This project addresses the observed disparities in treatments and outcomes experienced by persons with RA who are members of racial and ethnic minorities, have low levels of English language proficiency, and are of lower socioeconomic status. The project also addresses the observation that persons with RA with a primary language other than English and those born outside the U.S. experience a greater discordance between their assessments of disease activity and those of their providers. The overarching aim of the project is to improve communication between patients with RA and their providers about disease activity and treatment choices. It is hypothesized that improved communication may provide a method of improving access to treatments of proven effectiveness for RA and in so doing reduce differences in outcomes. The specific aims of the D&F are to: 1) assess the quality of information exchange between patients and providers regarding disease activity and treatment choices in RA in a cohort of diverse patients; 2) develop a computerized tool to improve communication about patient-reported symptoms and treatment preferences; and, 3) provide a preliminary assessment of the utility of the tool in terms of its feasibility in a clinical environment and the congruence between patients and providers in the symptoms addressed in an encounter by conducting a small pilot randomized trial. The specific aims are being achieved by analysis of data from the RA Outcomes Study (RA-OS). The RA-OS includes a uniquely diverse set of 450 respondents. The first annual survey of the RA-OS includes items to obtain the data for Aim 1. The information from the analysis of the survey data will be combined with information from focus groups among members of the RA-OS and physicians and that from conscientious literature reviews to develop the computerized tool in Aim 2. In Aim 3, 50 members of the RA-OS will participate in the pilot trial of the tool administered in a clinic visit. The overall goal of the project is to improve the quality of communication between patients with RA and providers and, therefore, reduce disparities in RA outcomes by improving patients’ understanding of the disease and its treatments.