

NLM Correspondence: Sep 29-Oct 3, 2022

Subject: Follow-Up to Letter regarding discriminatory MeSH terms in PubMed

Sep 29, 2022, 10:39 AM

Greetings Diane,

We recently learned of upcoming changes set to take place for [MeSH 2023](#). The initial findings positively reflect some of the concerns we've shared in the Letter to NLM addressing problematic subject headings, recommended changes to terminology, warning of harmful language in controlled vocabularies and scope note information on the social constructs related to race/ethnicity. We also noted that some of these changes reflect MeSH recommendation submissions related to the [Hispanic/Latinx Inclusive Terminologies Project](#). All of these updates are a promising and welcome change in improving racial/ethnic identities in MeSH. As we've not heard back about our efforts, we'd like to follow-up with you and inquire if our contributions directly influenced these changes? If so, we would like to share this positive development with those who contributed to these efforts and signed the letter.

Below are some of the findings that were noted:

Concerns raised for Blacks[mh]:

- [Black or African American](#) (revised 2022/08/03)
 - "Scope Note: A person having origins in any of the black racial groups of Africa (<https://www.federalregister.gov/documents/1997/10/30/97-28653/revisions-to-the-standards-for-the-classification-of-federal-data-on-race-and-ethnicity>). In the United States it is used for classification of federal government data on race and ethnicity. Race and ethnicity terms are self-identified social construct and may include terms outdated and offensive in MeSH to assist users who are interested in retrieving comprehensive search results for studies such as in longitudinal studies."
- [Black People](#) (revised 2022/07/14)
 - "Scope Note: Persons having origins in any of the black racial groups of AFRICA. Note that OMB category BLACK OR AFRICAN AMERICAN is available for the United States population groups. Race and ethnicity

terms, as used in the federal government, are self-identified social construct and may include terms outdated and offensive in MeSH to assist users who are interested in retrieving comprehensive search results for studies such as in longitudinal studies.

Expanding Hispanic/Latinx Representation:

- [Caribbean People](#) (revised 2022/07/14)
 - "Scope Note: People native to or inhabitants of islands in the Caribbean Sea or CARIBBEAN including ANTIGUA AND BARBUDA; ARUBA; BAHAMAS; BARBADOS; BRITISH VIRGIN ISLANDS; CARIBBEAN NETHERLANDS; CUBA; CURACAO; DOMINICA; DOMINICAN REPUBLIC; GRENADA; GUADELOUPE; HAITI; JAMAICA; MARTINIQUE; PUERTO RICO; SAINT KITTS AND NEVIS; SAINT LUCIA; SAINT VINCENT AND THE GRENADINES; SINT MAARTEN; TRINIDAD AND TOBAGO; and UNITED STATES VIRGIN ISLANDS."
- [Central American People](#) (revised 2022/07/12)
 - Scope Note: People native to or inhabitants of [CENTRAL AMERICA](#) including [BELIZE](#); [COSTA RICA](#); [EL SALVADOR](#); [GUATEMALA](#); [HONDURAS](#); [NICARAGUA](#); and [PANAMA](#).
- [South American People](#) (revised 2022/07/14)
 - Scope Note: People native to or inhabitants of [SOUTH AMERICA](#) including [ARGENTINA](#); [BOLIVIA](#); [BRAZIL](#); [CHILE](#); [COLOMBIA](#); [ECUADOR](#); [FRENCH GUIANA](#); [GUYANA](#); [PARAGUAY](#); [PERU](#); [SURINAME](#); [URUGUAY](#); and [VENEZUELA](#).
- [Hispanic or Latino](#) (revised 2022/07/14)
 - Entry term added for "Latinx"

Muchísimas gracias,

Aidy W. (she/hers/ella)

Director

School of Medicine Library

UNLV Libraries, University of Nevada Las Vegas

Re: Follow-Up to Letter regarding discriminatory MeSH terms in PubMed

Oct 3, 2022, 3:55 PM (10 days ago)

Dear Ms. Weeks,

Thank you for your follow-up note. It is reassuring to hear that you are encouraged by the overall direction of our continuously evolving MeSH terminology.

The National Library of Medicine (NLM) considers inputs from our broad spectrum of stakeholders received throughout our MeSH review cycles. This feedback comes through several different channels, including the [online NLM helpdesk](#), our partners across NIH, inquiries, and other feedback. The content of your letter was indeed taken into consideration, as the 2022 review cycle was coming to a close. The inputs from the [Hispanic/Latinx Inclusive Terminologies Project](#) directly influenced some of the new terminology in the upcoming MeSH 2023.

A new outlet for feedback informed by your letter were listening sessions as part of the MeSH review cycle. The first was held this past summer with the medical library, in which we appreciated your participation. We intend to hold our next MeSH listening session in January 2023. More information will be shared via the [NLM Technical Bulletin](#).

Additionally, as you may recall from other correspondence and the June listening session, NLM is aligning MeSH race and ethnicity terminology with the statistical standards set by the Office of Management and Budget (OMB). [OMB is taking action](#) to update its race and ethnicity terminology standards. I shared that information with the Medical Library Association (MLA) and other NLM partners. I am happy to note that MLA will be sharing input with OMB at an October 15 listening session.

You can also provide feedback to OMB, directly, to share your perspectives and input on statistical standards for race and ethnicity. They are offering the following opportunities for input:

1. Soliciting public input on OMB's recommended proposal for revisions to Directive No. 15 through a Federal Register Notice. To receive a notification for when the solicitation is issued, please email Statistical_Directives@omb.eop.gov and request to join the mailing list.
2. Holding [virtual, bi-monthly listening sessions to hear directly from members of the public](#). To schedule a listening session, please send a brief email expressing interest to Statistical_Directives@omb.eop.gov.

We appreciate your attention to this work, and ask that you continue to engage with us directly through [NLM customer service](#), [MeSH suggestions](#), and our listening sessions. We review recommendations as we receive them and incorporate them in our processes, as appropriate.

Sincerely,
Dianne

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