

Community Co-Authorship Recommendations for Community Engaged Research

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The *Community Co-Authorship Recommendations for Community Engaged Research* (for short: Recommendations) were developed to help the University of California San Francisco (UCSF), Division of Prevention Science (DPS) researchers address and support community co-authorship of manuscripts that are produced from community engaged research (CER) projects and submitted for publication in scientific journals. The primary audience of these recommendations is academic researchers; the intention is to provide guidance and recommendations for them to consider regarding “community” co-authorship.

This document offers guidance for how community co-authors without scientific writing expertise can meet the International Committee of Medical Journal Editors (ICMJE) recommended criteria. The intention of the Recommendations is to provide a pathway for DPS faculty/scientists to ensure that community researchers who want opportunities for co-authorship on CER manuscripts are afforded nontraditional approaches or pathways to be fully engaged partners in academic publications while considering the ICMJE recommended criteria (described below), which are required by most journals that would be of interest to DPS researchers.

We encourage the use of this document to initiate conversations with your CER partners about academic publication requirements and to make them aware of DPS’ commitment to community co-authorship and transparency regarding related academic and community roles and obligations. Each research team is unique and can use these Recommendations in the manner that is most appropriate for their study project and team.

For simplification, information and tools that support development of the Recommendations (i.e., literature review, methods used to develop the recommendations, research authorship working group recommendations, and one-page Community Co-Author Agreement Form) are attached as appendices I, II, III, and IV.

We encourage the use and implementation of the Recommendations and supporting documents by other academic research institutions. Utilize them as written or adapt them to accommodate your situation. When you use/refer to the Recommendations in writing, please provide this citation: Division of Prevention Science, University of California San Francisco (2024). Community Co-Authorship Recommendations for Community Engaged Research. <https://prevention.ucsf.edu/resources/community-engaged-research-toolbox>

Recommendations

Educate Community and Assess Interest and Readiness for Co-Authorship

There is a broad diversity of skills and knowledge related to research in community organizations/agencies (community-based organizations (CBOs), clinics, and groups, health departments, etc.). It is important to keep in mind that not all community organizations/agencies that are in research partnerships or their staff who work on CER projects are monolithic. They are not identical with respect to knowledge of and interest in co-authorship. Some community researchers are more prepared for co-authorship than others and some want co-authorship opportunities while others do not.

When a CER partnership is formed, in practice, there should ideally be an academic and community principal investigator (PI) or a lead researcher based in the community, with both roles and positions being equally important to the project's success. The academic PI is the lead researcher who oversees and manages the research project within the academic or research institution, someone who is ultimately responsible for the success of the research project and ensuring that it achieves its objectives within the allocated resources and time frame. The community PI is the lead researcher representing a community organization/agency or group in a research project that is conducted in partnership with an academic institution. We recommend that the academic and community PIs use this document and related Recommendations to inform community researchers about manuscript writing requirements and to discuss opportunities for those working on the project who are interested in co-authorship. The following information is intended to be used to (1) educate community partners about authorship and related matters, (2) assess community partners' interest in being co-authors, and (3) support co-authorship.

- When developing a research proposal and discussing a potential research partnership with a community organization/agency, we recommend that the academic PI share these Recommendations with the community PI and invite a conversation.
- If funded, we suggest that the academic and community PIs meet with the community research team and share/discuss the Recommendations, making sure that the research team members are informed and understand key co-authors responsibilities that are deemed important to the collective research team (academic and community) and to the writing process (e.g., the importance of timelines/deadlines and related consequences if not met).
- At the beginning of the research project, the academic and community PIs engage members of the research team in co-authorship conversations. We suggest that these conversations address what the partner will need from the academic research team to meet the Recommendations offered in this document and what is realistically feasible for the team to provide, making appropriate adjustments to the Recommendations as needed for the partner to contribute to the manuscript. The partnership can choose to formally agree to community co-authorship by signing the Community Co-Authorship Agreement form (see Appendix IV) or developing/signing their own document, or to be informal and have a verbal agreement.
- We recommend that the academic and community PIs work with community co-authors to ensure that they meet agreed-upon co-authorship requirements and address and resolve any issues that occur.
- Since work on publications often continues after a project officially ends, the academic and community PIs should develop a procedure to communicate with community co-authors regarding their continued interest in and availability for co-authorship. We suggest that the academic PI be transparent that after a project ends funds may not be available to support either the academic research team or the community partner and the community co-author should agree to continue or not under the circumstance.

ICMJE Recommended Authorship Criteria

Any community member engaged in a DPS CER project who meets all four criteria recommended by ICMJE will be included as an author, if interested.

1. Substantial contributions to the conception or design of the work¹; or the acquisition, analysis, or interpretation of data for the work¹; AND
2. Drafting the work or revising 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.

¹For this document, "Community Co-Authorship Recommendations for Community Engaged Research", work includes effort that is put into the study (e.g., idea, design, implementation, etc.) as well as effort that is put into producing the manuscript. Authorship is not granted to someone who contributes to the study but do not contribute in any way to the manuscript.

Application of ICMJE Recommended Authorship Criteria to CER

Support for community co-authors is not a one size fits all approach and should consider individual research project needs. The following recommendations are examples of ways for community co-authors to meet all four ICMJE recommended criteria without having to be a skilled scientific writer. Researchers are encouraged to consider and offer other ways that community co-authors can meet each ICMJE criterion.

ICMJE Criterion #1: Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work.

Recommendations:

- Research relationships between academia and a community partner where the partner contributes to conversations and thinking that help inform research ideas, questions, study design, and/or adaptations to operationalizing research interventions (e.g., thinking through how an intervention works in a respective community organization/agency or the community that it serves) should involve the partner in the development of the research proposal, acknowledging their contribution to its conceptualization.
- When partnering with a community partner on a CER project, to the extent possible, include them in the entire research cycle and provide technical assistance when warranted (e.g., provide a one-page sheet explaining the proposed study design and solicit insights on how the design can be successfully implemented in the community/with the research population in mind).
- Novel approaches to reach research participants for recruitment are sometimes necessary to include individuals who otherwise would not be involved in the project. Acknowledge a community partner's contributions to the design and use of a novel approach, and if a paper is specifically written on the topic, invite a community co-author or co-authors to be included on the manuscript.
- If a community partner informs data collection methods specific to the research population and/or is directly involved in data collection (e.g., interviewing study participants, assembling/conducting focus groups, etc.), offer the community PI/research team the option to draft or review that section of the

manuscript and provide technical assistance to them as needed (e.g., invite to DPS writing workshops).

ICMJE Criterion #2: Drafting the work or revising it critically for important intellectual content.

Recommendations:

- Research manuscripts are written with an academic audience in mind and tend to use language that may not be familiar to the lay community. When engaged in CER with a community partner, to the extent allowed by the target journal, support opportunities for the community co-author to transform manuscripts into “plain language” adding visuals or “graphics” that are easily digested and used by the community as well. Advocate for journals that publish CER to have both an academic and community version of the publication.
- When appropriate, offer the community partner the opportunity to draft a section of the manuscript (even if it is just a paragraph within a section, e.g., recruitment of study participants).
- When scientific writing is not a skill set of the community co-author, the academic PI can collect community viewpoints via structured conversations and/or solicit plain language input on a paper’s main points – both designed to include community knowledge, understanding, and cultural nuances that meaningfully help researchers to think about the data, refine analysis, interpret results, and augment the discussion section. The co-author should confirm that viewpoints accurately reflect the community’s interpretations and compose revised language if needed. In addition to oral analysis of the data, when the community co-author has the relevant skills, other activities that warrant co-authorship includes running analyses, developing programming, or conducting qualitative analysis.

ICMJE Criterion #3: Final approval of the version to be published.

Recommendations:

- The academic PI, or the manuscript’s lead author, supports the community co-author to read through the whole paper and ensures that any expressed questions, concerns, issues, and/or clarifications are discussed and addressed to the satisfaction of both individuals. If needed or requested, the academic PI/research team will meet with the community PI/research team to discuss and address questions and clarifications.

ICMJE Criterion #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.

Recommendations:

- PIs should review with all community authors that putting their name on the manuscript means that they are accountable for the entire paper.

Communicate Research in Community Preferred Publications

A research manuscript is one option for a community partner to publish/contribute to research conversations. It is important to explore and support opportunities for the community to share written communications about the study in community preferred/accessed publications and at community and other special events.

During a CER project's multiple stages (proposal development, startup, implementation, and/or dissemination of findings), we recommend that the academic PI/research team consult with the community PI/research team, and the Community Advisory Board if one is a part of the research endeavor, and learn about dissemination sources and events that they access and rely on for health research information (local community newspapers, church bulletins, agency/organization's newsletters, websites, social media outlets, community meetings, conferences; etc.) and ensure that study communications are disseminated broadly to the community-at-large. List such sources and events as potential outlets to report on the study/share study findings and, when needed, support community partners to develop and disseminate communications (study summaries, white papers, monographs, infographics, PowerPoint presentations, conference presentations, posters, etc.) in sources and/or at events of their choice that are on the list.

Acknowledgments

Recognize individuals, groups, or organizations who/that helped, supported, or contributed factually to the study, i.e., provided information/data that supports study results.

Examples of community acknowledgements¹ include but are not limited to...

- Study partners/collaborators
- Study participants (cited as a group, not individually)
- Individuals, organizations/agencies who/that helped with study advertisement, recruitment, etc.
- Community Advisory Board/forum input
- Anonymous reviewers from the journal

¹ *it is standard practice to get the written permission from any person or organization/agency who/that will be acknowledged by name before acknowledging them.*

Celebrate Community Contribution to CER

In addition to community co-authorship, there are other ways to acknowledge the community's contribution to research. We recommend that the academic PI/research team consult with community partner(s) to identify and implement appropriate ways to honor/celebrate the research partnership and acknowledge the partner's and an individual's contributions beyond authorship.

For example...

- Acknowledge/celebrate project milestones and the community's or individuals' contributions (e.g., end of data collection).
- Acknowledge/celebrate research barrier breakthroughs that result from community action.
- Host a "research findings party" that recognizes and honors community contributions (plaques/certificates of accomplishment/appreciation, etc.).

BACKGROUND

The benefits of community engaged research (CER) are well documented. The National Institute for Health Research (NIHR) asserts that the co-production of research with communities is important for research equity and impact and, in some instances, that community involvement be a condition of research funding.^{1,2} The University of California San Francisco, Center for AIDS Prevention Studies (CAPS), located in the Division of Prevention Science (DPS) in the Department of Medicine, is committed to CER and is keenly aware of its benefits, understanding and supporting the vision that community should have opportunities to participate completely in the research process. As a high-priority part of CAPS' mission, there is a Community Engagement Core (CEC) that organizes and supports academic and community partnerships to conduct CER that is mutually beneficial. While it is suggested that CER considers academic and community co-production of all aspects of the research cycle - including publishing manuscripts - allowances for co-authorship of community partners/collaborators are far from clear.

Guidelines exist for assigning research authorship; however, they generally do not address community contributions or how to recognize partners/collaborators and assign authorship appropriately and equitably. A 2021 article, found that no standard guidelines exist on how and when to include community partners as authors and how to recognize highly participatory community-engaged projects (e.g., co-producing data in interviews, translations, and analysis that integrates community discussion and interpretation of emerging findings).³ Furthermore, the traditional assignment of individuals to be authors rarely accounts for activities for which researchers depend on community expertise (e.g., facilitating connections; recruitment; community knowledge, understanding, and cultural nuance). Similarly, too often community partners are not included in the initial thinking regarding research ideas and therefore are not positioned to make substantial contributions to the conception or design of the work – one of the four conditions required for authorship based on the International Committee of Medical Journal Editors (ICMJE) criteria.⁴

NIHR's support of co-produced research and the increased occurrence of research conducted in collaboration with non-academic partners suggest that research institutions develop CER practices and policies to support such partnerships. CAPS, one of nine AIDS Research Centers that currently receive National Institute of Mental Health (NIMH) funding, first tackled community authorship in the 1990s, making a concerted effort to share credit for research products with community partners. Manuscripts were co-authored by academic and community researchers^{5,6}; community researchers were not required to draft sections of the manuscript but had to participate in all sections of the work stated in the ICMJE recommendations.

Processes are in place at CAPS that encourage and ensure CER, e.g., support of the CAPS' community advisory board, which provides input on research projects including participation in the peer review process; community town halls, which provide community the opportunity to present to DPS faculty, scientists and staff and the community-at-large on topics of community research interest; and community needs assessment, which provides continued understanding of community thinking and needs regarding HIV research and CAPS/community relations. However, the need for clear, established opportunities and recommendations for community co-authorship remains.

After learning about community frustrations concerning research authorship issues, the DPS CEC convened the Research Authorship Equity Working Group (RAEWG) with the following aim in mind – to develop, publicize, and implement DPS Community Co-Authorship Recommendations that are designed, supported, and approved with input from both DPS and our community partners.

REFERENCES

1. National Institute for Health Research. (2018). Guidance on co-producing a research project. https://www.invo.org.uk/wp-content/uploads/2019/04/Copro_Guidance_Feb19.pdf.
2. National Institute for Health Research. (2020). Promoting equality, diversity, and inclusion in research. NIHR. <https://www.nihr.ac.uk/about-us/our-contribution-to-research/equality-diversity-and-inclusion.htm>
3. Sam Miles, Alicia Renedo, Cicely Marston. Reimagining authorship guidelines to promote equity in co-produced academic collaborations. *Global Public Health* 2021, 1-13. <https://doi.org/10.1080/17441692.2021.1971277>
4. Defining the Role of Authors and Contributors. International Committee of Medical Journal Editors. <https://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html>
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6. Special Issue: Collaborative Community Research: Partnerships Between Research & Practice. *Health Educ & Behav*, Vol. 26, No. 2, April 1999. <https://www.jstor.org/stable/i40215470>

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Appendix I: DEVELOPMENT OF RECOMMENDATIONS

The recommendations in this document were developed based on a review of the literature and Research Authorship Equity Working Group (RAEWG) discussions that occurred via ZOOM over the course of four one-hour meetings (December 2022 - November 2023). The working group consisted of ten community engagement core (CEC)-affiliated faculty/scientists in the Division of Prevention Science (DPS), one CEC staff, and two community members associated with community-based organizations (CBOs) that have a long history partnering with CAPS on federal and state funded research projects. Prior to convening the working group meetings, a written summary of the literature review findings (see Appendix II) was shared with the participants. Additionally, CEC leadership and staff first met with the two community-based participants, providing the opportunity to think through authorship issues through the lens of the community's perspective and to set the RAEWG agenda and discussions based on such perspectives. All RAEWG discussions were recorded via zoom and transcribed using the Otter Transcription App. Based on RAEWG insights and recommendations (see Appendix III), the DPS authorship recommendations, and ways of valuing and acknowledging community participation in research are offered for faculty/scientists to consider when conducting CER with community partners/collaborators.

ICMJE recommended criteria for authorship are used by most health-related journals and guide researchers on when to consider and assign authorship; we apply them with an equity lens and recognize community expertise. Our intent is to provide CAPS and community partners/collaborators with agreed upon principles, practices, and processes that account for community engaged activities (conducting research and manuscript writing) that support the ICMJE criteria. For the purpose of this document, equity lens is defined as an organization 1) being deliberately inclusive when making decisions; 2) introducing questions into the decision making that help the decision makers focus on equity in both their process and outcomes; 3) explicitly drawing attention to the inclusion of organizations, populations, and individuals that have been historically sidelined; 4) generating questions designed to create a more inclusive perspective, drawing attention to how the decision holds potential to affect sidelined groups (in this instance community researchers).¹ Implementation of the recommendations in this document is intended to address barriers that hinder community authorship and ensure that practices value the unique knowledge, expertise, and contributions of academia and community partners differently but equally. Additionally, it will expand community's participation in the research cycle and leave both community and faculty/scientists with new shared knowledge, understanding, and/or capacity that will potentially improve academic/community collaborations/partnerships.

REFERENCE

1. What is an Equity Lens? The Center for Nonprofit Advancement. <https://www.nonprofitadvancement.org/files/2020/12/What-is-an-Equity-Lens.pdf>

Appendix II: AUTHORSHIP GUIDELINES LITERATURE REVIEW

Document	Author / Year If applicable location, sample group and size	Purpose / Method	Use / Outcome or Key Findings / Statements on CER Authorship / Gaps and Concerns
1. Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals	International Committee of Medical Journal Editors (ICMJE) At the time of this review, document was last updated May 2022 https://bit.ly/3zbSsCh	Developed to review best practice and ethical standards in the conduct and reporting of research and other material published in medical journals, and to help authors, editors, and others involved in peer review and biomedical publishing create and distribute accurate, clear, reproducible, unbiased medical journal articles.	Recommendations, encompass four criteria, which are primarily intended for use by authors who might submit their work for publication to ICMJE member journals. 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 revising 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. No clear guideline for community co-authors involved in community engaged research (CER), therefore indicating that community co-authors must meet the four criteria.
2. ICMJE criteria for authorship: why the criticisms are not justified?	Ali MJ Graefe's Archive for Clinical and Experimental Ophthalmology (2021) 259:289–290 https://bit.ly/3AVbe1U	Address five criticisms that some researchers have who feel that the ICMJE authorship guidelines allow practices that ICMJE was designed to prevent.	Arguments against the criticisms are available at the link provided in column two. Suggested that there may be scope for ICMJE to expand its criteria to include more distinct roles and responsibilities lucidly.
3. Guidelines and Policies for the Conduct of Research in Intramural Research Program at the National Institutes of Health (NIH)	Nina F. Schor, M.D., Ph.D., Deputy Director for Intramural Research At the time of this review, document was last updated August 2023 (8 th edition) https://bit.ly/3NXfGAc	Support the fair and responsible assignment of authorship to publications or presentations, based on three criteria. Individuals who meet criteria 1 and 3 listed in the next column must be allowed to read the manuscript or presentation so that they can meet all three criteria.	The document lists the following criteria: 1) Make significant contribution to the conceptualization, design, execution, or interpretation of the research. AND 2) Draft, revise, or carefully read and confirm the research manuscript or presentation. AND 3) Take responsibility for the research, particularly your contribution to it. No clear guideline for community co-authors involved in CER, therefore indicating that community co-authors must meet the said criteria.
4. COPE Discussion Document: Authorship. – Promoting Integrity in Research and Its Publication	COPE Council, Community on Publication Ethics At the time of this review, document was last updated September 2019 https://bit.ly/3Oiwq4U	Introduce issues and stimulate discussion around authorship. Provide leadership in thinking on publication ethics and practical resources to educate and support members and offers a professional voice in current debates.	The document provides key information resources for authors, core policy guidance for editors, notes on the scope of submission guidelines, resources for managing pre- and post-publication authorship disputes, guidance for institutions to manage and support authorship integrity.
5. COPE How to Recognize Potential Authorship Problems (Flow Sheet)	COPE Council, Committee on Publication Ethics, 2021 https://bit.ly/3OFW36g	Provide list of signs that might indicate authorship problems along with related examples and considerations:	The flow sheet lists 13 signs and provides best practices to minimize authorship problems. Links to related COPE Flowcharts (n=4), cases (n=3), and suggested readings (n=9) are provided.

Document	Author / Year If applicable location, sample group and size	Purpose / Method	Use / Outcome or Key Findings / Statements on CER Authorship / Gaps and Concerns
6. Who's the Author? Problems with Biomedical Authorship, and Some Possible Solutions	Council of Science Editors (CSE), Task Force on Authorship, February 2000 https://bit.ly/3lWnHod	Provide commentary on the current state of biomedical authorship—its problems, the sources of the problems, and some possible solutions.	Work was done drawing from Information from many sources and through input from four working groups: White Paper, Research, Liaison Strategy, Retreat
7. British Sociological Association (BSA: Authorship) Guidelines for Academic Papers Sociological Association: Authorship Guidelines for Academic Papers	BSA's Equality of the Sexes Committee, guidelines first published in 2001. https://bit.ly/3o8bxio https://bit.ly/3PxoYnK •	Designed to complement existing guidelines for good professional conduct and ethical practice (including those developed by Sally Macintyre at the MRC Social and Public Health Sciences Unit, the ICMJE, and the Department of Sociology at the University of Pennsylvania addressing co-authorship between faculty and graduate students). Guidelines discuss Background Using the Guidelines General Points Attributing Authorship Order of Authors Decisions about Acknowledgements Other Suggestions	Authorship should be reserved for those who have made significant intellectual contribution to the research. Authors should... 1) Have made a substantial direct academic contribution (i.e., intellectual responsibility and substantive work) to at least two of the four main components of a typical scientific project or paper: 2) Have critically reviewed successive drafts of the paper and should approve the final version. 3) Be able to defend the paper (although not necessarily all the technical details). Guidelines stipulate that honorary authorship is not acceptable
8. Authorship	World Association of Medical Editors (WAME), January 10, 2007 https://wame.org/authorship	Provide guidance on authorship criteria, number of authors, order of authorship, authorship disputes.	The policy does not mention community engaged (CE) research or guidance regarding authorship for community members who contribute to CE collaborative research.
9. Researchers' Perspectives on Collective/Community Co-authorship in Community-based Participatory Indigenous Research	Castleden H, Sloan Morgan V, Neimanis A Journal of Empirical Research on Human Research Ethics. DOI: 10.1525/jer.2010.5.4.23 Sample size: N=15 Location: Canadian academic institutions Focus: Indigenous communities https://bit.ly/3PxoYnK	Provide/identify perspectives on what count as a minimum level of contribution for sharing authorship with individual community members. Conducted semi-structured phone interviews with researchers (faculty members, postdoctoral fellows, or doctoral candidates) who used a community-based participatory approach; and conducted research with Indigenous communities and a thematic analysis of the data.	Identified three distinct perspectives on what count as a minimum level of contribution for sharing authorship with individual community members: 1) Individuals required to write a portion of the manuscript, 2) Individuals to write on behalf of a group and be recognized as doing so, 3) No writing required at all; rather, if community member contributed intellectually in some way to the project, warrant co-authorship Establish formal research agreements at the start of a research partnership that treat individual Indigenous collaborators largely as one would treat other individual collaborators in the academy who have assisted with the research, i.e., granting authorship to any persons without whose unique contributions the research would not have been possible, and at least acknowledging others who collectively assisted.
10. CRediT (Contributor Roles Taxonomy)	CRediT Team People are encouraged to get involved by joining the community CRediT Interest Group , spreading the word, and providing feedback to the CRediT team! https://credit.niso.org/ https://bit.ly/3RD8k7R	Identify/develop a taxonomy of roles typically played by contributors to scientific scholarly output that can be used to capture all the work that allows scholarly publications to be produced. CRediT Roles/Categories (listed alphabetically) include: 1) Conceptualization, 2) Data Curation, 3) Formal Analysis, 4) Funding Acquisition, 5) Investigation, 6) Methodology, 7) Project Administration, 8) Resources, 9) Software, 10) Supervision, 11) Validation; 12) Visualization, 13) Writing, 14) Writing (review and editing).	Recommend that academics 1) Allocate terms appropriately to contributors within research outputs. 2) Advocate that your institution and any publications you're submitting to acknowledge and adopt the taxonomy. Recommendations for applying the CRediT taxonomy include: 1) List all Contributions, 2) Multiple Roles Possible, 3) Degree of Contribution Optiona, 4) Shared Responsibility, 5) Make CRediT Machine Readable – CRediT tagged contributions should be coded in JATS xml v1.2

Document	Author / Year If applicable location, sample group and size	Purpose / Method	Use / Outcome or Key Findings / Statements on CER Authorship / Gaps and Concerns
11. Reimagining authorship guidelines to promote equity in co-produced academic collaborations	Miles S, Renedo A, Marston C Global Public Health 2021, Aug 6, 2021 https://bit.ly/3yLN6Mm	Provide a draft guideline for how authorship guidelines should be adapted to encourage attribution of co-produced research to include non-academic as well as academic collaborators. The guideline – 14-item framework – incorporates elements from ICMJE, COPE and BSA, explicating co-production contributions.	Authors suggest that authorship decisions should be made with a focus on equity and explicit attention to the ways in which exclusion from authorship lists can follow patterns of marginalization. The 14-item framework (see link below) is to be developed/discussed with partners to understand where further clarity is needed, or where important contributions do not fit into the framework. https://www.tandfonline.com/doi/full/10.1080/17441692.2021.1971277
12. Authorship Grids: Practical Tools to Facilitate Collaboration and Ethical Publication	Phillippi, JC, Likis FE, Tilden EL Res Nurs Health. 2018 April; 41(2): 195–208. doi:10.1002/nur.21856. https://bit.ly/3llq5yL	Provide overview of issues relevant to ethical collaborative authorship and present authorship frameworks “grids” that incorporate recommendations of national and international organizations as well as required components of research checklists and guidelines for 1st, 2nd, 3rd, and senior authors developed to facilitate planning and attribution of contributions for quantitative, qualitative, and literature-synthesis projects and research. Categories representing proposed contributions are discussed/delineated for each study type.	Frameworks “grids” are consistent with relevant common, international reporting guidelines and prompts authors to meet all common requirements for that type of work: CONSORT (Schulz, Altman, & Moher, 2010) and STROBE (Vandenbroucke et al., 2007) for quantitative research, SRQR (O'Brien, Harris, Beckman, Reed, & Cook, 2014) for qualitative research, and PRISMA (Moher, Altman, Liberati, & Tetzlaff, 2011) for systematic reviews and meta-analyses. Frameworks “grids” have been used for 10 manuscripts at four universities, and to guide students in a graduate-level writing class. Frameworks “grids” 1) are not systematically studied; 2) cannot stop unethical behaviors; 3) are not a ‘one-size fits all’ method
13. Authorship policies of scientific journals	Resnik DB, Tyle AM, Black JR, and Kissling G J Med Ethics. 2016 March; 42(3): 199–202. doi:10.1136/medethics-2015-103171. https://bit.ly/3o7I9Kk Note: Research was supported by Intramural Program of NIEHS, NIH	To determine if there is an association between scientific journals having/not having an authorship policy and journal impact factor or field of research. A random sample of journals from the Journal Citation Reports [(JCR), n=600: 453 Science Edition and 200 Social Science Edition] was conducted.	Findings provided on 5 items: impact factor, science type, authorship policy, authorship policy by type of science and authorship policy characteristics. A significantly higher mean impact factor for journals with an authorship policy than those without a policy is reported. For more detailed findings, click this link. https://pubmed.ncbi.nlm.nih.gov/26714812/
14. Guidelines for Writing Manuscripts About Community-Based Participatory Research for Peer-Reviewed Journals	Bordeaux BC, Wiley C, Tandon D, Horowitz CR, Bohrer Brown P, Bass EB Prog Community Health Partnersh. 2007; 1(3): 281–288. doi:10.1353/cpr.2007.0018. https://bit.ly/3aDAQFX Sample: Workshop participants	Provide 1) practical guides for writing about CBPR for those with little publication writing experience or those who want to help their partners write strong manuscripts for peer-reviewed journals, 2) recommendations on how academic and community partners can collaboratively write manuscripts describing their research. Guides were developed from workshops (i.e., interactive didactic sessions and small group exercises led by faculty with experience conducting and writing about CBPR) held at the ninth annual conference of Community–Campus Partnerships for Health and the 29th annual meeting of the Society of General Internal Medicine.	Guidelines are for academic and nonacademic partners who want to share in the writing of research publications. Information includes 1) How to begin writing a CBPR manuscript, 2) How to write collaboratively, 3) The writing process, which discusses 10 areas. Recommended to use non-traditional processes to capture thoughts of community partners and display their insights within the manuscript – examples are provided. Table 1 – A mnemonic that briefly summarizes key study points. Appendix – Selected articles illustrating how to present CBPR, with a brief note indicating how the article described a unique feature of CBPR included at the end of each reference.

Document	Author / Year If applicable location, sample group and size	Purpose / Method	Use / Outcome or Key Findings / Statements on CER Authorship / Gaps and Concerns
15. A method for assigning authorship in multi-authored publications	Ahmed SM, Maurana CA, Engle JA, Uddin D, Glaus KD Fam Med 1997;29(1):42-4 https://bit.ly/3aDAQFX	Provide a process to address authorship in multi-professional collaborations. Based on a literature review, seven authorship components) were identified and assigned weights: minimal (1), some (3), significant (5); author's contribution can be weighted for each component. When the Authorship Scale is implemented, it 1) is a useful tool for determining the assignment and order of authorship to manuscripts submitted for publication, 2) can be submitted to editors to provide them with a view of each author's real contribution, 3) can be referenced when issues of public responsibility or accountability arise.	The scale 1) Supports authorship equity and potentially deters individuals from being listed as authors when their contributions are negligible 2) Is designed for collaborative research teams to use but may not be applicable to every working group or every situation. 3) Doesn't consider components that usually involves community expertise (e.g., data collection, recruitment, dissemination, etc.). Additionally, the weighting of components isn't descriptive (e.g., no information regarding what specific types of activities/level of activities or role(s) constitute a weight of 1, 3 or 5.
16. Collaborative Authorship as Peer Mentorship	Jacobs C, McIntosh M, O'Sullivan KM College & Research Libraries https://bit.ly/3aCMNM9	Provide information on early-career professionals research collaboration and co-authorship. Topics of discussion include: <ul style="list-style-type: none"> • Benefits of collaboration • Intentionality of collaboration • Collaborative writing • Collaborative editing • Contingency planning 	Information may be useful for CE research collaborations where academia can serve as writing mentors and/or provide writing resources for community members who contribute to research projects who want to co-author papers.
17. Unit Policy on Authorship of publications and presentations	Medical Research Society - Unit's Policy on Authorship of Publications and Presentations (Version 2, 13/11/2007) https://bit.ly/3uPaur7	Discuss/share/highlight the Policy on Authorship of Publications and Presentations of the Medical Research Society Social and Public Health Sciences Unit, which follows criteria established by the International Committee of Medical Journal Editors (ICMJE), 2006 version http://www.icmje.org . The policy includes information on authorship contributors (6 bullet points), author order (2 bullet points), and acknowledgement considerations.	Guidelines do not speak about authorship on research articles that engage the expertise of community members. The policy indicates that an individual might serve in more than one of these role and references differences in first, senior, corresponding and guarantor authors.
18. Assessing Research Collaboration through Co-authorship Network Analysis	Fagan J, Eddens KS, Dolly J, Vanderford NL, Weiss H, Levens JS J Res Adm. 2018; 49(1): 76–99 https://bit.ly/3RAoSNP	Provide a model for research members to examine whether they increase collaboration across research programs over time (as measured by co-authorship ties), assessed by examining ,062 papers published between 2007–2014 by Associate and Full Research Members. A social network analysis case study, evaluation of changes in network descriptives over time, an assessment/measure of diversity of the articles published over time are presented and discussed.	The paper offers approaches and strategies to build interdisciplinary research collaborations and co-authorship ties. Findings: 1) Administration-supported policy changes increased inter-programmatic collaboration among research members. 2) Over time, research members collaborated more with others outside of their research program and outside their initial dense co-authorship groups. 3) Papers increased in diversity over time on all measures, except for author gender. Involvement of community or authorship ties with community members involved with research projects wasn't addressed. Perhaps expand the model to consider/include community authors.
19. Contemporary authorship guidelines fail to recognize	Cooke SJ, Nguyen VM, Young N, Reid AJ, Roche DG, Bennett NJ, Rytwinski T, Bennett JR	Propose a more inclusive approach to authorship that recognizes and values diverse contributions and contributors in conservation science	Support co-production (co-creation-co-assessment or co-evolution) and partnership development and consultation.

Document	Author / Year If applicable location, sample group and size	Purpose / Method	Use / Outcome or Key Findings / Statements on CER Authorship / Gaps and Concerns
diverse contributions in conservation science research	https://bit.ly/3ANeLPO	research using an expanded list of CRediT roles. Some of the added items are applicable to biomedical research.	At the sunset of the project share findings with partners and community members involved in research; thank partners, etc.
20. Quandaries in Authorship	Westfall JM, Zittleman L Progress in Community Health Partnerships: Research, Education, and Action, Volume 12, Issue 2, Summer 2018, pp. 117-120 https://bit.ly/3cijw9T https://bit.ly/3IISJQ5	Provide the historical purpose of authorship (who has been allowed authorship (e.g., researchers) and who hasn't necessarily been considered (e.g., patients, community members community advisory council, study subjects) and argue that it is time to consider new authorship models. The current thinking/recommendations/quandaries of some researchers are shared. Seven suggestions are discussed.	Authors suggest that 1) It's time for medical journals, publishers, and indexing services to reassess their authorship policies and reimagine how to respond to the growing field of patient and community-engaged participatory research, 2) Publishers, editors, reviewers, authors, researchers, funding agencies, department chairs, promotion committees, patients, and community members begin a robust conversation and make meaningful policy changes about authorship, and all the aspects of patient- and community-engaged research.
21. Authorship Policies at U.S. Doctoral Universities: A Review and Recommendations for Future Policies	Lisa M. Rasmussen, Courtney E. Williams, Mary M. Hausfeld, George C. Banks, Bailey C. Davis https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7755643/ Sci Eng Ethics , 2020; 26(6): 3393–3413 - PMID: PMC7755643 Published online 2020 Nov 19. doi: 10.1007/s11948-020-00273-7 - PMID: 33210194	Provide a better understanding of the role of U.S. academic institutions in authorship practices. A systematic review of publicly available authorship policies for U.S. doctoral institutions (using the 266 2018 Carnegie-classified R1 and R2 Universities) was conducted to determine 1) Prevalence of policies among institutions, 2) Policy characteristics, 3) Prevalence of processes for handling authorship disputes, 4) Characteristics of dispute resolution processes, 5) Common practices and takeaways, 6) Areas needing additional discussion and analysis, 7) Recommendations for future policies.	Findings: 24% of the sample had publicly available authorship policies; the majority (93%) of which specified criteria for authorship but provided less guidance about actual processes for applying such criteria (62%), handling authorship disputes (62%), and managing faculty-student author teams (49%). And discussion of dispute resolution practices typically lacked specificity. Recommendations include that institutions to leverage their ability to guide the authorship process by adopting an authorship policy that acknowledges disciplinary diversity while still offering substantive guidance.

Appendix III: WORKING GROUP DISCUSSION AND RECOMMENDATIONS

The following thoughts and themes emerged from the pre-meeting convened with community members and discussions involving the full Research Authorship Equity Working Group (RAEWG); some specifically address authorship while others are related and suggest diverse ways to honor community engagement in research.

Insights and Recommendations from the Pre-Meeting with Community Work Group Participants

- Conduct conversations and provide education with community to clarify and improve the community's understanding of how academic authorship works.
- Community is not monolithic – some people are more prepared for authorship than others, some want authorship while others do not but would welcome other ways of having their contributions to the research endeavor be recognized.
- Explore best ways to share research findings and celebrate community input beyond authorship and acknowledgements (e.g., end of study celebration and certificates of participation and/or appreciation).
- Identify and support written products beyond peer review articles that might be more meaningful for community and that would involve community authorship (e.g., discuss study and the findings in local community newspapers, on social media, blogs, etc.).
- Identify and create opportunities for community members to work with academics to come up with research ideas and questions and be involved in the complete research cycle to support authorship.

Insights and Recommendations from the RAEWG Discussions

- Explore community values regarding research and the best ways to give credit to those who make “meaningful” – with awareness of how and by whom this is defined – contributions to research projects.
- Consider how various kinds of work are valued from the scientist and community's perspectives.
 - What kinds of work rise to the level of being invited to become an author on a manuscript? For example, weigh written and oral contributions to manuscripts equally. When a community partner's communication strength is oral, not written, value oral discussions that help refine analysis and interpret results from the community's perspective.
 - Value significant contributions that community makes to outreach and study participant recruitment that involves creativity and thinking around ideas, improvement of traditional practices that increase participation as well as novel approaches and their operationalization.
 - What parts of the research project could be specifically carved out for community to write up (e.g., SPNS project community driven publication on outreach strategies)?
 - Explore authorship considerations for multi-lingual teams, multi-country teams?
- Appreciate and value different understandings (academic and community) of what it means to do HIV research, be more magnanimous, not overly proscriptive, or too detailed regarding any recommendations.
- Consider ways of valuing community research partnerships in lieu of shared authorship (e.g., have community members co-present, sustain the academic/community relationship beyond the research project by providing research mentoring).
- Explore opportunities to disseminate research information and findings that would reach the community and add to their understanding of the research topic.

Appendix IV: COMMUNITY CO-AUTHOR AGREEMENT

This draft Community Co-Author Agreement between the University of California San Francisco, Division of Prevention Science and a community research partner can be used as written or revised by the academic PI, community PI and community co-author to formalize actions that will be taken to ensure and support community co-authorship of a research manuscript. Community researchers seeking co-authorship are encouraged to read the recommended criteria and indicate how they will meet them. Individuals who sign the form agree with the information provided and will work to support co-authorship, as indicated on the form.

1. Provide substantial contributions to the conception or design of the work, or the acquisition, analysis, or interpretation of data for the work.

Indicate how community author will meet this criterion and any requested technical assistance.

2. Drafting the work or revising it critically for important intellectual content.

Indicate how community author will meet this criterion and any requested technical assistance.

3. Final approval of the version to be published.

Indicate how community author will meet this criterion and any requested technical assistance.

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.

Indicate how community author will meet this criterion and any requested technical assistance.

Signatures:

Community Author

Community PI

Academic PI

Print Name

Print Name

Print Name

Signature

Signature

Signature

Date

Date

Date