



**Central and
North West London**
NHS Foundation Trust



Lewisham and Greenwich
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England
London

Inclusive Language Guide

Promoting Respectful and Inclusive Communication

This document has been co-produced by London Pharmacy EDI Champions from NHS England, Central and North West London NHS Foundation Trust (CNWL), and Lewisham and Greenwich NHS Trust.

Introduction

This guide provides practical terminology and principles to support inclusive communication across three key areas: Neurodiversity, LGBTQ+, and Race & Ethnicity. There is recognition of intersectionality and overlapping identities within pharmacy environments. By embedding respectful communication into everyday practice, we can foster a more positive workplace environment where everyone feels a sense of belonging.

Why does it matter?

In pharmacy, every interaction whether with patients, colleagues, or wider healthcare teams has the potential to influence outcomes. Poor behaviours such as disrespect, and rudeness can significantly impact staff morale, wellbeing and performance, ultimately affecting patient safety¹.

Use of inclusive language is a way to demonstrate compassionate leadership; by cultivating a culture where individuals feel heard, supported, and valued. When pharmacy leaders and team members model these behaviours, they build trust, reduce stress, and enhance collaboration across multi-professional teams.

How do we use it?

The words we choose reflect our values and shape how others experience the workplace. Embedding inclusive language in written (emails, policies, forms) and spoken communication ensures that everyone regardless of background, role, or identity feels respected and empowered to contribute fully.

Each section outlines core principles and offers examples of language to avoid and alternatives to use instead along with the reasons why.

Core principles

- Listen first; respect individual preferences
- Avoid infantilisation
- Ask respectfully if unsure
- Be clear and direct
- Respect boundaries and processing differences
- Avoid stereotypes and heteronormative assumptions
- Share pronouns and use gender-neutral language
- Respect privacy and avoid disclosing or exposing someone's sexual orientation or gender identity without their consent
- Focus on the person first, use language that respects their identity and lived experience
- Consider whether including race or ethnicity is relevant to the context.

Section 1: Neurodiversity (ND)

The term neurodiversity refers to the diversity of human minds. Within neurodiversity, we regularly refer to those who are neurodivergent (as their brains function in a way which is different to standard neuro-functioning) and those who are neurotypical. Neurodivergent thinking includes those experiencing autism, attention deficit hyperactivity disorder (ADHD), dyslexia and dyscalculia.

The table below shows some examples that could improve everyday language in relation to neurodivergent people.

| Instead of | Use Instead | Why | Example |
|------------------------------------------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| “I’m a bit OCD; I always check things twice” (referring to yourself without a diagnosis) | “I’m a stickler for attention to detail” | Trivialising a condition that can be very impactful on someone’s daily life | “I have double checked the figures because I always like to do that before I send the final copy” |
| “Having ADHD is just an excuse; I do that too” (manager to direct report) | “Can you help me to understand how ADHD has affected you with this?” | Avoids invalidation. Everyone has unique ways of thinking and processing the world | “How can we set deadlines and goals that will work for you?” |
| You “suffer” from autism | I understand that you are autistic | Avoids pathologising identity and use neurodivergent or preferred term | “Anil has shared his thoughts on this project with me as a person with autism” |



[Learn further on how neurodivergent people feel and engage.](#)

Section 2: LGBTQ+

LGBTQ+ stands for Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, with the plus symbol (+) representing other diverse sexual orientations and gender identities, such as intersex, asexual, non-binary, and more. The term acknowledges and respects the spectrum of identities beyond traditional categories, promoting inclusion, visibility, and equality. Additionally, the term is inclusive of LGBTQ+ ‘Allies’ who use their voice to support and uplift the community.

For LGBTQ+ people, inclusive language avoids hetero-normative assumptions (the basis that heterosexuality is the default or ‘norm’) and instead focuses on communication that demonstrates understanding and acceptance. Additionally, inclusive language for LGBTQ+ people must enable the mutual disclosure of pronouns; preventing an individual from being mis-gendered and recognising that gender identities are not limited to the binary of male and female. Adopting Inclusive language can also prevent ‘outing’ someone, where someone’s sexual orientation is disclosed or exposed without their consent.

The table below shows some examples of correct language to use in everyday interactions with people from the LGBTQ+ community.

| Instead of | Use Instead | Why | Example |
|----------------------------------------------------|--------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|
| Normal e.g. “Normal people” “he’s normal” | “Cisgender people” “Heterosexual people” “he’s heterosexual” | Using ‘Normal’ implies that all others are ‘abnormal’ and stigmatizes LGBTQ+ people. Using the precise adjective is clear and respectful | “This service is used by cisgender people and trans/non-binary people” |
| Homosexual | Gay / Lesbian | Clinical and alienating | “Barry told his parents that he’s gay” |
| Born male/female | Assigned male/female at birth | More accurate and respectful | “They were assigned male at birth, but they are non-binary” |
| Ladies and gentlemen | Everyone / Folks | Moves away from binary language | “Everyone, thank you for coming to this meeting” |



[Discover how to create safer spaces for LGBTQ+ individuals.](#)

Section 3: Race & Ethnicity

This section focuses on the language our culture uses regarding race and ethnicity. Race usually refers to physical traits, while ethnicity relates to shared identity, like language or traditions. Understanding the difference helps us respect and value the diversity of experiences and backgrounds within our communities and workplaces.

Language that reflects racial or ethnic bias targets aspects of a person’s identity, rather than recognising them as an individual. This can include race related microaggressions², racial slurs, derogatory remarks, or jokes based on racial or ethnic stereotypes². Even if a term does not seem offensive to you personally, it may carry harmful connotations for others, especially when rooted in a history of racism or exclusion.

The table below shows some examples that could improve everyday interactions with people from various cultural heritages.

| Instead of | Use Instead | Why | Example |
|-------------|-----------------------------------------------------------------------------------------|---------------------------------------------------|------------------------------------------|
| BAME or BME | Global majority / Ethnic Minority groups ³ / specific ethnicity ⁴ | Avoids masking differences | Pharmacy Technicians of Chinese heritage |
| Mixed race | People of mixed heritage | More respectful | A trainee of mixed heritage |
| Caucasian | White / specific region ⁵ | 'Caucasian' reinforces racial hierarchy | White Irish person |
| Oriental | East Asian / South Asian / specific country ⁵ | 'Oriental' is outdated and offensive ⁴ | A pharmacist from Vietnam |



[Explore how thoughtful adjustments in language can foster inclusion.](#)

Why it matters in pharmacy

Adopting inclusive language is consistent with:

- GPhC Standards for Pharmacy Professionals: person-centred care, effective communication, treating people with respect⁶.
- Inclusive Pharmacy Practice principles: the aim of which is to reflect our diverse communities, to improve health inequalities in the population and the experience of both patients and pharmacy professionals⁷.

By remaining open, flexible, and respectful, healthcare professionals can ensure communication upholds autonomy, reduces stigma, and strengthens trust.

Final notes

Thank you for using this guide to learn about inclusive language. Our aim is that such resources will not be needed in the future as society and workplaces grow and change to be accepting of everyone.

Further guidance for Neurodiversity

Inclusive Language: Communicating with Neurodivergent People

Language shapes how we relate to one another. When it comes to communicating with neurodivergent people, the words and phrases we use can have a powerful impact. Whether intentional or not, certain language can come across as patronising, dismissive, or invalidating. On the other hand, thoughtful, open communication can foster trust, reduce stigma, and create more inclusive environments.

This guide has been reviewed by neurodivergent staff with lived experience, and reflects insights shaped by real-world perspectives. It offers suggestions for phrases to use and avoid when interacting with neurodivergent individuals. Neurodivergence is broad and varied - what feels supportive to one person might feel uncomfortable to another- it is important to treat each person as an individual, not a stereotype.

Things to remember

1. Listen First

Neurodivergent people have diverse identities, preferences and needs. When in doubt, ask. Whether it is about language (e.g. “autistic person” vs. “person with autism”) or communication style, listening is your strongest tool.

2. Avoid Infantilisation

Neurodivergence does not diminish adulthood or intelligence. Use the same respectful tone and language you would with any colleague. Being well-meaning does not justify being patronising.

3. Be Clear

Some neurodivergent people process language and social cues differently. Being clear and direct, while still polite, is often more effective than using vague or euphemistic language.

4. Respect Boundaries & Processing Differences

Some individuals may need more time, clarity, or space. Honour those needs without judgment or pressure. Slower processing or different responses are not signs of disinterest - they are simply different ways of engaging.

Practical Application

- Use these suggestions as conversation starters, not conclusions. The aim is not to prescribe rigid rules, or to follow a script, but to encourage more respectful, person-centred communication.
- Prioritise individual choice: the most respectful approach is to ask and listen.
- Embed this practice into everyday interactions, supporting a culture of dignity and inclusion across pharmacy and healthcare settings.

Neurodiversity Inclusive Language Table

| Instead of | Please use | Why | Example |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>"Everyone's a little [autistic / ADHD] these days." (Manager to their member of staff after disclosing their neurodivergence)</p> | <p>"How can I support you?"</p> <p>"Thank you for sharing the ways in which autism affects your life"</p> <p>"I recognise that while some of your experiences with autism overlap with those of neurotypical individuals, your lived experience as an autistic adult must not be invalidated"</p> | <p>While often meant to be supportive or inclusive, "everyone's a little..." can feel dismissive. The use of this expression minimises the real, often lifelong, challenges neurodivergent people face and can undermine the legitimacy of their experiences⁸.</p> <p>Acknowledging differences respectfully is more validating and supportive. Asking how to support opens respectful dialogue.</p> | <p>"Thank you for making me aware of the challenges that you face in the workplace. I have made some notes about the adjustments that we have discussed today and will email them to you. Please can you take some time to read back over the list to see if there is anything missing. Once you let me know you are happy with the adjustments, I will plan a monthly meeting for us to review how effective they are in supporting you at work. Let me know if you would like to discuss anything before the first meeting."</p> |
| <p>"You don't seem autistic / ADHD to me." "But you're so high functioning" "Are you diagnosed?" "You seem so normal to me!" (Scenario as above)</p> | <p>"Thank you for sharing your diagnosis and experiences with me"</p> <p>"I am keen to arrange some time for us to meet so that you can let me know in detail about the challenges you have been dealing with in our workplace"</p> | <p>Although the intention is often to reassure the person that they seem to be managing well, it implies they're "not really" neurodivergent; invalidating. It also places value on appearing neurotypical, hiding one's real neurodivergent self, and ignores hidden struggles⁹. The alternative suggested phrase encourages open communication without judgement.</p> | <p>"Thank you for sharing your diagnosis with me. As your line manager, it is important that we discuss your role and which aspects that you feel are impacted. We can use the reasonable adjustments framework to identify any challenges that you experience in our workplace and agree some adjustments."</p> |

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|-----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>“What’s your special talent?”</p> <p>Referring to neurodivergence as a “superpower.” (Any scenario with a person with neurodivergence)</p> | <p>There is no real alternative here, it is always advisable to listen to the individual’s experience of their neurodivergence and ask them thoughtful questions to understand them better.</p> | <p>While often well-intentioned, this reinforces stereotypes (like assuming all autistic people are savants) and can feel dismissive. Not everyone experiences neurodivergence as a gift-many face significant challenges. Framing it only as a strength overlooks the disabling aspects and the diversity of individual experiences⁸.</p> | <p>“It was really interesting hearing you talk about your research thesis topic today.”</p> |
| <p>“You just need to try / work harder.” (Manager to their member of staff)</p> | <p>“Please take the time you need”</p> <p>“How are you approaching this task? Are there ways in which I can support you?”</p> <p>“Do you prefer the piece of work to be broken down into smaller regular deadlines or to have an end of task deadline?”</p> | <p>Effort based framing overlooks executive dysfunction, burnout, sensory and social communication difficulties.</p> <p>ADHD involves executive dysfunction; dyslexia affects reading speed and accuracy; dyspraxia impacts motor planning⁹. Struggles are not due to laziness.</p> <p>“Take your time” reduces pressure and respects the variation in processing.</p> | <p>“So, we have set some mini deadlines within the main project timeline and I will arrange meetings for us to check in on your progress. Please flag to me if you feel that you are falling behind but I will also make sure we meet as I now understand it can be hard for you to escalate to me when you feel overwhelmed.”</p> <p>“Now that I understand how hard you find whole department presentations, we can assign some extra time to work on the presentation together and for you to practise the presentation to the immediate team”</p> |
| <p>“You’re overreacting” / “It’s all in your head”</p> | <p>“What signs might I see in you when you are struggling?”</p> | <p>Emotional dysregulation and sensory sensitivities are valid responses in neurodivergent conditions¹⁰. Dismissing</p> | <p>“Thank you for taking to describe to me the way in which you work and how that changes when you are</p> |

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|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | <p>“How would you like to escalate that you are struggling to me?”</p> | <p>them increases stigma whereas supportive inquiry fosters trust and helps tailor support.</p> | <p>feeling overwhelmed. I will book in a 30-minute weekly catch up which we can use to run through your objectives and check in on how you are feeling. We can try that approach for a few months and then review it.”</p> |
| <p>“You need to just adapt quicker” / Not warning about changes</p> | <p>“How can we manage change to support you best?” “Would you like a heads-up before any specific changes?” “How do you find changes impact you?” “What type of changes impact you the most?”</p> | <p>Acknowledges need for predictability and routine, especially for autistic persons. Respecting preferences around change reduces anxiety and supports smoother transitions.</p> | <p>“The office move is now confirmed to be happening in three weeks' time. I have prepared a timeline for the key milestones leading up to the move. I have also added some time after the move to check in with you as you have shared with me how much these types of events impact you, specifically in relation to your workload. Please let me know if you have any questions about the timeline.”</p> |
| <p>Assuming everyone communicates the same way / Insisting on one format (e.g. only phone calls, only written reports).</p> | <p>“How do you prefer to be communicated with?” “Would you prefer written or verbal communication?” “Would you like me to summarise key points in writing after our meeting?”</p> | <p>Neurodivergent individuals often have different sensory, cognitive, or processing needs that affect how they engage with communication^{11&12}. Some may find phone calls overwhelming but feel confident writing thoughtful responses via text or email. Others may struggle with the written word but be happy to meet to discuss in person. Offering options respects individual autonomy and gives people the best</p> | <p>“You mentioned to me last week that you find the way our team uses instant messaging to be difficult for you to navigate. Please can you tell me what works better for you?”</p> |

| | | | |
|------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | chance to absorb information, respond effectively, and stay engaged. | |
| Imposing neurotypical norms (e.g. assuming people should mask, conform, or “just fit in”). | “This is an open and safe space, is there anything I can do to help support you be more comfortable being wholly yourself?” | Masking can be difficult at times. This encourages authenticity, avoids forcing neurotypical norms. | “At today’s team meeting we are going to share a presentation on stimming in ASD and ADHD. This will enable us all to be more aware and hopefully to remove any prejudice.” |
| “Smile more / Make eye contact.” “Why aren’t you looking at me?” Cameras on or mandated in meetings. | “How do you prefer us to welcome each other?” “Would you prefer a handshake, a wave, or something else when we meet?” | Forcing eye contact, smiling, or cameras pressures masking and can cause distress. Some people may not be comfortable hugging or shaking hands. Asking respects boundaries and autonomy ¹³ . | It is important to understand that physical contact for some neurodivergent individuals is physically uncomfortable as well as making the individual feeling socially awkward. |
| Using the expression “You suffer from [condition].” | “Neurodivergent” or specific terms like “autistic person” (if preferred) or person-first (“person with ADHD”) depending on the individual’s preference. Ask if unsure. | Medicalising identity assumes distress and frames the person’s neurodivergence as entirely negative or harmful. Many neurodivergent people don’t view themselves as suffering. Using neutral, person-respecting language helps avoid stigma and respects the diversity of experiences. | “Thank you for disclosing your recent autism diagnosis at our last meeting. How would you like me to reference this when we meet? Are you happy with the term “person with autism”?” |

Further guidance for LGBTQ+

Pronouns and Introductions

We introduce ourselves often, verbally when meeting face to face or over the phone; we also introduce ourselves digitally via email or in a virtual meeting.

To create an inclusive environment for LGBTQ+ people, it is good practice to acknowledge the key role that pronouns (*words used to refer to ourselves or others, which are not names. E.g. I, you or She, They*) play in our everyday conversations.

Referring to someone using the incorrect pronoun can be embarrassing for all those involved and referring to someone as 'It' is inappropriate and offensive. Also, questioning someone about their pronouns as soon as you've met can feel intrusive and rude.

| Try this | Why | Result(s) |
|--------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Add your own pronouns to your email signature and/or to your Microsoft Teams profile | <ul style="list-style-type: none"> This is visible to everyone you communicate with via email or Microsoft Teams This shows that you are considerate of pronouns and encourages other people to do the same. | You are demonstrating an inclusive behaviour and signalling to those you engage with (<i>verbally or otherwise</i>) that you are an LGBTQ+ ally |
| Introduce yourself (verbally) with your pronouns | <ul style="list-style-type: none"> This makes the other person/people aware of your pronouns and that you are considerate of the importance to get them right By taking the lead and providing your pronouns first, the person/people you are communicating with have the opportunity to do the same in return. | You have created a safe space between yourself and whoever you are communicating with, allowing them to share their pronouns voluntarily and without fear |

Heteronormative assumptions & 'Outing conversations'

To remain inclusive when engaging in general conversation (and or interacting with people) it is important to recognise that we often make assumptions rooted in 'heteronormative' beliefs, which infers that heterosexuality and binary gender are the default or the 'norm' and lives that exist outside of this are 'not normal', e.g.

- *When speaking to a male colleague* "Oh your partner is coming to the party; what's her name?"
- *When speaking to a young person who has recently 'come out' as a bisexual person* "That's just a silly phase, you will grow out of it. You just need to meet the right man"
- When beginning a presentation "ladies and gentlemen, boys and girls"

Heteronormative assumptions can lead to an ‘outing conversation.’ The act of disclosing or exposing someone’s sexual orientation or gender identity without their consent.

This incident can cause significant harm to the individual as it removes their voluntary choice to disclose their sexual orientation and/or gender identity when they feel safe to do so.

Depending on the circumstances the harm caused by ‘Outing’ someone can range from embarrassment/awkwardness to social exclusion/isolation. ‘Outing’ a person can lead to difficult situations at home or at work, especially if the home or work environment is not accepting of LGBTQ+ people.

For example: If you assumed that a patient’s partner is male, because the patient is female. The patient, who is a gay woman, must then make a very quick decision

- **Correct the member of staff** – outing themselves, risks embarrassing you, relationship could be harmed, the patient could perceive that you don’t consider LGBTQ+ people. There is also a conflict with the patient wanting to be polite and not seem prickly.
- **Buys-in to the assumption/doesn’t correct you** – psychological self-harm as the patient is being untrue to themselves, the revealing of the truth at a later stage can cause mistrust and greater embarrassment. This can feel, to the patient, that the situation has forced them ‘back into the closet’ i.e. they’ve reverted to past behaviour of hiding their sexual orientation.
- **Pushes back and states that personal questions aren’t appropriate/refuses to answer** – could be viewed as hostile/aggressive/snappy. Negatively affects your impression of the patient

Each of these outcomes results in one or both persons feeling being embarrassed, upset or angry.

Heteronormative assumptions and beliefs can offend and alienate LGBTQ+ people; making them feel that they have fallen outside of a set expectation. Heteronormative assumptions can also lead to the exclusion of LGBTQ+ people. E.g. A patient can only select from ‘male and female’ options on the feedback form.

Please refer to the ‘LGBTQ+ Inclusive Language Table’ for some useful examples of language and phrases you can use.

LGBTQ+ Inclusive Language Table

| Instead of | Please use | Why | Example |
|---------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| Hermaphrodite | 'Intersex' | Hermaphrodite is an outdated, stigmatising & inaccurate word with a negative medical history | "Have we considered the experiences of Intersex patients?" |
| Homosexual | 'Gay' or 'Lesbian' | 'Homosexual' sounds very clinical and much like a medical diagnosis, it suggests a discomfort with gay/lesbian people | "Barry told his parents that he's gay" |
| Born Male/Female Or Female/Male bodied | 'Assigned Female/Male at birth' | 'Assigned male' or 'assigned female' accurately describes the situation that happens when a child is born. "Born female/male" doesn't acknowledge the decision that is made to assign a binary sex to the child | "They were assigned male at birth, but they are non-binary" |
| 'a gay' or 'a transgender' | 'A gay/transgender person' | Words like gay and transgender are adjectives to describe a person or group, not a noun | "The media has been harsh to gay people, lately" |
| Normal e.g. "Normal people" "he's normal" | "Cisgender people" "Heterosexual people" "he's heterosexual" | Using 'Normal' implies that all others are 'abnormal' and stigmatizes LGBTQ+ people. Using the precise adjective is clear and respectful | "This service is used by cisgender people and trans/non-binary people" |
| "Their preferred/chosen pronouns are..." "Sexual preference" | "Their pronouns are..." "Sexual orientation" | Stating that pronouns are 'preferred' or 'chosen' implies that the persons pronouns are not fixed, could be deviated from and that other pronouns may still be acceptable to use "Sexual preference" implies that a choice has been made to select their sexuality, which is inaccurate. | "Toni's pronouns are She/They" "Sexual orientation is a protected characteristic" |

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|----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|
| “Both genders” or “Opposite sexes” | “All genders” | “both” implies there are only two and excludes non-binary and intersex people. “opposite” reinforces antagonism amongst genders | “Pink is a colour suitable for all genders” |
| “Ladies and Gentlemen” | “everyone”, “folks”, “Friends and colleagues” “honoured guests” | This moves away from binary language and is more inclusive | “Everyone, thank you for coming to this meeting” |
| Policeman, Fireman, Postman | Police officer, firefighter, postal worker, | People of all genders work in these roles | “I called over the nearest police officer” |
| Husband or Wife (automatically assumed) | “Partner” | Using ‘Partner’ is an inclusive and gender-neutral way of referring to the other person in a relationship. This can prevent ‘outing conversations’ Wife/Husband are also acceptable to use, but only once the identity of the partner has been established. | “What is your partner’s name?” |
| “Unisex” | “Gender Neutral” | Unisex is an outdated adjective to describe something that is for all sexes (<i>normally in the context of clothing & cosmetic products</i>). Gender neutral is a broader term that can apply to anything that doesn’t adhere to traditional gender norms or expectations. E.g. language, facilities, social structures | Our policy writing is intentionally gender-neutral |
| *Adapted from the Safe Zone Project – LGBTQ inclusive Language Do’s and Don’ts ¹⁴ | | | |

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Further guidance for Race and Ethnicity

Language shapes how people experience the workplace and healthcare. Using language that respects individual identity and experience when referring to race and ethnicity helps build trust, reduce harm, and promote equity.

Definitions

Race: A social classification used to categorise groups of people, usually based on perceived physical characteristics (hair, skin, colour etc) or shared ancestry (Jewish, Native American)¹⁵.

Ethnicity: A term used to describe a social group with a shared common cultures and traditions which may include language, traditions, geographic origin, religion, cultural expression or customs¹⁵.

Heritage: refers to a person's ancestral background and cultural roots. For example, an individual born in Ireland to Nigerian parents may identify as having African heritage. While they may not share all aspects of their parents' ethnicity—such as language—they may still identify as Irish by nationality¹⁶.

Nationality: refers to the country where a person was born and/or holds citizenship. Factors such as where you live and your ethnic background can also shape your sense of nationality. For example, someone born in India but who moved to United Kingdom (UK) at a young age might identify more closely with UK¹⁶.

Practical Application

Be mindful and acknowledge the diversity within groups by replacing broad terms like 'minorities' or 'non-White' with specific, respectful inclusive descriptors.

Foster trust and prevent misunderstandings, by giving individuals the opportunity to define their own race or ethnicity rather than making assumptions,

Create an inclusive environment and demonstrate respect for identity by reviewing internal documents, forms, and communications to identify and update any outdated or insensitive terms.

To support consistent and inclusive communication, the following table outlines recommended language choices. This can be used as a reference to ensure terminology aligns with best practices and promotes clarity and respect across all interactions:

Race and Ethnicity Inclusive Language Table

| Instead of | Please use | Why | Example |
|------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|-----------------------------------------------------------------|
| BAME or BME/ Black, Asian and Minority Ethnic ³ | Global majority, Ethnic minority groups ³ / People from an Ethnic Minority background / Specific ethnic group ⁴ | Groups all ethnic minorities together, masking differences in outcomes | Pharmacy Technicians of Chinese heritage |
| Blacks / Black students | Black people / Black employees ⁵ | Avoids stereotyping or reducing individuals to race | Students from a Black Caribbean background |
| Mixed race people | People of mixed heritage / People of mixed backgrounds ⁴ | More respectful and accurate | A trainee of mixed heritage |
| Caucasian | White | “Caucasian” has no scientific basis and reinforces racial hierarchy | White Irish, White French, White Swedish person ⁵ |
| Asian / Oriental | South Asian / East Asian / Southeast Asian / Specific country ⁵ | “Oriental” is outdated and offensive; “Asian” is too broad | A pharmacist from Vietnam |
| Blacklist / Black sheep ⁵ | Approved list / Misfit | Avoids negative associations with “black” | Add to the approved list |
| Master copy ⁵ | Primary copy ⁵ | May evoke historical associations with slavery | Save the primary copy ⁵ |
| Coloured people | Racialised person/people / People of colour ⁵ | Implies white is the default; outdated and offensive | Racialised communities in pharmacy |
| Minority | Racialised groups / Systemically excluded groups / Underrepresented groups ⁵ | “Minority” can be misleading and marginalising | Outreach to underrepresented pharmacy students |
| Gypsies | Roma / Romani people / Traveller communities ⁵ | “Gypsy” can be pejorative or inaccurate | Health services for Traveller communities |

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Reena Lal – Barts Health NHS Trust

Sedina Agama - South West London Integrated Care System

Groups

Association of Pharmacy Technicians UK (APTUK) Pride Branch

London Equality, Diversity and Inclusion (EDI) Champions Group

Pharmacy Technicians of Colour (PTOC)

Pharmacy professionals with Autism and NeuroDivergence (PpANDa)

PRIDE@CNWL (LGBTQ+) Network

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