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How are we DEI-ing?

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How are we DEI-ing?

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Conflict of Interest Statement

The authors state there is no conflict of interest.

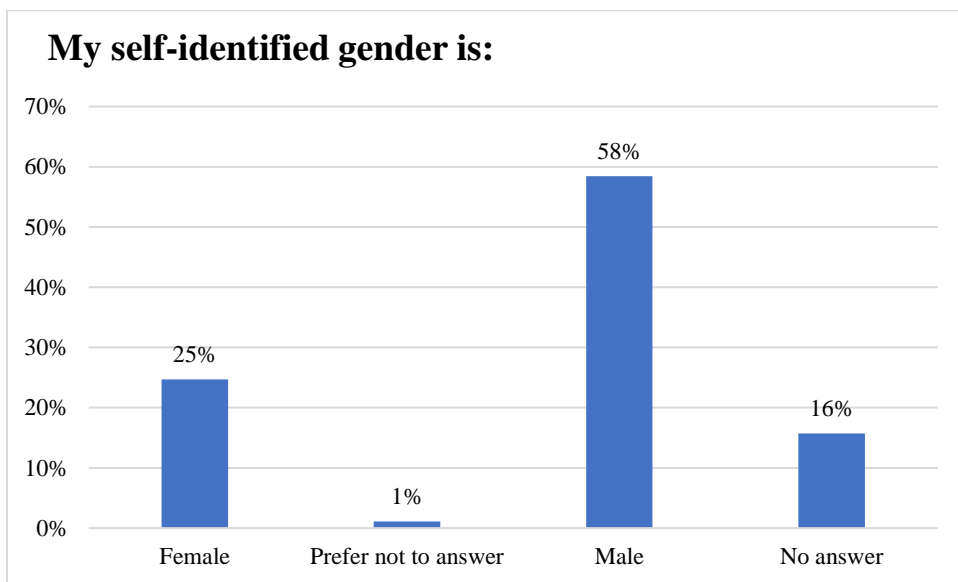
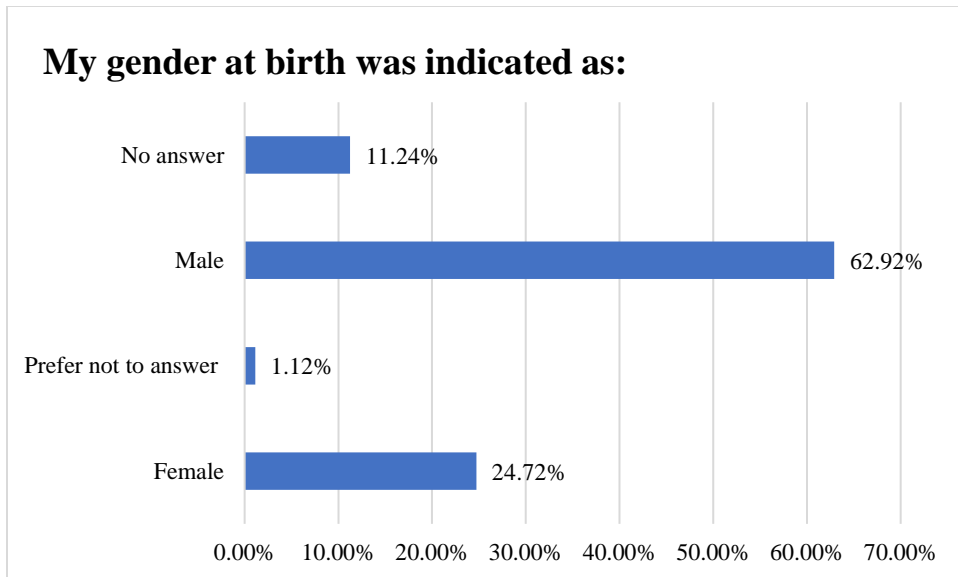
Scholarly medical publishing is not immune to the virulence of disparities. In 2014, in a survey of more than 6000 medical publishing professionals from 33 countries, 90% self-identified as white and more than 50% had advanced or master's degrees.^{1,2} Diversity nurtures creativity and scientific innovation.³ Having a diverse group of role models in editorial and authorship positions will encourage young individuals to seek the same path.² Encouraging diversity and promoting inclusion in medical publishing is one of our major goals at *Advances in Clinical Medical Research and Healthcare Delivery*. As we embark upon the publication of our second volume we reflect on the diversity and inclusion of our authorship.

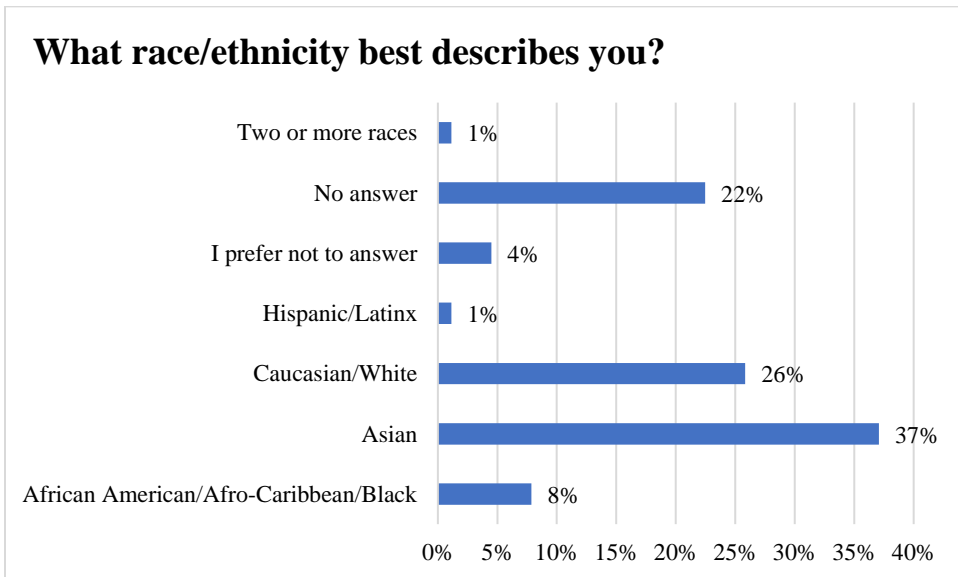
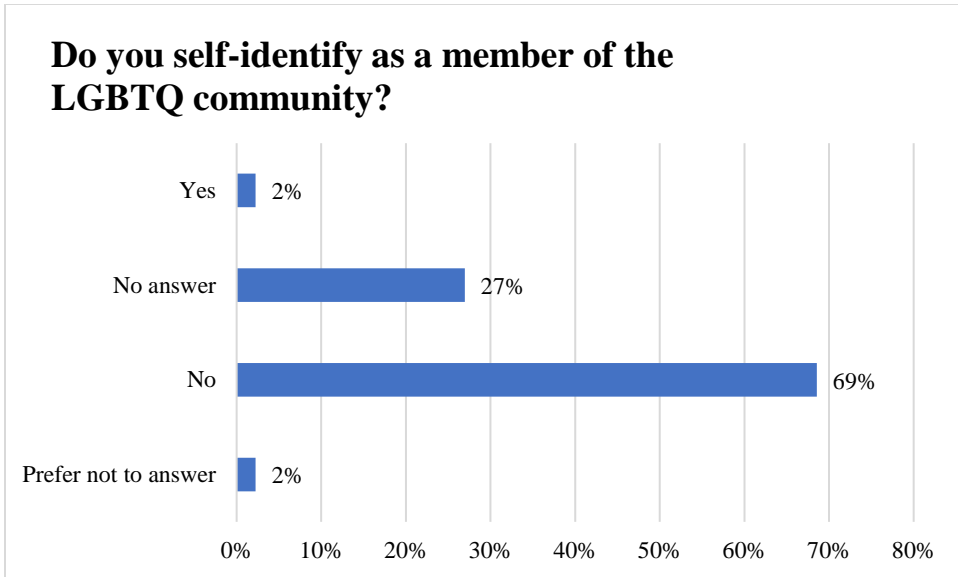
During our journal planning process we sought an efficient way to collect diversity, equity and inclusion (DEI) data from authors. After consulting with our platform support team, we added four DEI-related questions to the article submission form. Responses to the DEI questions are optional. Now we can review this data on an ongoing basis to measure our progress in this area. The questions are:

1. My gender at birth was indicated as:
2. My self-identified gender is:
3. Do you self-identify as a member of the LGBTQ community?
4. What race/ethnicity best describes you?

In January of 2022, we downloaded a report containing the DEI question responses for all submissions to date. The reporting features of our publishing platform allow us to select which meta-data fields we want to include. To protect the privacy of our authors, names were not included in the data export. There were 89 authors.

Results indicate that the majority of authors were assigned male gender at birth and the majority of authors self-identified as male. Of the 65 who responded to the LGBTQ question, 2 self-identified as members of the LGBTQ community, 2 preferred not to answer and 61 said no. The four figures herein illustrate the findings.





In addition to encouraging diversity, equity and inclusion among our authors, we also wish to seek inclusivity among our editorial teams. *Advances* promotes the culture of inclusiveness and intends to mentor/create pathways under the guidance of the editorial board for those underrepresented in medicine. We also adopted the AMA Manual of Style, emphasizing the use of non-stigmatizing, culturally appropriate and inclusive language, as part of our submission guideline. We will continue to report our disaggregated DEI data in the future, which will act as our evaluation tool for this initiative. Our readers can count on more innovative strategies around DEI with meaningful impact in the future.

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