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## SHARING DATA AND DATA AVAILABILITY STATEMENTS

### Data availability statements: a little credit, but not much

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Loder is right that “among the failures, credit is due” but perhaps gives a little too much credit to journals that require authors to fill out data availability statements.<sup>1</sup> Loder points to evidence from systematic reviews showing that publications in journals that mandate data sharing or inclusion of data availability statements were more likely to share data (16 of 87; 18%) than those without mandates (4 of 213; 2%).<sup>2</sup> In research more broadly, these statements commonly indicate that data are available on reasonable request. Unfortunately, such data are rarely made available when requested.<sup>3</sup>

The current regimen of data availability statements probably leads authors to make a perfunctory declaration of what they perceive sounds acceptable, out of eagerness to achieve publication. Data availability statements might be better than nothing, but only a modicum of credit is due to journals for inducing authors to tick “available on request” before clicking submit.

Journals could easily clarify data availability statements by asking authors to simply state either whether data have been shared or, if data are declared as available on request, to commit them to specific criteria whereby data will be shared. When informed that the data are not available as promised, journals could routinely amend or redact data availability statements to correct the record. More credit still would be due if journals instituted an expectation of sharing basic documentation such as protocol and code on open repositories (such as [www.OSF.io](http://www.OSF.io)) for all studies and committed to targets for the proportion of publications that comply with such transparency as well as for sharing of the types of study data that can responsibly be made openly available.

Competing interests: I have advocated for improvements in transparency and quality of medical research ([www.ImproveHealthResearch.com](http://www.ImproveHealthResearch.com)). I have received support from the McCall MacBain foundation to attend the EBMLive conference in 2019 and 2022. My own record of data sharing for studies I have published is suboptimal. I am clinical lead for cancer for the Leeds office of the West Yorkshire Integrated Care Board. Full information on interests is available: <https://medicine-health.leeds.ac.uk/medicine/staff/1211/dr-stephen-bradley>

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