CDPP 2.0 Guidelines for Authorship and Contributorship

SSHRC Partnership Grant

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Introduction

This document provides CDPP 2.0 Co-Applicants, Collaborators, Partners, and Trainees guidelines for authorship and contributorship on all CDPP 2.0 manuscripts, abstracts, and presentations. The Partnership will follow the guidelines put forth by the International Committee of Medical Journal Editors (ICMJE), the Committee on Publication Ethics (COPE) and the Integrated Knowledge Translation (IKT) Guiding Principles.

BACKGROUND: WHO/WHAT ARE THE ICMJE, THE COPE AND THE IKT GUIDING PRINCIPLES?

The ICMJE is a small group of general medical journal editors and representatives of selected related organizations working together to improve the quality of medical science and its reporting. The ICMJE meets annually to refine its report *Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals*.

COPE was established in the UK by a small group of medical journal editors but now has over 9000 members worldwide from all academic fields. Membership is open to editors of academic journals and others interested in publication ethics. COPE provides advice to editors and publishers on all aspects of publication ethics and, in particular, how to handle cases of research and publication misconduct (e.g., *The COPE Report 2003: How to handle authorship disputes: a guide for new researchers*).

The IKT Guiding Principles were developed by a multidisciplinary group of spinal cord researchers, clinicians, people with SCI, representatives from SCI community organizations, and funding agencies. The IKT Guiding Principles include eight principles designed to support IKT partnerships to conduct quality, ethical research that is relevant, useful, useable, and avoids tokenism. The Guiding Principles are intended for use by all partners throughout the entire research process – including publication.

Our partnership will follow the publication and IKT principles outlined by:

- The ICMJE (May 2023) *Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals.* Available from https://www.icmje.org/recommendations/browse/

- The COPE (2003) *How to handle authorship disputes: a guide for new researchers.* Available from https://publicationethics.org/sites/default/files/2003pdf12_0.pdf
- The IKT Guiding Principles (2020). https://ikt.ok.ubc.ca/

An executive summary of these principles is provided on the following pages. Please find the full ICMJE, COPE and IKT Guiding Principles reports appended to this memo. We have bolded sections we consider particularly fundamental to our partnership.

A. Authorship Criteria

The following recommendations are intended to ensure that contributors who have made substantive intellectual contributions to a paper are given credit as authors, but also that contributors credited as authors understand their role in taking responsibility and being accountable for what is published. 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; AND
2. Drafting the work or reviewing it critically for important intellectual content; AND
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.

One Team Lead or an a CDPP designate appointed by the Team Leads from the grant is required to an author on all CDPP designated projects. The Team Lead or designate must meet the ICMJE authorship criteria above.

- The ICMJE has developed criteria for authorship that can be used by all journals, including those that distinguish authors from other contributors.
- In addition to being accountable for the parts of the work an individual has done, an author should be able to identify which co-authors are responsible for specific other parts of the work.
- **All those designated as authors should meet all four criteria for authorship, and all who meet the four criteria should be identified as authors. Those who do not meet all four criteria should be acknowledged**.
- These authorship criteria are intended to reserve the status of authorship for those who deserve credit and can take responsibility for the work.
- The criteria are not intended for use as a means to disqualify colleagues from authorship who otherwise meet authorship criteria by denying them the opportunity to meet criterion #s 2 or 3. Therefore, all individuals who meet the first criterion should have the opportunity to participate in the review, drafting, and final approval of the manuscript.

- **The individuals who conduct the work are responsible for identifying who meets these criteria and ideally should do so when planning the work, making modifications as appropriate as the work progresses**.
- It is the collective responsibility of the authors, not the journal to which the work is submitted, to determine that all people named as authors meet all four criteria; it is not the role of journal editors to determine who qualifies or does not qualify for authorship or to arbitrate authorship conflicts. If agreement cannot be reached about who qualifies for authorship, the institution(s) where the work was performed, not the journal editor, should be asked to investigate.

B. Order of Authors

The ICMJE guidelines state that the order of authorship, should be 'a joint decision of the co- authors. Authors should be prepared to explain the order in which authors are listed'.

COPE recommends the following:

- **Wherever possible, make order of authorship decisions before starting to write up the project**. Some groups list authors alphabetically, sometimes with a note to explain that all authors made equal contributions to the study and the publication. If you do so, make sure it is clear to the editor.
- The first named author is generally held to have made the greatest contribution to the research.
- Authors have often given the last place to a senior team member who contributed expertise and guidance. This can be consistent with the ICMJE criteria if this person was involved in study design, the interpretation of the data, and critically reviewed the publication.

C. Corresponding Author

The ICMJE recommends that:

- The corresponding author is the one individual who takes primary responsibility for communication with the journal during the manuscript submission, peer review, and publication process, and typically ensures that all the journal's administrative requirements, such as providing details of authorship, ethics committee approval, clinical trial registration documentation, and gathering conflict of interest forms and statements, are properly completed, although these duties may be delegated to one or more co? authors.
- The corresponding author should be available throughout the submission and peer review process to respond to editorial queries in a timely way, and should be available after publication to respond to critiques of the work and cooperate with any requests from the journal for data or additional

information should questions about the paper arise after publication.

- Some large multi-author groups designate authorship by a group name, with or without the names of individuals. When submitting a manuscript authored by a group, the corresponding author should specify the group name if one exists, and clearly identify the group members who can take credit and responsibility for the work as authors.

D. Authorship Decisions from the Outset

The COPE Report highlights the importance of making authorship decisions from the outset, before writing begins and to document these decisions:

- Discuss authorship when the research is being planned and raise the subject right at the start
- Gather views of all team members through discussion
- Before a study is finished, have some idea of the publications that might come out of it (e.g., conference abstract, full paper, supplementary papers) and who is likely to be most involved in these
- Continue to discuss ideas about authorship as the project evolves, and especially if new people get involved
- Keep a written record of decisions
- Decide authorship before the start each article
- Before the project is written, confirm in writing who will be doing what—and by when
- Keep everyone informed of any changes with a written note

E. Community Partners as Authors

Community Partners including representatives from a partner organization and contributors with lived experience of disability. Given the level of involvement of community partners in the development of the research questions, and the partners' anticipated involvement in the conduct of the research, implementation and evaluation activities, **it is expected for most if not all projects**, community partners will satisfy the criteria for authorship. It is a sign of the strength of our partnership to have community partners included as authors.

The onus is on the lead academic author to ensure: 1) community partners who satisfy authorship criteria, are named as co-authors in abstracts, presentations, papers, etc.; 2) community partners are given adequate time to review materials (two weeks is recommended)

Tips for facilitating partner engagement in the manuscript review process:

1. Provide a lay summary along with the full paper for review.
2. Direct partners' attention to relevant sections within the manuscript specifically requiring their attention

3. Consider alternate methods to facilitate review (e.g., a brief meeting to review the content of a manuscript).
4. Ensure documents for review are accessible

F. The Use of Artificial Intelligence (AI)-Assisted Technology

In relation to the use of Generative AI and AI-assisted technology (AI-tools) in CDPP 2.0 research activities, the following provisions are intended to protect the intellectual property of the contributing authors and partners, encourage adherence to emerging norms and external guidelines, and advance values-based ethical and equitable practices.

AI-tools do not replace human critical thinking, evaluation, or expertise. Partners (and authors) are always responsible and accountable for their work, and when using AI-tools are expected to:

Verify: accuracy, veracity, comprehensiveness and impartiality of all materials to ensure they represent the author(s) own original contributions, analysis, interpretation, and ideas.

Document: any use of AI-tools beyond that of basic editing (e.g., the tool used, date and description of use and prompts, identification of content generated, evaluation of the validity of outputs, etc.).

Disclose: provide clear and transparent disclosure and attribution of AI-tool use in materials (as appropriate to the context).

Ensure:

- Data privacy, intellectual property and other rights are never comprised by use of AI-tools; verify the terms of conditions of any tools used; do not submit private, protected, or confidential information or data into an AI-tool.
- Due consideration is given to implications of submitting any CDPP content not yet publicly available (e.g., ideas, reports, knowledge products) into an AI-tool.
- Maintained awareness of guidelines and policies of relevant funders, publishers, and home institutions.
- When in doubt – seek a qualified second opinion.

Train: If AI-generated outputs are exhibiting ableist bias, submit corrections to train the model in order to counter the bias.

Discuss: from the outset have transparent, open, and on-going discussions with team members about the use of AI in project activities, including: (1) what is meant by AI-tools, (2) what is expected, (3) what is permissible and not. Consider in discussions commitments to:

- Creativity and critical thought – how are these advanced or hindered in your use of AI?
- Equity – are your activities vulnerable to, compounding, or counter AI-introduced bias?
- Ethics – implications of AI, socially and environmentally.
- The use of AI tools or features within specialist disability-related assistive technology.

G. Sub-Projects and Authorship Protocol

One Team Lead or an a designate appointed by the Team Leads from the grant is required to be on the sub-project. Acknowledgement of the grant is required when criteria for acknowledgement are satisfied (see section H)

In accordance with COPE Recommendations:

- **Wherever possible, make order of authorship decisions before starting to write up the project**. Some groups list authors alphabetically, sometimes with a note to explain that all authors made equal contributions to the study and the publication. If you do so, make sure it is clear to the editor.
- The first named author is generally held to have made the greatest contribution to the research.
- Authors have often given the last place to a senior team member who contributed expertise and guidance. This can be consistent with the ICMJE criteria if this person was involved in study design, the interpretation of the data, and critically reviewed the publication.

H. Funding acknowledgement

The CDPP 2.0 grant should be acknowledged when at least one of the following criteria are met:

1. CDPP 2.0 funds are used to support the conduct of the project in the form of operating funds and/or a studentship.

2. The project is led by an academic and/or community partner named on the CDPP 2.0 partnership or by extension an associated trainee who is **deliberately** representing CDPP 2.0 in the conceptualization of the work;

3. The project addresses one of the **main research questions** of the CDPP 2.0,

Objective 1: Create new knowledge to deepen empirical and practical understanding of QP for application among children, youth and adults, with physical, intellectual, or sensory disabilities and across the PA sectors of sport, exercise, and play.

Aim 1: Describe, synthesize knowledge and assess QP, identifying both psychosocial and environmental determinants, and psychosocial and PA behavioural outcomes of QP.
Aim 2: Co-develop, test, and refine QP-enhancing interventions to foster and enhance quality PA participation for people with disabilities, and assess the outcomes of enhanced QP in PA.

Objective 2: Apply a KM science approach to **determine how to effectively mobilize knowledge** to practitioners (i.e., PA programmers, coaches, teachers and others) so they can foster and enhance quality PA participation for children, youth, and adults with disabilities.

Aim 3: Co-develop and evaluate sustainable approaches to maximize the use of new QP-enhancing interventions among sport, exercise, and play practitioners (i.e., implement knowledge).
Aim 4: Identify and evaluate partner-led strategies to share new QP knowledge with the sport, exercise and play sectors across Canada and beyond (i.e., disseminate knowledge).