Coauthorship by patients and other stakeholders with limited knowledge of scientific publishing practices

Steven S. Coughlin

There has been extensive discussion about criteria for coauthorship of scientific articles and many scientific journals have adopted or reference the authorship guidelines set by the International Committee of Medical Journal Editors [1]. The ICMJE recommends that authorship be based on the following 4 criteria: (1) substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; (2) drafting the work or revising it critically for important, intellectual content; (3) final approval of the version to be published; and (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 [1]. Criteria for authorship such as those developed by the ICMJE help to improve author accountability in biomedical research and deter unethical publishing practices such as extending coauthorship to “honorary” coauthors who have not played a substantive role in the research.

In parallel to focused attention on criteria for authorship, there has been increasing interest in extending coauthorship to patients and other stakeholders who may have limited knowledge of scientific publishing practices. This has come about partly because of the success of community-based participatory research (CBPR). CBPR is a collaborative approach to research that equitably involves all partners, including community members affected by the health topic being addressed, organizational representatives, and academic researchers in the research process [2, 3]. This approach includes partnerships between academic and community organizations with the goal of increasing the value of the research product for all partners. CBPR emphasizes shared decision-making, co-learning, reciprocal transfer of expertise between community members and academic partners, and mutual ownership of research products [2]. The CBPR research paradigm represents a fundamental shift in academic researcher’s views of community residents, from patients and research subjects who may benefit from medical advances to essential partners who can energize their communities to develop effective, sustainable interventions to improve health and eliminate health disparities [2]. Community members, organizational representatives, and academic researchers participate in and share control over all phases of the research process including assessment, definition of the problem, selection of research methods, and data collection, analysis, interpretation, and dissemination of findings [2]. In publishing results from CBPR studies, it is common for patients and other community members who have contributed to the research to be invited to be coauthors of study publications.

The extension of coauthorship to patients and other stakeholders who may have limited knowledge of scientific publishing practices has also come about as part of patient-centered outcomes research including studies funded by the Patient-Centered Outcomes Research Institute in the United States. In patient-centered outcomes research, patients who are members of the target

*Correspondence: SCOUGHLIN@augusta.edu

1 Department of Population Health Sciences, Augusta University, 1120
15thStreet, AE-1042, Augusta, GA 30912, USA
Full list of author information is available at the end of the article

© The Author(s) 2021. Open Access This article is licensed under a Creative Commons Attribution 4.0 International License, which permits use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons licence, and indicate if changes were made. The images or other third party material in this article are included in the article’s Creative Commons licence, unless indicated otherwise in a credit line to the material. If material is not included in the article’s Creative Commons licence and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder. To view a copy of this licence, visit http://creativecommons.org/licenses/by/4.0/. The Creative Commons Public Domain Dedication waiver (http://creativecommons.org/publicdomain/zero/1.0/) applies to the data made available in this article, unless otherwise stated in a credit line to the data.
population play a key role in identifying research priorities, collecting data, interpreting results, and disseminating findings. Thus, it is not uncommon for patients who have contributed to the research to be invited to coauthor study publications.

The extension of coauthorship to patients and other stakeholders who are unlikely to have experience researching, writing, or publishing scientific manuscripts raises several important issues related to publishing practices and publication ethics. For example, because the nature of research is changing, with increasing participation by nonprofessionals, criteria for authorship may need to be modified to recognize this evolving social dimension of scientific research [4]. Patients and other nontraditional coauthors are unlikely to meet the fourth ICMJE criterion for authorship (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). In addition, it may not be obvious what contributions should warrant authorship, or who should be responsible for the quality and content of the scientific research findings presented in a publication [5]. A further issue is that patients and other stakeholders with limited knowledge of scientific publishing practices may not be familiar with conflicts of interest that can arise in publishing scientific articles and how to avoid them.

In order to advance patient-centered outcomes research, CBPR, and other participatory forms of research, educational information is needed in lay language to inform patients and other non-traditional coauthors about scientific publishing practices. Topics that should be discussed include how can patient partners participate in the preparation of manuscripts and dissemination of study findings? What are the roles and responsibilities of coauthors? How do you write an article for publication? Also, how does the peer review process work? By informing patients and other non-traditional coauthors about scientific publishing practices, efforts to make authorship more inclusive can succeed and address scientific and ethical norms regarding criteria for authorship.

Author details
1 Department of Population Health Sciences, Augusta University, 1120 15th Street, AE-1042, Augusta, GA 30912, USA. 2 Institute of Public and Preventive Health, Augusta University, Augusta, GA, USA.

Published online: 21 October 2021

References
1. International Committee of Medical Journal Editors. ICMJE Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals; 2015. http://www.icmje.org/recommendations/
2. Coughlin SS, Smith SA, Fernandez ME, editors. Handbook of community-based participatory research. New York: Oxford University Press; 2017.
3. Viswanathan M, Eng E, Ammerman A, et al. Community-based Participatory Research: Assessing the Evidence (Evidence Report/Technology Assessment no. 99). Rockville, MD: Agency for Healthcare Research and Quality, 2004.
4. Ward-Fear G, Pauly GB, Vendetti JE, et al. Authorship protocols must change to credit citizen scientists. Trends Ecol Evol. 2020;35:187–90.
5. Smith E, Williams-Jones B. Authorship and responsibility in health sciences research: a review of procedures for fairly allocating authorship in multi-author studies. Sci Eng Ethics. 2012;18:199–212.

Publisher’s Note
Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

Ready to submit your research? Choose BMC and benefit from:

- fast, convenient online submission
- thorough peer review by experienced researchers in your field
- rapid publication on acceptance
- support for research data, including large and complex data types
- gold Open Access which fosters wider collaboration and increased citations
- maximum visibility for your research: over 100M website views per year

At BMC, research is always in progress.

Learn more biomedcentral.com/submissions