is the best way to ensure the quality of future editorial boards. We periodically review the breadth of expertise within our editorial board and also review for inclusiveness, including both domestic and international representation.

We are taking steps to help ensure the diversity of mentors within our JAAD mentorship program and have established a Cultural Sensitivities Work Group as an added layer of review for articles

dealing with human sexuality, sex, ethnicity, politics, and other sensitive topics. The work group provides useful feedback to editors and authors on issues ranging from the choice of language to possible reviewer bias.

We are working on collections of articles and images that focus on various populations, and a tool kit to help authors produce better photographic images of various skin tones. We have also created a resource tool kit for new reviewers and editors, touching on topics from statistics to professional standards, cultural sensitivity, and diversity. The tool kit will serve as a valuable resource for individuals new to publishing who want to do the best job they can in representing our specialty and providing timely and fair peer reviews. We are disseminating links and encouraging all members of the JAAD board and every reviewer to engage in independent learning regarding bias and cultural sensitivity. Consistent displays of bias will result in dismissal of a reviewer from his or her responsibilities. We recognize that many of these issues are highly charged and well-intentioned efforts can easily run awry by underestimation of the emotional effect that accompanies these issues.<sup>1</sup>

Evidence suggests that research studies are more effective when researchers and participants share a common language and culture, and there is an increasing body of recommendations about how best to approach differences in language and culture, avoid the use of offensive language, and remind us all that medicine is a higher calling that comes with ethical obligations.<sup>2-4</sup> We are all in this together, and we welcome your participation and suggestions.

### REFERENCES

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From the Department of Dermatology, Medical University of South Carolina.

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Correspondence to: Dirk M. Elston, MD, Department of Dermatology, MUSC, 135 Rutledge Ave, 11th Floor, Charleston, SC 29425. E-mail: [elstond@musc.edu](mailto:elstond@musc.edu).

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**Dermatology COVID registry: We need your help to answer critical questions about vaccine reactions**

The Dermatology COVID-19 Registry is collecting data on cutaneous COVID-19 vaccine reactions.

The registry is supported by the American Academy of Dermatology and the International League of Dermatological Societies, and is available online through the AAD website at [www.aad.org/covidregistry](http://www.aad.org/covidregistry). Any health care worker can enter a case, data entry takes 5 to 7 minutes, and no patient-protected health information is required.

Special thanks to principal investigator Esther Freeman, MD, PhD and staff at Harvard and the AAD for creating this resource.

Please enter any vaccine reactions you see into the registry.