MID-AMERICA CHAPTER NEWS
American Medical Writers Association

Summer 2020
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President’s Letter
Rebecca Bigelow, PhD

We hope that this newsletter finds you safe and healthy! With the world seemingly upside-down, I am definitely enjoying the outdoors as much as I can during these summer months. I hope you too are able to get outside and refresh yourselves, whether it’s enjoying a walk around your neighborhood or taking your laptop outside to get some work done. It’s amazing what a breath of fresh air can do for your spirits!

As we enter the dog days of summer, your chapter officers and national leaders have been busy planning upcoming events that we encourage you to take part in. This year, our annual conference is going virtual! The annual AMWA conference is always a great opportunity to network, learn, and further our careers. Attending the AWMA conference will be even easier this year as the conference will come to you! Please be on the lookout for information from national AMWA regarding registration and events.

If you have specific questions or concerns, please feel free to reach out (rebecca@epionmedcom.com).
Betsy Frick presented a primer on freelancing (Find Customers—Do Work—Get Paid) on March 31st. This was the first ever virtual TechWrite STL luncheon, held via Zoom due to the COVID-19 pandemic and local Stay at Home orders. While admittedly not the same as meeting in person, it was great to see and hear those who attended. Betsy described several strategies for finding clients, different approaches for setting rates, and the importance of contracts, scope of work statements, and letters of agreement. Some of the longtime freelancers in attendance described their experience with these aspects of self-employment. Nineteen people attended the event, including eight AMWA members.

Our May 4th event, Medical Ghostwriting: Ethical and Practical Controversies, was led by Pranali Pathare and Dana Delibovi, and also conducted on the Zoom platform. Despite the opposition of AMWA and other groups, medical ghostwriting remains a common practice. Ghostwriting is especially frequent in communications tied to the pharmaceutical, device, and diagnostics industries. The distinction between ghostwriting, ghost authoring, and guest authoring was described, and a brief summary of the research regarding the prevalence of ghostwriting was presented. The stringent authorship criteria of the International Committee of Medical Journal Editors were reviewed. Strategies for preventing ghostwriting were discussed, and some attendees talked about how they have broached this issue with their clients. A total of ten people were in attendance, including seven AMWA members.

Upcoming 2020 events include a virtual event in July about recent legislation that negatively affects the livelihood of freelance writer and editors, and a November session highlighting the best and worst books of the year as read by our members, moderated by Leslie Neistadt.

Lisa Balbes and Joanne McAndrews have been co-organizing the group since September 2006, when it was formed as a merger of the local AMWA and STC-CIC groups. A schedule of upcoming luncheons can be found on our chapter website (http://www.amwa-midamerica.org/index.html). A complete list of past topics, as well as handouts, is available on the History tab on that website.
Updates to Reporting Black and White as Racial Categories

Everyone in the business of communication has a responsibility to use and promote the use of clear and accurate language, with words that reflect the world around us. As evidenced by perpetual updates to style manuals, dictionaries, and other resources, nomenclature is never a static enterprise.

Specifying the race or ethnicity of an individual can provide information about the generalizability of the results of a specific study. Because many individuals may have mixed heritage, a racial or ethnic distinction should not be considered absolute, and ideally it should be based on a person’s self-designation.

In the JAMA Network journals, we ask authors to provide an explanation of who classified individuals’ race, ethnicity, or both, the classifications used, and whether the options were defined by the investigator or the participant. In addition, the reasons that race/ethnicity were assessed in the study also should be described (eg, in the Methods section and/or in table footnotes).

We have received a number of queries about the presentation of racial and ethnic terms in the AMA Manual of Style, in particular the manual’s style current preference for using lowercase for the term black. The 11th edition specifies capitalizing racial and ethnic terms that derive from geographic nouns such as Asian, Alaska Native, and Latina (chapter 10.3.2, Capitalization, Proper Nouns, Sociocultural Designations), but the terms black and white have been lowercased as racial designators (because they are not derived from proper nouns).

However, ongoing and recent events spurred us to reconsider this style recommendation. The manual’s committee met several times, conducted research, and sought input on this issue from multiple sources. We deem this issue too important to wait for change.

In weighing the options (keep black and white lowercase, capitalize just Black, or capitalize both Black and White), we reviewed usage recommendations in a variety of sources, including other style manuals (Chicago Manual of Style, APA style, and the AP Stylebook), writing by an array of scholars, and guidance on diversity from academic and government sources, such as the US National Institutes of Health.
The committee has concluded that we will now capitalize both Black and White, which aligns with the capitalization preference applied to other racial/ethnic categories. We acknowledge that there may be instances in which a particular context may merit exception to this guidance, for example, in cases for which capitalization could be perceived as inflammatory or otherwise inappropriate.

The online style manual will be updated to reflect this change, including the section on race/ethnicity in the Usage chapter (chapter 11.12.3, Usage, Inclusive Language, Race/Ethnicity) and the aforementioned entry in the Capitalization chapter.

There are additional language issues to consider, including use of “other” as a category and abbreviating racial and ethnic terms. The nonspecific “other” is sometimes used for comparison in data analysis but may also be a “convenience” grouping/label that should be avoided, unless it was a prespecified formal category in a database or research instrument.

In such case, the categories included in “other” should be defined and reported. Authors and researchers are advised to be as specific as possible when reporting on racial/ethnic categories (even if these comprise a small percentage of participants).

Example (not recommended): “The study included 200 White individuals, 100 Black individuals, and 100 of other race/ethnicity.”

In this situation, an editor should ask the author for further explanation, considering that the racial/ethnic background of a quarter of the study is not provided.

Example (preferred): “The study included 200 White individuals, 100 Black individuals, and 100 of other race/ethnicity, which included Chinese, Japanese, Korean, and Native Hawaiian/Pacific Islander and those who reported multiple categories.”

Racial and ethnic terms also should not be abbreviated unless necessary for space constraints (eg, in tables and figures with clear expansion in explanatory footnotes or legends).

The manual’s committee will continue to explore changing trends in usage of other racial and ethnic terms as well, such as Latinx. As with all changes to the style manual, we welcome input from readers. The update to the manual online will be implemented as soon as possible, and the JAMA Network journals will begin to use Black and White as we edit new content. –Stacy Christiansen and Tracy Frey, for the AMA Manual of Style committee
AMWA Notes

What’s New: Get FIT for free this month: Confidence Intervals

We are shaking things up in July with the free monthly member learning activity. This month, AMWA wants you to “get FIT” with Confidence Intervals. Clinical studies face a major problem: they are limited in the number of study subjects they can include. It is not practical to include every person with a specific disease in the study, yet researchers want to be able to apply their research to the general population. How can they overcome this hurdle? By using confidence intervals. This activity — part of the FIT series (Fast, Interactive Training) — offers short, targeted learning and exercises. Get FIT now.

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People who write obscurely are either unskilled in writing or up to mischief.

— Peter Medawar, the Nobel Prize in Physiology or Medicine, 1960