

MARITIME SPOR SUPPORT UNIT

Authorship and Acknowledgment Guidance Document

This guidance document has been prepared for researchers, Patient Partners, policy leads, clinicians, MSSU staff and other collaborators as a resource to assist in determining authorship or acknowledgment of team members and/or the MSSU, in publications resulting from MSSU led or supported research projects.

1. Authorship of Peer Reviewed publications

The MSSU recognizes the guidance of the International Committee of Medical Journal Editors (ICMJE) where authorship is determined based on the following criteria:

- Important contributions to the design of the work; or the collection and analysis of data for the work
- Drafting the work or revising it critically
- Responsible for approval of the final version to be published; AND
- Agreement to be accountable for all aspects of the work

In addition to ICMJE guidance, it is important to recognize that patient-oriented research often results in unique research collaborations featuring direct participation by Patient Partners and policy leads. These unique collaborations merit special consideration when deciding on authorship and acknowledgment.

Ensuring that different areas of expertise (e.g., methodological guidance, lived experience, policy implications) are equally valued on a research team is part of MSSU's mandate to promote collaborative research and support a health system culture shift toward more patient-oriented research. Team members should be aware that authorship decisions can be influenced by unconscious bias and MSSU recommends CIHR's Bias in Peer Review Training Module as a relevant resource on this issue.

Authorship also confers credit and carries academic, social, and financial implications, whose significance can vary amongst team members. Therefore, MSSU recommends that project team conversations about authorship be planned, intentional and inclusive. These conversations should occur in the early stages, revisited throughout the research project, and consider the following issues:

- Recognition of Patient/Public Partners. Where the research has benefitted from Patient/Public Partner participation, MSSU recommends the Patient/Public Partner(s) involved be recognized as authors. Please see Appendix B for more ICMJE guidance and examples.
- The extent to which contributors are interested in recognition. For example, policy leads may be more interested in research outputs to inform decision-making than formal recognition. Conversely, early career/pre-tenure researchers may be concerned about growing their portfolio of published work.
- Authorship implies responsibility and accountability for published work, a legal obligation which may influence the degree to which contributors may wish to be recognized in publications
- Order of authorship when there are multiple leads should be explicitly discussed, ensuring that different areas of expertise are valued appropriately. The convention followed in the order of authors is field specific and there are no universally accepted rules. In Life Sciences, for example, the first author is the author who has done the maximum work and is responsible for the entire manuscript. The last author is usually the group leader or PI who may have supervised the work but might not have actively conducted the experiments or written the manuscript.

- Cultural context community policy and protocols need to be adhered to when working with diverse
 communities. For example, MSSU recommends "Elements of Indigenous Style: A Guide for Writing By and
 About Indigenous Peoples" as an authoritative source of guidance on research involving Indigenous
 Peoples.
- Acknowledgment instead of authorship. Where the team determines that MSSU support and/or, acknowledgment may be a more appropriate form of recognition. Please refer to Section 3 of this guide for more on Acknowledgment.
- Other criteria and guidelines that researchers may be subject to by their home institutions and by publishers

Appendix A offers a useful framework for project teams to hold conversations and record decisions related to authorship and acknowledgment. This template is provided here as an optional resource to project teams and is not a required submission to MSSU.

2. Authorship of Non-Peer Reviewed Publications

Non- peer reviewed publications may include reports, plain language summaries, posters/infographics, conference or thesis presentations. These publication formats offer more flexibility in how authorship is determined.

For such publications, either ICMJE guidelines can be applied or an alternate method agreed upon by the project team could be used. In recognition that patient-oriented research often results in unique research collaborations with Patient Partners and policy leads, the MSSU encourages that Patient Partners and policy leads be recognized as authors which will showcase the contributions of patient-oriented research to our health system.

3. Acknowledging contributions

Individuals or General MSSU Support

If individual contributions are not recognized through authorship, researchers may wish to acknowledge the contribution of specific individuals or the MSSU. This might include contributions by policy leads, Patient Partners other team members or other contributors not formally part of the research team, for example students and input from community groups. In such cases, the recommended acknowledgment statements are as follows:

The research team wishes to acknowledge [name], [title], [affiliation], for assistance with...

The research team wishes to acknowledge the Maritime SPOR SUPPORT Unit (MSSU) for its assistance with...

Substantive In-kind Support

Where MSSU contributions have been substantial, for example with MSSU priority projects, acknowledgment of MSSU support is appropriate in either peer-reviewed or non-peer reviewed publications. In such cases, recommended acknowledgment of the MSSU and its funding partners should be as follows:

This study was supported by the Maritime SPOR SUPPORT Unit (MSSU), which receives financial support from the Canadian Institutes of Health Research (CIHR), the Nova Scotia Department of Health and Wellness, the New Brunswick Department of Health, Research New Brunswick (ResearchNB) and the Prince Edward Island Department of Health and Wellness. The opinions, results and conclusions reported in this paper are those of the authors and are independent from the funding sources. No endorsement by the MSSU or the named funding partners is intended or should be inferred.

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Data access

Where the extent of MSSU support is limited to **data access only** through an MSSU-affiliated data centre, these data sources should be acknowledged in accordance with the Terms of Use Agreement between the researcher and the MSSU-affiliated data provider.

Contact

This guidance document is intended to assist MSSU supported project teams with decision-making but may not address all possible circumstances where questions about authorship and acknowledgement might arise. Please contact us at info@mssu.ca with questions, or to discuss specific issues related to authorship and acknowledgement not addressed in this guidance document.

References

International Committee of Medical Journal Editors (ICMJE)

Tri-Agency Framework for the Responsible Conduct of Research

Richards, D.P., Birnie, K.A., Eubanks, K. et al. Guidance on authorship with and acknowledgement of Patient Partners in patient-oriented research (2020).

Cobey, K.D., Monfaredi, Z., Poole, E. *et al.* Editors-in-chief perceptions of patients as (co) authors on publications and the acceptability of ICMJE authorship criteria: a cross-sectional survey (2021).

Robler, D.C., Lotters, S, et al. Author declaration: have you considered equity, diversity and inclusion? (2020)

Gregory Younging, Elements of Indigenous Style: A Guide for Writing By and About Indigenous Peoples (2018)

Canadian Institutes of Health Research, Bias in Peer Review Training Module

APPENDIX A: Conditions for Authorship and Acknowledgment

	CONDITION FOR AUTHORSHIP							OTHER CONTRIBUTIONS WORTHY OF ACKNOWLEDGMENT	FOR OFFICE USE ONLY	
	Condition 1 (only 1 of 3 necessary to meet				neet condition)	Condition 2	Condition 3	Please Elaborate	Offer of authorship/ acknowledgement	Team member Sign-off
Team Members	Conception and Design		Acquisition of Data (Instrument design/data collection)		Analysis and Interpretation of Data	Drafting the Article/Critical Revision for Important Intellectual Content	Final Approval of the Version to be Published	(i.e. Collected data, scientific advisor, site recruitment etc.)	made	
	ınitial	On- going	Initial	Final						
1.										
2.										
3.										
4.										

APPENDIX B: ICMJE authorship criteria explained from a patient engagement and patient-oriented research perspective.

Criterion	Application to Patient Engagement and Patient-Oriented Research				
1. Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work.	This might be the case if a patient partner is involved in the project from its start as a research idea, contributed to its design and execution plan, and contributes throughout the project. There are ways for patient partners to make substantial contributions even when they are not involved in all aspects of the research process from the outset. Patient partners may still contribute substantially to a project's overall execution, including, but not limited to, development or selection of methods, recruitment, interpreting results, sharing results, etc. Patient partners may make substantial contributions without being trained in the scientific methodology, data analysis or interpretation. They may make these contributions through their conversations with team members about how they view the results or why they feel the results are important to patients, etc.				
2. Drafting the work or revising it critically for important intellectual content.	Patient partners may physically contribute to writing or revising the work, or may otherwise provide intellectual content through critical and constructive comments or commentary in writing or in conversation on manuscript drafts. Drafting some of the manuscript is not necessary for making an intellectual contribution to the content.				
3. Final approval of the version to be published.	Patient partners, as part of the authorship team, need to have reviewed and approved the manuscript for submission to be published.				
4. Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.	Patient partners do not need to be experts in the work that was carried out (for example, statistical methods), but they do need to be accountable to the work that they did to contribute to the project as presented in the manuscript.				

Please note: This guidance draws from ICMJE <u>Guidance on authorship with and acknowledgement of patient partners in patient-oriented research</u>. Examples are not inclusive and are meant to be demonstrative