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1	EDITORIAL
2	IJED Support for Eating Disorders Research in the Time of COVID-19
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Abstract

This editorial reports on an anonymous survey question posed to eating 2 disorders researchers about changes the International Journal of Eating Disorders 3 (IJED) should implement to support the eating disorders research community affected 4 by COVID-19. The editorial accompanies an *IJED* article that details responses to the 5 6 larger survey focusing more broadly on COVID-19-related research disruptions. Survey invitations were sent to editorial board members of eating disorders journals, members 7 of eating disorder scientific organizations (e.g., *Eating Disorders Research Society*), and 8 9 individuals who provided at least three *IJED* reviews in the prior 12 months. We reviewed the responses of 187 participants and identified three categories of changes 10 that: a) had already been implemented by the journal; b) cannot be implemented 11 because they fall outside the scope of *IJED*; or c) will be implemented in coming 12 weeks/months. The latter category includes publishing topical COVID-19 papers, 13 14 making some COVID-19-related content available open access, revising statistical guidelines, and issuing author guidance on reporting protocol changes caused by 15 COVID-19-related disruptions. *IJED* recognizes the disruptive impacts that COVID-19 16 17 has on all activities in our field, including clinical work, teaching, and advocacy, and is committed to supporting authors during this difficult time while striving to publish high-18 19 quality research. 20 Keywords: eating disorders; COVID-19; coronavirus; registered report; scientific review; 21 scientific research

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The 2019 outbreak of the novel coronavirus SARS-CoV-2 ("COVID-19") has 1 caused major disruptions across the world, and the field of eating disorders, of course, 2 has not been immune to the sequelae. Inpatient or residential treatment services have 3 had to institute major safety measures for staff and patients and most outpatient 4 services have transitioned to delivering care via telehealth approaches. In the wake of 5 6 the coronavirus pandemic, research institutions around the world have had to shut down laboratories and research offices involved in "non-essential" research to protect the 7 research teams, their research participants, and the public from the spread of the 8 9 infection. A recent Lancet Psychiatry editorial noted "In times of crisis, research might seem a low priority", but the author then went on to underscore the vital importance of 10 both initiating new studies specific to the pandemic and continuing existing lines of 11 research (Editor, 2020). Research is needed to document and understand the full range 12 of COVID-19-related disruptions on our field, and such efforts will benefit from attention 13 to work in the mental health field more generally (Holmes et al., 2020). This editorial 14 focuses on one facet: disruptions of eating disorders research. 15

While it is too soon to measure the longer-term impact of these closures on 16 17 research programs and the people designing and executing the studies, already there is a growing literature anticipating impacts, sharing best practices for how to continue 18 19 scientific work, and contemplating strategies to mitigate adverse effects (Servick, Cho, 20 Guglielmi, Vogel, & Couzin-Frankel, 2020; Van Bavel, 2020; Yan, 2020). Scientific journals have an important place in the research ecosystem: they set quality standards 21 22 or expectations for scientific rigor; they reflect, and at times, set trends for topics worth 23 researching; and they provide a major platform for publishing scientific findings. Given

that publications are the "coin of the realm" for academics, journals play an important 1 role in researchers' careers. The International Journal of Eating Disorders (IJED) and 2 members of its board long have embraced an author-centric ethos to maintain policies 3 and practices that support authors (e.g., short review times; detailed and high-quality 4 feedback: a range of manuscript types suitable for investigators across levels of 5 6 research experience; workshops on publishing; and outreach to early career scholars). Considering the extraordinary challenges brought on by the outbreak of COVID-7 19, the IJED Executive Committee (i.e., the Editor and Associate Editors) invited 8 9 colleagues in the eating disorders field to share their experiences and concerns occasioned by the COVID-19-related disruptions, their thoughts about effective 10 strategies for continuing research during the pandemic, and their suggestions of what 11 the eating disorders community and *IJED* could do to support research during and 12 beyond the crisis. Specifically, in April 2020, we sent survey invitations to editorial board 13 members of three eating disorder journals (IJED, Journal of Eating Disorders, European 14 *Eating Disorders Review*); members of the Eating Disorders Research Society; 15 members of the Special Interest Group for Early Career Investigators of the Academy 16 17 for Eating Disorders; and ad-hoc IJED reviewers who had provided at least 3 reviews in that past 12 months. Recipients were encouraged to share the survey link with other 18 colleagues. We received 187 surveys with sufficiently complete data to permit 19 20 examination. Detailed survey findings are described in a separate report (Weissman, Klump, & Rose, in press), except for responses to the question which is the focus of this 21 22 editorial: "Please describe 1-3 changes IJED should make to support eating disorders 23 researchers during and after COVID-19."

There were 175 comments in response to this item. This editorial gives an 1 account of our respondents' suggestions and how *IJED* is responding to these 2 suggestions. We each independently read these comments and then, as a group, 3 considered which suggestions should be implemented. Our goal was to identify any 4 proposed changes (even if mentioned by only one person) that we believe hold promise 5 6 to accomplish the *IJED*'s overarching goal of supporting authors and the field. Our responses to the findings are organized into three categories: 1. Changes that were 7 suggested that *IJED* has already implemented; 2. changes that were suggested and 8 9 reasons why they cannot be implemented; and 3. changes we are working toward implementing. 10 **Currently Implemented Initiatives** 11 The following policies currently are in effect: 12 Longer/more flexible timeframes for authors needing to submit revisions. Authors 13 a. who are invited to revise their manuscript after review are advised of standard IJED 14 revision deadlines (90 days for major revisions and 30 days for minor revisions), but 15 they are also invited to contact the editor for an extension, if needed. 16 17 b. Longer/more flexible submission deadlines for reviewers. Messages inviting reviewers to evaluate original or revised manuscripts currently include a statement 18 19 acknowledging that, due to COVID-19, reviewers may need more time than usual for 20 providing an evaluation. Reviewers accepting a review assignment are advised that automated messages will continue to indicate a default turn-around of 14 days. 21 22 However, deadlines are adjusted per reviewer request or, if reviewers ask for more than 23 4 weeks, the editor selects an alternative reviewer.

<u>c.</u> Fast-tracking of COVID-19-related studies. From submission to production, we are speeding up the handling of COVID-19-related manuscripts (as we do with other time-sensitive material). During the review stage, this means that editors will select reviewers who agree to the default review deadline of 14 days or less; authors are asked to agree to expedited resubmission deadlines as well, if possible.

<u>Conduct a study of COVID-19's impact on eating disorders research</u>. Our survey
(Weissman et al., in press) represents our effort on behalf of the *IJED* to gain an initial
sense of the pandemic's impact on eating disorders research. However, we invite our
colleagues to pursue such research with an expanded focus regarding the domains to
be examined and the timeframe for measuring impacts which, likely, will be long-term.

<u>Accept on-line data collection versus in-person collection</u>. *IJED* does not have an
 a priori prohibition against online data collection; the critical issue with any data
 collection approach is whether the sample is suitable for addressing the research
 question and whether the data were collected using reliable and valid approaches.
 Thus, we welcome high-quality studies that use on-line platforms to expand our
 knowledge about eating disorders.

<u>Maintain standards for publication</u>. We appreciate respondents' concern that we
 maintain our expectations for scientific rigor. *IJED* has a dedicated editorial board
 comprised of experts committed to upholding expectations of high quality and being
 knowledgeable of up-to-date research methodology.

21 Changes Respondents Suggested and Reasons Why They Cannot be Implemented

<u>a.</u> <u>Special issue on COVID-19</u>. *IJED* welcomes COVID-19-related content, and we
 currently will fast-track such papers. We do not want to delay publishing time-sensitive
 content while awaiting enough papers to complete an entire issue.

4 <u>b.</u> <u>Increase the number of manuscripts published, particularly reviews, "idea"</u>

<u>manuscripts, brief reports</u>. *IJED* no longer has an *a priori* limit of manuscripts that can
be published, and the overall number of published manuscripts has gone up in recent
years. That said, we do not anticipate a policy change toward a substantial increase in
papers for the sake of an increase. We aspire to publish manuscripts that advance the
scientific knowledge base needed to understand, prevent, and treat eating disorders
and improve the lives of the people and communities affected by eating disorders.

Publish the proceedings of eating disorders conferences. Often, conference 11 <u>C.</u> abstracts are based on partially completed studies or, less frequently, on research 12 already submitted for publication. Moreover, conference proceedings typically do not 13 provide enough information for readers to evaluate scientific rigor. We note that authors 14 have a new option for publishing their research plans with *IJED* in the form of registered 15 reports (for a recent example, see (Manasse et al., 2020)). We encourage IJED authors 16 17 to make use of the registered report format, particularly during the COVID-19 period when data collection may be stalled or halted. 18

<u>d.</u> <u>Relax the rigor and reproducibility standards for data collection occurring during</u>
 <u>COVID-19</u>. Although we will develop guidelines for how to report and evaluate COVID 19 disruptions (see below), we will not be using different evidentiary standards, as doing
 so would compromise the quality of data published in *IJED* and the quality of the
 science in the field at large.

Suggestions that are out of scope for *IJED*. Several respondents proposed 1 e. changes to Wiley's business model (e.g., reducing subscription price) that are not under 2 the control of the editors. Respondents also suggested that the Journal should advocate 3 for research funding, provide funding, or publish updates about funding opportunities. 4 We share the conviction that more needs to be done to educate the public about the 5 6 need for greater allocation of resources for research and practice. Although these funding initiatives are beyond the scope of the Journal, we applaud the advocacy work 7 accomplished by local and global organizations that secure funding for the field. We 8 9 also thank our research colleagues who contribute to advocacy efforts by conducting rigorous research that provides the data needed to make the case for support, who take 10 the time to share their expertise for actions such as lobbying governments, and who 11 make charitable gifts in support of advocacy groups. 12

13 Changes We are Working toward Implementing

Permitting manuscript submissions of COVID-19-related papers that do not fit 14 a. IJED's standard manuscript types (e.g., papers that do not meet standards for 15 systematic reviews or for research reports). *IJED* temporarily has expanded the range 16 17 of manuscript types, while continuing to uphold expectations for content to reflect scholarly rigor. Authors may request that a manuscript is designated for publication as a 18 19 Clinical Forum or a Research Forum, depending on whether the focus is on a clinical 20 management issue (e.g., best practices for providing psychotherapy during stay-athome orders) or a research topic (e.g., manuscripts focusing on "best COVID-19 21 22 research practices" that does not fit within criteria for "original research", "brief report", 23 or "systematic review" formats). Authors should send a pre-submission inquiry to the

Editor-In-Chief (RSW) to determine suitability of their work for either of these manuscript
 types.

Issue guidance for authors and reviewers on how to report and evaluate COVIDb. 3 19-related changes to research protocols for studies impacted by COVID-19. Upon 4 consultation with the IJED editorial board, we will update author and reviewer guidelines 5 6 to address this important concern. We expect to launch these updates by fall of 2020. Revise the "statistics reporting checklist that lists what, minimally, must be 7 C. included in the data analysis section." *IJED* provides detailed guidance about statistical 8 9 reporting requirements as part of the author guidelines. We recognize, however, that this guidance section is unduly long and would benefit from streamlining. We will 10 undertake a revision that, hopefully, will simplify and clarify instructions about *IJED* 11 requirements for statistical reporting. 12 d. Publish "topical" papers or guidance related to COVID-19. Respondents 13 suggested several specific topics (e.g., "Best practices for conducting virtual study visits 14 and on-line data collection;" "New intervention guidelines for conducting treatment 15 during COVID-19 pandemic"). IJED welcomes COVID-19-related content, including 16 17 original research and "best practices" papers. We continue to be interested in all highguality research that fits our scope, and we will take care that all submissions receive 18 19 fair and comprehensive evaluations. 20 e. Open access of *IJED* content. Respondents requested more open-access content during the COVID-19 period. Wiley has agreed to make some COVID-19-21

related content available free of charge for a period of time. We also note that numerous

23 European institutions have secured an agreement permitting authors affiliated with

these institutions to publish primary research and review papers open access at no
charge to the author. To determine eligibility, readers are directed to (Wiley & Sons,
2020).

4 In Closing

5 With this editorial, we shared our thoughts and planned actions in response to 6 the input we received via our survey of researchers in the field. We remain committed to an open dialogue with the eating disorders research community, to responding flexibly 7 to evolving needs or concerns, and to adjust course where indicated. This editorial has 8 9 focused on research-related concerns. This focus shall not detract from paying attention to the disruptive impacts of COVID-19 on all activities in our field, including clinical work, 10 teaching, and advocacy. We are pleased to have published a recent Clinical Forum that 11 offers best practices examples shared by clinicians providing Cognitive-Behavioral 12 Therapy (Waller et al., in press), and we anticipate other publications that will be of 13 14 interest to a broad readership.

We are humbled by and grateful for the passion and commitment of the eating 15 disorders research community. Despite the strains and disruptions caused by COVID-16 17 19, many colleagues took the time to complete our survey and provide detailed suggestions. Indeed, in response to the survey, we also received private emails in 18 19 which colleagues added personal anecdotes of their current lives, such as the 20 challenges they faced maintaining clinical services or supporting their students at a time of great uncertainty and for some, personal health risk. We thank our respondents for 21 22 sharing their perspectives, insights and suggestions with us, and we wish all of them 23 and our readers good health and a bright future.

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