

## EDITORIAL

### DO WE KNOW AND APPLY THE PRINCIPLES OF ACADEMIC AUTHORSHIP?

Publication is a means by which authors communicate their scholarly work and build their reputation among their peers. People in academics are required to publish as authorship is a primary basis on which they are evaluated for employment and promotion. In academic publishing, authorship of a work is claimed by those who made substantive intellectual contributions to the completion of the work.

From the late 17th century to the 1920s, sole authorship was the norm, and the one-paper-one-author model used to be practiced (1). Now a day, shared authorship is common in most academic disciplines. For example, a clinical trial published in the *New England Journal of Medicine* in 1993 has 972 authors (2). Though multidisciplinary work is encouraged, long author lists strain some guidelines that require each author's role be described and that each author is responsible for the validity of the whole work.

The rise of multi-authorship could be because of the nature of some fields requiring multidisciplinary approach (3) or be a consequence in which scientists are evaluated or due to increased acknowledgment of the contributions of lower level workers. Long lists of authors incited criticisms where one commentator wrote, "In more than 25 years working as a scientific editor ... I have not been aware of any valid argument for more than three authors per paper, although I recognize that this may not be true for every field" (4).

For many, definitions of authorship are not well known and are often not applied even when they are known. Some people who appear as authors of studies have done nothing, while others who have done a great deal of work are not named.

In the medical field, however, authorship is defined very narrowly. According to the Uniform Requirements for Manuscripts Submitted to Biomedical Journals, in order to be considered an author, one must have satisfied all three conditions below:

1. Contributed substantially to the conception and design of the study, the acquisition of data, or the analysis and interpretation
2. Drafting or providing critical revision of the article, and
3. Provided final approval of the version to be published

The acquisition of funding, or general supervision of the research group alone does not constitute authorship (5).

Rules for the order of multiple authors in a list vary significantly between fields of research, but are generally consistent within a particular field (6). Many fields including medical and health sciences list authors in order of their degree of involvement in the work where the most active contributors listed first (7). Although listing authors in order of the involvement in the project seems straightforward, it frequently leads to conflict (8).

Many guidelines specify that all co-authors should be able to understand and support the major points of the article. All authors, including coauthors, are expected to have made reasonable contribution to the article submitted for publication. An author's reputation can be damaged when s/he allows her/his name to be used on paper s/he does not actively participated in.

Therefore all possible authors should invest their time and intellect at all level of the work and approve it for publication to keep their reputation.

The current issue of *EJHS* contains eight diverse original articles including one article on club foot management, one on pelvic organ prolapse, one on diagnosis of malaria, one on school sex education, one on nurses motivation, one on chronic non-communicable diseases, one on urinary tract infection in pregnancy and another one on refractive error on school children; and a review on antimicrobial resistance.

I invite readers to go through them as they contain new evidence to our day to day practice.

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