**BMRC November Conference Call**

|  |  |
| --- | --- |
| Date: **Monday, November 2, 2020**  | Time: **4:00 PM – 5:00 PM (EST)** |
| Facilitator: **Karina W. Davidson** | Call Info:[**Microsoft Teams**](https://teams.microsoft.com/l/meetup-join/19%3Ameeting_MWM0MWJiMjgtYTIzMy00OWQwLWI0ZmItNzYwNGE2NjYzY2Ri%40thread.v2/0?context=%7b%22Tid%22%3a%227f786e85-2b61-4bbe-a796-71e91e5e7e38%22%2c%22Oid%22%3a%22fdd5baeb-a926-400a-ae31-405610900b5e%22%7d)Dial in (if needed): +1 347-618-6811 Conference ID: 703 530 509# |

Participants:

* Simon L. Bacon (ABMR)
* Karina W. Davidson (SfHP)
* Michael A. Diefenbach (SBM)
* Elissa S. Epel (APS)
* Karen A. Matthews (ABMR)
* Tracey A. Revenson (SBM)
* Suzanne C. Segerstrom (APS)

Agenda Items:

1. New member nomination due **December 1st**
	* New members can join the December 16th call
	* For APS, suggestions for who would be right for the spot:
		+ **Action:** Suzanne to follow up regarding Liz Brondolo’s acceptance
	* For ABMR, nomination for Susan Czajkowski was received and she accepted
	* For SfHP, John Ruiz was re-nominated and has accepted
	* For SBM, haven’t heard anything
		+ **Action:** Tracey to follow up
2. BSSR Meeting Update
	* As a reminder, the BMRC website is accessible via [behavioralmedicineresearch.org](https://www.behavioralmedicineresearchcouncil.org/) and [behavioralmedicineresearchcouncil.org](https://www.behavioralmedicineresearchcouncil.org/)
		+ Past agendas, minutes, newsletters, and publications can be accessed via the “Members Portal” at <https://www.behavioralmedicineresearchcouncil.org/members>.
		+ The password for access to the Portal is **BMRC20**
	* Meeting went very well, and overall reception was positive
	* Slides are be available for download (as both a PowerPoint and PDF file) from the Members Portal of the BMRC website
	* In the future, consider recording presentations to be cut and shared on the website, social media, etc.

1. BMRC video
	* Creating a video containing an overview of the BMRC
	* To be posted on the BMRC website
2. Manuscript Updates
* “Accomplishing Breakthroughs in Behavioral Medicine Research: The Behavioral Medicine Research Council”
	+ Originally submitted to *Nature Human Behaviour* on April 23rd
	+ No update since August 18th, when the handling editor reported that the journal would be unable to communicate a decision on the submission earlier than 6-8 weeks from that date
	+ Karina has reached out requesting an update
* “Highlights of Behavioral Medicine (2014-2019): Report from the Behavioral Medicine Research Council”
	+ Decision has been made to re-extract and re-code the data so the report will instead cover 2015 to 2020
	+ To be re-routed to the Council for review after it is rewritten
* “BMRC Methods”
	+ Karina has outlined and begun work
	+ On track to share with the committee in November
* “Gaps and Needs in Climate Crisis Research and Intervention”
	+ Climate paper is active. Elissa is hoping to get it to the co-authors and Michael’s committee by end of week for their comments
	+ Elissa’s sense of contribution that BMRC can make is to think through impact, and she’s realized they need to bring in people who serve as bridges to the different meta-levels of research:
		- Judy Rodin doing climate work in Brazilian cities
		- Kelley to talk about getting the stakeholder in early on
		- Thinking of bringing in Susan Czajkowski, as she is relevant to the topic
* Co-Authorship Discussion
	+ What does it mean to be a BMRC paper? Who are the co-authors? How many co-authors should we have?
		- Karina thinks we should refine and clearly articulate the definition of a BMRC publication versus the interest of a sub-group, an official statement of BMRC, an endorsement from BMRC, etc.
	+ Ideas on how to make the process more concrete:
		- For BMRC papers:
			* Potential criterion: All current BMRC Council members should be contributing co-authors with no outside contributors
		- For official BMRC statements:
			* These will be the work of the committee
			* Potential language: “Scientific Statement from the BMRC”
				+ This implies that all members of the Council have read, signed off, and are on a tagline for it
			* Potential criterion: Need to state a problem alongside evidence supporting the proposed solution
		- For articles BMRC endorses:
			* This will likely come in as an editorial
			* Suggested language: “This article is endorsed by the BMRC”
		- For commissioned papers BMRC has asked others to write:
			* Potential language: “[Insert co-author name(s)] for the BMRC”
			* Council members may not have any authorship on this type of paper
		- Proposition that not all members of the Council need to be listed if they are solely a part of the editorial process
			* “[Insert co-author name(s)] **and** the BMRC”
				+ JAMA makes the distinction that:

“[Insert co-author(s)] **and** the [BMRC]” means the **and** implies joint authorship

“[Insert co-author(s)] **for** the [BMRC]” means the **for** implies acknowledgement (i.e., [BMRC] are *not* co-authors)

* + - * Karina suggested the USPSTF’s authorship scope as an example:
				+ Statements within scope: Anything within scope a priori—these are things within our purview to be writing official statements on. They are developed by a subgroup who write the whole piece because they’ve had conversations with their colleagues and followed a template that had intellectual contribution from other members
				+ Simultaneously, two others (also following a template) are taking the lead writing in-scope on something else with intellectual contribution from members on another particular topic
				+ Anything written by two or more people as an editorial, opinion, commentary, etc. that does not fall within scope is limited to the authors who wrote it
		- Karen suggested the American Heart Association guidelines as an example:
			* Two people submit a very detailed outline of what the statement would cover and propose the type of people that should be working on it
			* Outline goes to a group/council that approves the topic in general, makes suggestions/alterations, and identifies/approves suggested writers
			* Proposition that we can add one new step in which BMRC has a chance to look at the outline and decide whether it makes sense/fits the Council’s templates
				+ Suzanne supports this process, especially for the Open Science statement
	+ Karina proposes to dedicate the next meeting to determining what is “within scope” versus “out of scope,” policies for including external authors, etc.
		- “Within scope” is not about content but dimensions that prioritize what is “BMRC,” what will transform the field, when to invite outside authors, etc.
		- With Karina’s and Elissa’s articles as exemplars, this is to be discussed in greater depth at the next meeting
	+ Original goal for BMRC in December 2018 was to commission people to write reviews without the involvement of money
		- This remains a goal
		- BMRC has the optimal capacity to offer impact by identifying the areas that need the most attention
			* Simon proposes that we put these issues on the agenda and focus on how to fix them
		- Karen noted if there is a problem people are interested in, we can likely recruit people to write
			* Challenges:
				+ Karen: Timeline
				+ Karina: Finding people who will donate writing time for free

Suzanne: People may be more willing in the event of a collaboration

* + - Simon: Rapid reviews (which are complicated only because they shouldn’t be a shortcut for systematic reviews, but there are helpful parameters)
			* When you have a specific, clinically-focused, policy-focused question, you have the opportunity to do rapid reviews, which are significantly less costly and more efficient time-wise
			* Ultimate goal for rapid reviews is to get it down to an eight-week window,so cost is within the $10,000-20,000 range depending on the complexity of the question (as opposed to two-year window, $100,000 process)
1. Reminder of 2020 Deliverables
	* A published methods piece on how future BMRC consensus statements will be obtained
	* The commitment of an annual “Year in Behavioral Medicine” review publication
	* An effort to determine the value in declaring a decade of focus on a particular priority for behavioral medicine
	* Commentary by the BMRC on the standardization of open science and data deposit policies for behavioral medicine
	* Commentary on how the BMRC will weave a disparities lens in all future projects
* The contribution of Delphi poll and crowdsourcing data results to Michael Diefenbach’s presidential initiative for SBM

**Next Meeting is Wednesday, December 16, 2020 from 3:30-4:30 pm via Teams**