Cochrane Africa
Authorship Guidelines

Preamble

Cochrane Africa aims to increase the use of best evidence to inform healthcare decision making in Sub-Saharan Africa. We produce reviews that summarise the best-available evidence generated through research to inform decisions about health. We also produce other forms of research describing our work.\(^1\)\(^2\) These guidelines are put forth to inform decisions on authorship for research output produced by Cochrane Africa. These guidelines are not meant to inform authorship decisions on Cochrane Reviews produced by members of Cochrane Africa, as these may not always be within the scope of Cochrane Africa activities and authorship should be guided by the recommendations of the review group in question.

For the purposes of this document “Cochrane Africa team members” are researchers affiliated with one or more of the Cochrane Africa Hubs (currently four in number) with defined roles including: Hub leads and co-leads, directors, coordinators, project managers, mentors and other investigators temporarily affiliated with a Cochrane Africa Hub.

Several decisions must be made to ensure that credit for authorship is honest, fair and reflective of the collaborative nature of Cochrane Africa. These decisions include, but are not limited to:

1. Eligibility for authorship
2. The roles and responsibilities of authors
3. The listed order of author names
4. Co-first authorship and co-senior authorship
5. Group authorship
6. Procedures for initiating authorship
7. Disputes
8. Logistics.

1. Eligibility for authorship

An author is “someone who has made substantive intellectual contributions to a published study”.\(^3\) Authorship credit will be based on mandatorily meeting all of the three criteria as recommended by the International Committee of Medical Journal Editors (ICJME).

1. Substantial contributions to conception or study design; or to the acquisition, analysis or interpretation of data;
2. Drafting the article or revising it critically for important intellectual content; and
3. Final approval of the version to be published.

An author should also be prepared to take public responsibility for the manuscript.\(^4\)
Our approach to authorship is inclusive in that all Cochrane Africa team members will be invited to contribute from the initiation of the project, such that they have the opportunity to meet the three criteria. Cochrane Africa team members who meet only some of the criteria will be listed in the acknowledgments section. Gift authorship (“co-authorship awarded to a person who has not contributed significantly to the study”) shall be discouraged. For Cochrane Africa team members who are not research scientists and may not be able to contribute meaningfully to the three criteria above, a list of tasks that could be considered for authorship is provided in the appendix.

2. Roles and responsibilities of authors

**Lead author:** The lead author’s roles and responsibilities include:

1. Initiating the idea
2. Substantial writing and editing of the first draft and subsequent revisions
3. Keeping track of contributions from potential co-authors
4. Communicating clearly what the expectations are
5. Addressing and incorporating feedback
6. Manuscript submission.
7. Responding to reviewer comments

**Co-authors:** Co-authors’ roles and responsibilities include:

1. Contributing to initiating the idea
2. Providing feedback in a timely manner (2 weeks is considered reasonable)
3. Contributing to various aspects of the manuscript based on their expertise: background, methods, analyses, discussion
4. Approve the final version of the manuscript
5. Contributing to the response to reviewer comments

**Senior or last author:** The senior author’s roles and responsibilities will include:

1. Initiating the idea
2. Substantial writing and editing of the first draft and subsequent revisions
3. Addressing and incorporating feedback
4. Providing mentorship to the lead author
5. Providing oversight and quality assurance to the manuscript
6. Manuscript submission.

**Corresponding author:** The corresponding author may be the lead or senior author and will take responsibility for general correspondence regarding the manuscript including:

1. Submitting the manuscript
2. Providing a physical postal address to the journal as needed
3. Addressing editorial and reviewer feedback
4. Leading the response to reviewer comments (if necessary).
The listed order of author names

The authors shall be listed in the following default order: lead author, co-authors, senior author. The co-authors shall be listed first in decreasing order of their contributions as determined by the lead author and then in increasing alphabetical order of their last names for equal contributors. We recognise that the value of the listed order of author names varies across institutions and some authors may prefer the second and third positions. These issues should be raised early on before the manuscript is complete. Cochrane Africa team members who wish to occupy these positions on the manuscript should strive to contribute accordingly. If Cochrane Africa team members are not satisfied with the alphabetical order, the positions of authors who contribute equally can be assigned randomly.

Co-first authorship and co-senior authorship

If two authors contribute equally to the lead or senior authorship roles, this will be specified on the manuscript with the text: “Both authors contributed equally”. Their names will be listed in increasing alphabetical order in the respective positions.

Group authorship

If there is a maximum number of listed authors allowed by the journal, co-authors can be listed as: “The Cochrane Africa Investigators”. This group can also be acknowledged in all papers in recognition of our other partners who do not qualify for authorship but provide other contributions.

Procedures for initiating authorship

A potential lead author should first consult with the Cochrane Africa Steering Committee as the project lead. Cochrane Africa team members will be invited to be co-authors but are free to decline. We encourage open conversation about authorship at the beginning and during projects.

For larger projects, a project CV can be created. A project CV is a document which outlines the different aspects of a project that could be published, the lead author(s), co-authors and target journal(s). It serves as a written document that will help to prevent duplication of efforts, overlap of material and gives team members an opportunity to lead or contribute to different manuscripts. An example of a project CV, with two examples is given below:

<table>
<thead>
<tr>
<th>Project Name: CAN priority setting</th>
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<tbody>
<tr>
<td><strong>Focus of paper</strong></td>
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<tr>
<td>Focus of paper</td>
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<td>---------------</td>
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*Can be revised during project; † 3-5 target journals should be proposed

Disputes

Disagreements about authorship or order of authorship will be discussed and resolved by the Cochrane Africa Steering Committee using the principle of inclusiveness, especially for younger team members.

Logistics

In order to facilitate efficient manuscript production, the following steps will be adopted:

1. The Coordinating Hub can keep a current record of the Cochrane Africa team members in each Cochrane Africa Hub with details of their names, initials and affiliations as they would like them to appear on manuscripts.
2. Cochrane Africa team members should be ready to provide electronic signatures for conflict of interest forms and other journal requirements.
3. The Coordinating Hub can keep a project CV.

References

Appendix

List of tasks that could be considered for authorship

1. Originated idea
2. Impetus or initiative
3. Designed the project
4. Preparation
5. Planning meetings
6. Wrote the grant
7. Responded to granting agency questions
8. Conducted detailed literature review
9. Scored literature for methodologic quality
10. Sampling
11. Hired staff
12. Trained staff
13. Supervised staff
14. Attending meetings
15. Questionnaire design
16. Administering the survey
17. Interviewing subjects
18. Coding questionnaires
19. Contributed patients and their forms
20. Provided specialized methodological input
21. Managed data for study
22. Supervised analysis
23. Conducted qualitative analysis
24. Conducted quantitative analysis
25. Summarized the results
26. Interpreted the results
27. Registered the study for meta-analysis
28. Wrote abstract for meeting
29. Prepared poster for meeting
30. Presented paper at meeting
31. Drafted/wrote manuscript
32. Edited/commented on manuscript
33. Revised manuscript
34. Saw final draft before submission
35. Approved final draft for submission
36. Responded to reviewer’s concerns
37. Provided technical support
38. Provided financial support
39. Provided moral support
40. Prepared to take public responsibility
41. Willing to submit data to support the results in article

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