

Editorial

The ICMJE authorship criteria: a response from the editors

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In our August issue, we published a viewpoint by Zachariah *et al.* (2013) in which the 22 co-authors argue that the ICMJE authorship criteria should be extended to include programme managers and policy makers in developing countries who grant permission, where applicable, for operational research studies to be carried out. However, we have gradually realised that we all took issue with the authors on two key issues and resolved to write this response to further the debate and to make our position clear.

First, we disagree with the authors' treatment of operational research as distinct from what they call 'academic' research and as requiring different standards and a distinct apologia. Zachariah *et al.* (2013) characterise academic research as principally focussed on seeking the truth and building theories, whereas operational research is only an applied science. We see no reason why operational research should not build theories and seek truth – indeed, articulating hypotheses and subjecting them to the test of reality are the basis for the scientific method. We make no apology for using our science for the relief of human suffering; we consider it to be among the highest callings known to humanity. We think the discussion would be clearer if instead of 'academic' and 'operational' research, we referred to 'ivory tower' and 'real-world' research, respectively.

Our second area of difference is more substantial. While we share the concern of Zachariah *et al.* to engage programme managers, policy makers and other practitioners in the research process, with a view to ensuring their support in the dissemination and implementation of its findings, our concern is with the substance, not with the formality of that engagement. In our view, it is not

enough that programme managers should simply tolerate research projects conducted in their domains, while they graciously grant permission, issue authorisations, and wait for their lack of opposition or obstruction to be recognised by co-authorship.

We are passionate about helping researchers from developing countries to be involved in studies conducted in their countries and for their involvement to be recognised by authorship. Zachariah *et al.* allude to our policy in this regard, and we were among the first journals in our field to insist on local authors where appropriate (Groener 2004). However, we see no reason to relax our insistence that all authors should be in a position to defend the intellectual content of the whole published work – from the conception of the study, via the methodology, detailed results, and relevance to policy and practice, to the prospects for its dissemination and the adoption of the conclusions.

To remove this stipulation – as Zachariah *et al.* apparently propose – would be to reduce the accountability of authorship to a charade. It would bestow the private benefit of authorship on the gatekeepers of a public good – research access to the health system. Before long, authorship with or without understanding would come to be seen as an entitlement, or one of the perks of the job without which cooperation was unthinkable, like the *per diems* or 'sitting allowances' often paid by external agencies to health officials for attending workshops related to their work, in the town where they live (Hanson 2012).

There are good reasons why all health programme managers and policy makers in developing countries should have the intellectual and financial resources to be able to conceive, commission and cooperate actively in

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operational research studies of the areas which they administer. For example, there will be times when public health research by external agencies, or even by indigenous academic institutions and NGOs, will become impossible in a country, or in parts of a country, or into specific topics. One needs only to point at some areas of conflict to see the truth of this, although there are brave exceptions such as the Iraq mortality study (Roberts *et al.* 2004). Even where the research is feasible and funding is available, it is often impossible for outsiders to discern the fundamental research questions raised by current practice. One way for programme managers to acquire research skills is by participation in research led by external agencies such as MSF. The amount of effort involved could range from reviewing a draft manuscript for publication to active participation in prolonged fieldwork.

Like Zachariah *et al.*, we see scientific authorship as an incentive, but not just to encourage 'granting permission'; we see it as motivating a spirit of enquiry and the active promotion of, and participation in research, to inform decision-making in the field of tropical medicine and

international health. And for their articles to appear in *Tropical Medicine and International Health*, we shall expect no less from our authors.

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