Transparent Reporting, the Foundation for Full Disclosure

A letter to Peters, Abraham, & Crutzen (2012) and Hagger, Conner, & O'Connor (2013)

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The recent discussion between Peters, Abraham, & Crutzen (2012) and Hagger, Conner, & O’Connor (2013) are timely and welcome additions from a health psychology perspective to the broader issue of improving the reporting of research in a transparent and accurate manner. Addressing authors’ perceived barriers (such as those described by Peters et al.) to share and fully disclose data sets, syntax and output is a complex and challenging task; it will require significant commitment and sustained effort from all parties involved. Crucially, a balance will also need to be attained between the needs of those publishing datasets and those wishing to examine them.

The disclosure and sharing of data is an important aspect of improving transparency in research but should be considered as a necessary complement to the full and accurate reporting of what was planned and done. Without this, a data set loses meaning as readers cannot assess whether or not it was obtained in a methodologically sound way. Furthermore, fully reporting a completed study satisfies the ethical obligation researchers have to research users, the scientific community and the public who fund research through taxation.

A large number of guidelines, designed to support the reporting of studies using a wide range of designs and/or specialist fields of research, currently exist. (See the EQUATOR network website for more information: http://equator-network.org.) In some instances the use of a reporting guideline is a requirement of the journal despite - with the exception of CONSORT - there being a lack of data on the effectiveness of this as a strategy to improve the reporting of health research. By failing to establish whether or not reporting guidelines (like any intervention) are effective, an opportunity is missed to potentially refine and enhance a strategy that could improve the transparency of reporting of health research.

To this end, our group is currently conducting an evaluation of the Transparent Reporting of Evaluations with Non-randomised Designs reporting guideline (TREND; Des Jarlais, Lyles, Crepaz, & TREND Group, 2004). Whilst imperfect, TREND’s focus on behavioural and public health interventions and external validity has the potential to be relevant and useful to health psychologists’ reporting of research. We have found some evidence to suggest more complete reporting and better study quality with TREND users. Further analyses are currently being conducted and we plan to submit these for publication before the end of 2013.

Reporting guidelines and policies requiring full disclosure are unlikely to be the only interventions to improve research reporting, but they may well form a solid foundation on which to build. It is likely that additional initiatives (e.g. All Trials: www.alltrials.net), strategies at a range of levels (e.g. author, editor, journal, publisher, funding agency, regulatory body), possibly involving a degree of enforcement, will be required to facilitate change in reporting behaviours and policies. Establishing the role played by each of these components will
contribute to our understanding of effective strategies to improve the reporting of research in health psychology and related fields.

References


Competing interests

The authors declare that they have no competing interests.

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