

Editorial

GSA Journal Commitment to Inclusion, Equity, and Diversity: Editors Announce New Guidance

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We write this editorial in the context of a viral pandemic that has disproportionately affected communities of color, people living in poverty or on the edge of poverty, and those with other forms of economic, social, and health disadvantage (1–4). The virus has exploited centuries-old social and economic conditions that have left a legacy of social, economic, and health inequity (5–9). We recognize that these underlying conditions of inequality and oppression, starkly visible against the backdrop of events in the past year, also exist within our scholarly institutions, including our own journals. We further recognize that such longstanding conditions inhibit the development of science and scholarship, perpetuating inequity. As Editors-in-Chief of the Gerontological Society of America (GSA) publishing portfolio, we affirm that aging represents a kaleidoscope of experience, and that older adulthood intersects with diverse lifelong and acquired identities. We aspire to represent the wealth and breadth of aging experience in the scholarship we publish and recognize that systems of inequity and bias have diminished such representation in these journals. We therefore commit to encouraging cutting-edge, conceptually driven work that addresses and aims to overcome inequity in health, mental health, social status, and justice in late life, particularly those well-documented inequities arising from age, socioeconomic status, racial, ethnic, sex, and gender bias and discrimination, geography, and intersections among them. We further commit to building and maintaining diverse author, reviewer, and editorial cohorts that will nurture this scholarship in the years to come.

To further our goal to promote scientific and scholarly actions to address the above-referenced inequities and to create platforms

that are inclusive and respectful to all stakeholders, we commit to offering revised guidance for authors. Although the specifics of this guidance will vary by journal, what follows outlines the general principles.

- We expect authors to demonstrate commitment to equity and inclusion by using inclusive, specific, and people-first language to describe samples, participants, populations, prior research, and other researchers. The specific style guides will vary by journal, but each style guide (eg, American Psychological Association, American Medical Association [AMA]) provides some guidance on appropriate language, and authors should carefully review this guidance before submitting. Note that GSA guidance from the Reframing Aging initiative (https://www.geron.org/images/documents/Reframing_Aging_Journal_Manuscript_Guidelines.pdf) supersedes other guidance related to age; links to additional guidance are provided below.
 - Authors may further want to consult guidelines on race and ethnicity published by the AMA (10). Note that the AMA continues to refine these guidelines.
 - See also <https://nces.ed.gov/FCSM/SOGL.asp>, https://www.cdc.gov/brfss/data_documentation/pdf/BRFSS-SOGI-Stat-Brief-508.pdf, and <https://nces.ed.gov/FCSM/SOGL.asp> for guidance on measuring and/or analyzing sexuality and gender identity variables.
 - See <https://adata.org/factsheet/ADANN-writing> for guidance on writing about ability/disability.

- See <https://www.dementia.org.au/sites/default/files/resources/dementia-language-guidelines.pdf> for guidance on writing about people living with dementia.
- Inclusion and exclusion criteria are important design considerations for any empirical study, and these include demographic and identity characteristics. Authors of empirical manuscript submissions should explicitly note and discuss the purpose, contributions, and limitations of their sampling. For research on humans, authors should be mindful of what demographic groups are, and are not, included in their samples, including final analytic samples, and how sampling choices affect the relevance and generalizability of their data.
 - Articles should report comprehensive demographic information on all human samples in qualitative and quantitative studies. The variables/characteristics collected should be listed in the Method section and reported in the Results section. Demographic characteristics of the sample should be briefly summarized in the Abstract section. When demographic data are collected but not reported, or groups are excluded, authors should state why.
 - If collected, authors should specify how information on race/ethnicity, sex, gender, gender identity, and sexual orientation is assessed or used in analyses (eg, what categories, sources for the classification, and who made the designations). The reasons for collecting the data should be clear in the Method section.
 - When using secondary data, authors should note limitations of the original sample that may preclude the inclusion of some groups. Justifiable reasons may include lack of statistical power, but this should be explicitly stated in the manuscript in the Method and Limitations sections.
 - Authors should be careful in speaking about identity characteristics as “risks” for an outcome. Following Centers for Disease Control and Prevention guidance, demographic and identity characteristics are bound up with “conditions in the places where people live, learn, work, play, and worship, [which] affect a wide range of health risks and outcomes” (11).

To encourage and assist reviewers to pay attention to equity and diversity in the works they review, each journal will also adopt additional reviewer guidance. This guidance will parallel expectations for authors outlined above and will include considering whether the literature reviewed fairly reflects the scholarly diversity of the field, including work by authors from underrepresented groups. Reviewers will be asked to consider whether, for research on humans, there is a clear description of participant selection criteria and rationale for that selection considering the scientific objectives and proposed study design. They should critically review descriptions of recruitment and outreach strategies for enrolling diverse participants where appropriate, and whether authors have appropriately acknowledged sampling limitations. Where there are multiple demographic groups included, reviewers should consider whether comparisons are motivated by clear research questions grounded in theory or supporting evidence rather than relegated to post hoc tests. If a formal comparison of groups is not appropriate for the study, reviewers should expect a statement of justification.

As we nurture equity and inclusion in the scholarly works we publish, we are also committed to nurturing the growth and recognition of scholars from groups that have been underrepresented in our journals. We therefore will seek diversity in selecting reviewers and editorial board and editorial team members who will help guide us in our equity and inclusion efforts, bringing diverse viewpoints, and pushing our scholarship in new directions. We also commit to intentionally mentoring emerging scholars to facilitate their involvement in journal work. We understand that these first steps are long overdue, and hope that our GSA community will join us in moving beyond them to a more equitable future.

Acknowledgments

The guidelines described in this editorial will be implemented in the Instructions to Authors and reviewer checklists of *The Journals of Gerontology, Series A: Biological Sciences and Medical Sciences* during January 2022.

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