

Credit Where Credit Is Due: Authorship Among Systematic Review Service Librarians

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Introduction

Granting authorship for significant contributions to scholarly work is the foundation of academic scholarship. According to the International Committee of Medical Journal Editors [1], authorship should be based on:

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.

Nevertheless, many librarians who participate in systematic reviews struggle to tackle this difficult subject.

This study aims to identify the ways the subject of authorship is broached by librarians who participate in systematic reviews. Through close examination of the websites of the member institutions of the Association of Academic Health Sciences Libraries (AAHSL), libraries with a publicized systematic review service were identified. The institutions that describe either co-authorship or acknowledgement were further examined and categorized.

Methods

The AAHSL member list includes 165 unique Health Sciences institutions, both foreign and domestic. Our research team thoroughly examined each member's websites for any mention of a systematic review service (SRS). Five institutions were not accessible to outside audiences and were removed from this analysis.

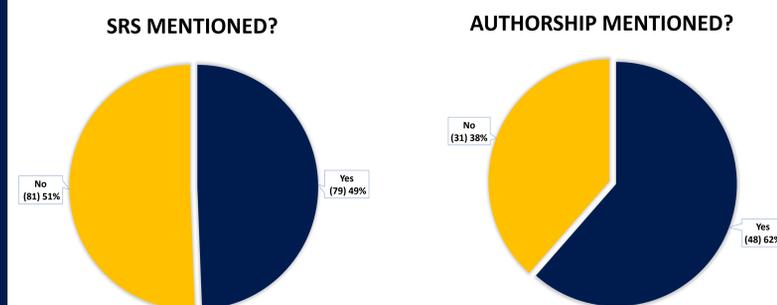
Among those libraries that did mention a SRS, websites and accompanying linked forms were re-examined for any mention of their criteria for authorship and/or acknowledgement. Each institutional website that mentioned authorship was saved in a portable document format in September 2018.

One author reviewed each eligible document for thematic codes. The second author reviewed codes. Disagreement were discussed and re-coded based on author consensus.

Descriptive statistics were calculated in IBM SPSS Statistics 25.[®] Qualitative analysis of themes was conducted within MAXQDA 12.[®]

Results

One hundred sixty institutions were included in this analysis. While many libraries mentioned systematic reviews as a topic, approximately half (79) of the AAHSL libraries mentioned a SRS service. Forty-eight (61%) of those libraries mentioned authorship.



Four types of authorship language emerged during our analysis. Co-authorship was merely suggested by 7 libraries, while 29 libraries mentioned co-authorship directly. Placing a librarian on the author team was mentioned by 17 institutions and nine SRSs required co-authorship for service.

	Number of Institutions*	Example Language	Institution Name
Co-authorship mentioned	29	<i>The librarian, as full partner and co-author, is committed to collaborating and supporting the following Systematic Review tasks.</i> <i>Librarians are co-authors on systematic review collaborations.</i> <i>For our services, we ask for the following: Authorship, with appropriate citation as a co-author</i>	University of South Florida- Shimbeg Health Sciences Library Cornell University- Samuel J. Wood Library East Carolina University- Laupus Health Sciences Library
Librarian as a member of the author team	17	<i>Add us to your author team and we will design and manage complex, thorough searches in multiple databases.</i> <i>NIH Library Informationists and Librarians regularly serve as part of systematic review teams.</i> <i>Advanced Service: Librarians are considered full team members of the research team and conduct in-depth literature searches, assist with citation management, and write the literature search methodology for the final paper for publication.cv</i>	Duke Medical Center Library & Archives National Institutes of Health – Research Library University of Tennessee – Health Sciences Library
Authorship required for service	11	<i>Librarian co-authorship is required at this level.</i> <i>The following services constitute a major contribution to the review and require contribution to the review and require librarian co-authorship:</i> <i>In lieu of a fee-for-serve, the librarian would be given authorship on any published works generated by the project.</i>	Wake Forest - Coy C. Carpenter Library University of Chicago - The John Crerar Library McMaster University - Health Sciences Library
Authorship suggested	6	<i>At your invitation, we may become a review author who:</i> <i>Once involved in a systematic review project, we would prefer... acknowledgement as a contributing author in the final publication.</i> <i>Investigators are encouraged to... acknowledge the librarian as a contributing author in the final publication.</i>	Tufts University - Hirsch Health Sciences Library George Washington University - Himmelfarb Health Science Library University of Maryland, Baltimore - Health Sciences and Human Services Library

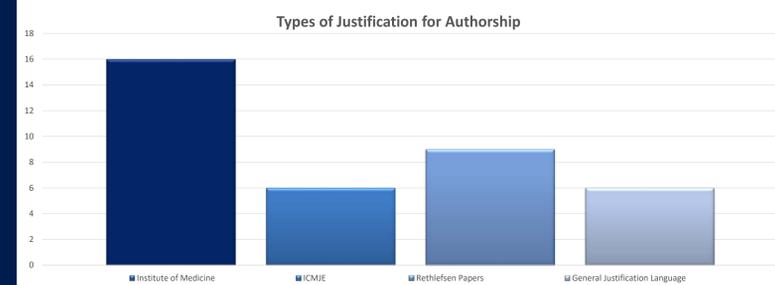
*Some institutions have been assigned multiple thematic codes

In addition to authorship, six institutions implemented fee-for-service models.

<i>Priority will be given to systematic review projects supported by grants or other funds, which contribute to library costs in the budget of the grant proposal, or other time-sensitive projects.</i>	University of Pennsylvania - STEM Libraries
<i>Tier 2 Services with a high level of involvement, where there is an expectation of authorship credit, funding, or the possibility of the librarian becoming involved as a review team member, depending on the level of involvement.</i>	University of North Carolina at Chapel Hill – Health Sciences Library
<i>Fee structure for librarian services following initial consultation:</i> • Tier 1 – Basic (minimum): 20 hours, \$1500 • Tier 2 – Advanced: > 20 hours, \$75/hour	Thomas Jefferson University - Scott Memorial Library

Results

During analysis, justification for adding a librarian as a co-author emerged as a trend. Three sources were used among SRSs to make the case for authorship by 23 different libraries: the Institute of Medicine's 2011 Standards for Systematic Reviews [2], the International Committee of Medical Journal Editors recommendations for authorship [1], and articles authored by ML Rethlefsen on the subject of systematic reviews [3-4].



Conclusion

Because librarians often make significant contributions to the research and writing of published systematic reviews, librarians should feel empowered to ask for or require acknowledgement or co-authorship for the reviews to which they contribute.

Systematic review services should detail their authorship terms on their library websites and forms to facilitate discussions about co-authorship between librarians and the principal investigators with whom they collaborate.

References

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