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[1] Edinburgh Migration, Ethnicity and Health Research Group, Usher Institute, University of Edinburgh, Edinburgh, UK

[2] NIHR Southampton Clinical Research Facility and NIHR Biomedical Research Centre, University Hospital Southampton NHS Foundation Trust, Southampton, UK

Correspondence to: A.Munro@soton.ac.uk

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Scholarly communications harmed by covid-19

Society deserves academic discourse that is civil, cool, unbiased, and objective

Raj Bhopal, [1] Alasdair P S Munro[2]

The covid-19 pandemic has accentuated an erosion in civility in academic discourse, leading to deep divisions being played out in social, mass, and professional media.[1-4] Personal attacks have increased substantially, alongside accusations impugning the integrity and motivations of fellow researchers and clinicians.[1-4] Such division is especially evident in non-academic routes of communication such as declarations, letters, petitions, and personal views. Many of the worst examples are occurring in public forums.

This is potentially harmful to public trust in scientists and healthcare professionals. It suppresses dispassionate and constructive academic exchange, which undermines the academic freedom so vital to higher education.[5] The concept of academic freedom is contested,[5] but in 2009 the UK's University and College Union defined some important principles[6] including the freedom of individuals to express their interests in teaching, scholarship, and research and the right to contribute to social change through free expression of opinion on matters of public interest. These privileges come with a responsibility to respect the freedoms of others. Some leading scientists have been subjected to such ferocious personal attacks that they have stopped their research activities.[7]

Increasing use of traditional and social media by academics has brought many benefits.[8] However, these platforms foster extreme viewpoints by design. Some, such as Twitter, value brevity over nuance, leaving no room for important qualification or uncertainty. Emotional rewards focusing on numbers of followers, likes, or onward transmissions (such as re-tweets), are best achieved by strong opinions, repeated often. Measured, nuanced, unemotional views do not go "viral."[9] Furthermore, the system creates groups of like minded individuals that listen only to each other.

The past year has been a time of great uncertainty and instability. This environment naturally breeds fear, frustration, and anger, all of which have permeated the scientific discourse. The need for influence is another contributing factor. Many academics seek influence[10] because it is judged favourably in research excellence and impact evaluations. Some have huge followings on social media, which can help achieve rapid public involvement in research—an important aim.

However, an insatiable appetite for rapid dissemination of evidence has undermined traditional publication in peer reviewed journals. This circumvents the normal checks and balances that ensure appropriate styles of communication. Information about important developments is often made available only in brief press releases and then disseminated without adequate scrutiny through social media channels. Despite a need for speed, the covid-19 pandemic is extremely complex. Collegiate, thoughtful, and mutually respectful dialogue that fully acknowledges uncertainty is essential.[3]

The solutions to these problems will require broad and inclusive discussion among academics, university leaders, administrators, media offices, and wider partners, including government agencies, institutions, and the public.

Debate is a key driver of advances in healthcare, and we must all recognise that being wrong is an invaluable part of the scientific process.[11,12] Unkind, aggressive, or mocking commentary on others' work is unacceptable and damaging to individuals and the wider research effort. Labelling different interpretations of evidence as "disinformation" is inappropriate. When direct action and policy solutions are required, a spirit of collaboration bringing together differing but complementary perspectives is essential.

Science communication, including appropriate use of social media, should be part of postgraduate training. Learning from the humanities may also help to foster a more holistic perspective on the role of science in public life and policy.

Guidance from the UK's medical regulator, the General Medical Council, states: "The standards expected of doctors do not change because they are communicating through social media rather than face-to-face or through other traditional media."[13] The GMC requires that doctors treat colleagues with respect and not harass individuals online.[13] This is also echoed by guidance from higher education institutions. The University of Edinburgh's social media guidelines emphasise the need to avoid potentially discriminatory or bullying material, adding that anger is not a professional response to criticism.[14]

A national, perhaps international, code of conduct to provide a framework for best practice is needed. In the meantime, institutions and regulatory agencies should promote existing guidelines. Anonymised, illustrative examples of both appropriate and inappropriate behaviour could be placed on a website for educational purposes. In addition to dialogue and transparency, serious breaches of academic conduct such as threatening or libellous comments that overstep the boundaries of academic freedom should be subject to disciplinary action. Equally, misleading scientific claims should be corrected publicly by the relevant individuals or their institutions.

Academic discourse must focus on responding to reasoned argument, along with transparency around

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potential conflicts of interest, rather than the motives or character of individuals. Measured, constructive criticism confined to the content, not the person, is the basis of academic freedom.

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