

Abstract Submission FAQ

In response to the ethical and scientific imperatives of inclusivity in research and to mitigate disparities in research participation and health, AGS has set a ten-year goal to ensure that all research involving humans presented at the annual meeting takes into account factors that may present vulnerability to exclusion and disparity. For the 2022 AGS Annual Meeting Abstract Submission process, we are including a series of questions (see sidebar) that will inform future initiatives to enhance inclusivity in research presented at AGS meetings.

WHY AM I BEING ASKED ABOUT THE DIVERSITY AND INCLUSIVITY OF MY RESEARCH?

AGS wants to better understand the current state of inclusivity in the research that is being presented. This information will inform future initiatives to promote inclusivity in research presented at AGS meetings.

WILL MY RESPONSES TO THESE QUESTIONS AFFECT MY ABSTRACT SCORE?

No. While answering these questions is required for your abstract to be reviewed, responses are not factored into your abstract score.

WHAT SPECIFIC FACTORS DOES AGS WANT TO KNOW ABOUT?

Factors affecting diversity and inclusivity include, but are not limited to, self-identified race/ethnicity, gender identity/expression, sexual orientation, age, functional impairment, English-language ability, and immigration status.

DO ALL INVESTIGATORS NEED TO ANSWER THESE QUESTIONS?

With few exceptions, AGS will be asking authors whose work has been accepted for our meeting to report information on inclusion of underrepresented, disproportionately affected, and understudied populations in their posters and papers. We recognize that not all work may include such data.

HOW WILL THIS INFORMATION BE USED TO ENHANCE FUTURE RESEARCH?

AGS and the *Journal of the American Geriatrics Society (JAGS)* have set a ten-year goal to ensure that all research involving human participants addresses factors that may indicate vulnerability to exclusion and disparity. This will encourage investigators to consider the scientific and clinical implications that associate with the representativeness of research presented, as well as the specific needs and health outcomes of underrepresented, disproportionately affected, and understudied subpopulations.

QUESTIONS YOU WILL NEED TO ANSWER

1. Approximately what percentage of the study sample represents participants from underrepresented, disproportionately affected, and understudied populations (eg, Black or African American, Hispanic or Latino, Asian, American Indian and Alaska Native, Native Hawaiian and Other Pacific Islander, More than One Race, Women, LGBTQ+, Persons with Disabilities)?

1a. If the percentage is zero, are you reporting secondary data analyses (ie, you were not involved in original study development)?

1b. If you were involved in study development, describe what you did to include study participants from underrepresented, disproportionately affected, and understudied populations in your research and the barriers you faced.

2. Does your abstract include data from persons who identify as historically excluded and minoritized racial or ethnic groups (Black or African American, Hispanic or Latino, Asian, American Indian and Alaska Native, Native Hawaiian and Other Pacific Islander, More than One Race)?

3. Does your abstract include data from persons who identify as underrepresented, disproportionately affected, understudied gender identities (eg, non-binary, transgender, women)?

4. Does your abstract include data from persons who identify as underrepresented, disproportionately affected, understudied sexual orientations (eg, gay, lesbian, bisexual)?

5. Does your abstract include data on persons with functional impairment?

6. Does your abstract stratify the ages of your study population?