# **European MSM Internet Survey: Data sharing**

This document describes the process for requesting and receiving data, from both EMIS-2017 (online October 2017 to January 2018) and EMIS-2010 (online June to August 2010). It also describes (1) how the EMIS Editorial Board (EMIS EB, see below) will assess requests, and (2) the process after a data request has been approved. Any person / institution receiving data must sign a Data Transfer Agreement (DTA) with London School of Hygiene & Tropical Medicine (LSHTM) before any EMIS data can be transferred.

## Requesting EMIS Data

Any person/institution requesting access to EMIS data (whole or part of), must provide a written request in order to obtain formal consent. Data requests should use the EMIS Data Request Form in Appendix 1. The Data Request Form will be attached to your DTA if EMIS data is shared.

## Assessment of Data Requests

Access to EMIS data is managed by the EMIS EB, which is convened by Sigma Research (LSHTM). All data requests (from the EMIS Network and partners external to it) require approval by the EMIS EB. The EMIS EB will comment and provide feedback and give final approval prior to EMIS data transfer. Approval and use of the data will be limited to the specific use as described in the Data Request Form, and will not present a general approval for subsequent use of EMIS data by the applicant. All requests for access to EMIS data should be sent to [coordinator@emis-project.eu](mailto:coordinator@emis-project.eu). The EMIS EB will decide on all data access requests within 4 weeks days following reception of the request. Once agreed, the DTA will have to be signed by a legal representative of the host institution where the lead author is employed. All authors involved in a specific output that will require access to the individual-level data need to sign a separate DTA if they are based in different institutions than the lead author (a separate Data Access Form will not be required however).

#### National EMIS-2017 Overview Reports

For countries with 100+ valid respondents LSHTM seeks to facilitate the production of National EMIS reports by providing an entire EMIS national dataset with few limitations on how it should be used in relation to that national report. For national EMIS reports on a single country, the EMIS EB only requires completion of Appendix 1, questions 2, 3, 4, 9, and 10, to ensure that competing researchers or groups of researchers do not request the same national datasets to undertake national reporting. For instances where there is a pre-existing national lead for EMIS in a country, they will be consulted in relation to data requests for a national report for that country.

#### Journal articles etc.

For all other outputs including academic journal articles, the following rules for scientific publications apply to national datasets, where it is reasonable to do so, and multi-country datasets in all circumstances.

1. The lead author should identify the investigators who accept direct responsibility for the manuscript (defined as co-authors). Co-authors should fully meet the criteria for authorship defined below.
2. The lead author should outline the planned publication in Appendix 1 (questions 1 to 9 inclusive), which will also form part of DTA required for access to EMIS data.
3. Members of the EMIS EB (and other researchers in the EMIS network) may announce their interest in participating in the writing group of the academic output specified in Appendix 1 – though authorship is not guaranteed unless the criteria for authorship on page 2 is met.
4. The lead author is responsible for circulating drafts of the manuscript and/ or distributing tasks among all members of the writing group and for allowing adequate time to respond.
5. The lead author decides on the ranking of co-authors based on their contributions to the final manuscript. If no substantial contribution was received from a member of the writing group, the name may be omitted from the authors list.
6. For multi-national journal articles, unless agreed otherwise, the last authorship is reserved for one of the Sigma Research team members or Ulrich Marcus (Robert Koch Institute), provided that the criteria for authorship shown below are met.

All published manuscripts will also be listed on the EMIS website ([www.emis-project.eu](http://www.emis-project.eu)) Authors are therefore requested to provide the EMIS EB with the respective URL and/or DOI, once an output has been published.

## **Authorship and Contributors**

Publications in journals must comply with the general principles of authorship such as described in the "Uniform requirements for manuscripts submitted to biomedical journals: writing and editing for biomedical publication" of the International Committee of Medical Journal Editors (<http://www.icmje.org>). An author is generally considered to be someone who has made substantial intellectual contribution to a published article. An author must take responsibility for at least one component of the work and should be able to identify who is responsible for each of the other components.

*Criteria for authorship:*

Authorship credit should be based on

1) substantial contribution to conception and design of the study, or acquisition of data, or analysis and interpretation of data;

2) and, drafting the article or revising it critically for important intellectual content;

3) and, final approval of the version to be published.

All authors must meet conditions 1, 2, and 3. Each author must have participated sufficiently in the work to take responsibility for appropriate portions of the content.

## **The EMIS Editorial Board on March 2020, comprises:**

|  |  |  |
| --- | --- | --- |
| **Institution** | **Name** | **Email Contact** |
| LSHTM (as Principal Investigator @ LSHTM) | Peter Weatherburn | [peter.weatherburn@lshtm.ac.uk](mailto:peter.weatherburn@lshtm.ac.uk) |
| LSHTM (as EMIS co-ordinator) | Axel J. Schmidt | [axel.j.schmidt@emis-project.eu](mailto:axel.j.schmidt@emis-project.eu) |
| LSHTM | Ford Hickson | [ford.hickson@lshtm.ac.uk](mailto:ford.hickson@lshtm.ac.uk) |
| RKI (as ESTICOM coordinator) | Ulrich Marcus | [uli.marcus@emis-project.eu](mailto:uli.marcus@emis-project.eu) |
| EMIS network | Rigmor C. Berg | [rigmor.berg@emis-project.eu](mailto:rigmor.berg@emis-project.eu) |
| EMIS network | Kai Jonas | [kai.jonas@emis-project.eu](mailto:kai.jonas@emis-project.eu) |
| EMIS network | Sladjana Baros | [sladjana.baros@emis-project.eu](mailto:sladjana.baros@emis-project.eu) |
| EMIS network | Michal Pitonak | [michal.pitonak@emis-project.eu](mailto:michal.pitonak@emis-project.eu) |
| ECDC: ESTICOM steering group | Teymur Noori | [teymur.noori@ecdc.europa.eu](mailto:teymur.noori@ecdc.europa.eu) |

**Appendix 1: EMIS Data Request Form**

**Name** (researcher who wants to look at the data):

**Institution/affiliation** (who the data contract will be signed with):

**Email**:

**Phone number**:

1. **Research question and objectives of the paper (not required for National reports)**

Please formulate a clear research question / hypothesis of paper in less than 10 lines. *“To see what is associated”* is not a research question & hypothesis.

1. **Dataset to be used** Please indicate the EMIS database that will be required for the paper or report you want to write.

Single country EMIS dataset

Multi-country EMIS dataset

Be aware that the combined dataset only includes variables present in both surveys (marked in cyan in the variable manual).

2010 dataset (available only upon special request)

2017 dataset

Combined 2010–2017 dataset

Please only pick ONE type of data set. Any analysis of trend MUST be based on the combined dataset.

**Please choose the country or countries requested:**

**EU countries** (\* includes microstate(s) and/or overseas territory). For all EU countries 2010 data is available, and all are part of the 2014-20 EU health programme.

Austria

Belgium

Bulgaria

Croatia

Cyprus

Czech Republic

Denmark

Estonia

Finland

France\*

Germany

Greece

Hungary

Ireland (Republic)

Italy\*

Latvia

Lithuania

Luxembourg

Malta

Netherlands

Poland

Portugal\*

Romania

Slovakia

Slovenia

Spain\*

Sweden

United Kingdom\*

**Sub-group** (e.g. only participants with diagnosed HIV,   
only trans MSM, only <25 years, etc.):

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**Countries of the United Kingdom** (Don’t tick if UK is ticked.)

England

Wales

Scotland

Northern Ireland

**EFTA countries** (\* includes microstate(s) and/or overseas territory; § part of the 2014-20 EU health programme; ‡ 2010 available only in the combined dataset)

Iceland §‡

Norway §

Switzerland\*

**EU enlargement area countries**

(§ part of the 2014-20 EU health programme; ‡ 2010 data available only in the combined dataset)

Bosnia & Herzegovina §

Macedonia

Serbia §

Turkey

Albania‡/Montenegro‡/Kosovo (UNSC1244) ‡(May not be used/reported as single countries because of N<100)

**EU neighbourhood policy countries & Russia**

(‡‡ 2010 data not available; § part of the 2014-20 EU health programme)

Belarus

Lebanon‡‡

Israel‡‡

Moldova§

Ukraine

Russia

**Countries with separate funding** (‡‡2010 data not available)

Canada‡‡ (Funder for Canada needs to agree)

Philippines‡‡ (Funder for Philippines needs to agree)

1. **Intended output**

Please indicate what kind of output you want to use an EMIS database to write.

National Report for a single country (EMIS-2017 data)

If you are requesting a national dataset for a single country and intend only to publish a national report (at this stage) you do NOT need to answer questions 5 to 8.

Journal article based on data from a single country (called a national journal article)

Journal article based on data from 2+ countries (called an international journal article)

Other written output – please say what? ……..

1. **Authors:**

Please list all the suggested authors and their affiliations

Particularly for national papers, please ensure the involvement of national NGO partners. For international papers, please show some attempt to involve people across the EMIS network, not only your institution. The inclusion of individuals not involved in EMIS-2017 data collection should be justified.

1. **Suggested title:**
2. **Name of the peer-reviewed journal to which the paper may be submitted.**

First choice:

Second choice:

Third choice:

1. **Variables required**

Please list the variables requested using the names in the EMIS-2017 Variable Manual available at

<https://www.emis-project.eu/questionnaires-2017/>

Check online if you have the latest version. Inclusion of variables should be justified in your data analysis plan. Please list the variables you need by Q-number, in ascending order. Please mark your endpoints. Make sure to clearly define your endpoints in the analytic plan. More than 20 variables are rarely required. Requesting regional breakdowns (Q010, Q011\_city) needs justification.

1. **Data analysis plan**

Please describe the basic plan for the analyses. We are not so much interested which statistical software you are using or what type of statistical tests you are performing. Instead, please describe how you plan to answer your research question / hypothesis.

1. **Proposed date of the first draft of the planned output:**
2. **Date today:**