

## **COOKING UP INSIGHTS: UNEARTHING THE DATA FABRICATION ATTITUDES** IN DENTAL AND MEDICAL FACULTIES OF INDIA.

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Table 1: Perception of research ethics education								Table 2: Perception of gifted authorship					
Sl.no	Question			De	ental	Medical	SI	. Questions			Dental	Medical	
							no						
1.	Do you think you ha	ve the	Yes	52	2(73.3)	90(85.7)	1.	Frequency of	f	Never	17(23.9)	12(11.4)	
	information about rea	search	No	19	9(26.7)	15(14.3)		observed situ	uation	Rare	11(15.5)	21(20)	
	ethics							of gifted aut	horship	Common	43(60.6)	72(68.6)	
2.	From where do you r	receive	Teachers	s/ 35	5(49.3)	52(49.5)	2.	Thinking abo	out	Right	22(30.9)	31(29.5)	
	education on research	h ethics	mentor/					gifted author	rship	Wrong	49(69.1)	74(70.5)	
			guides				3.	Ever done th	is	Had done	59(83.1)	76(72.4)	
			Conferen	nces/ 23	3(32.4)	31(29.5)		gifted author	rship	Had	12(16.9)	29(27.6)	
			courses							never			
			Self help	o 13	8(18.3)	22(21)				done			
<b>3.</b> Opinion on the need for research ethics education			Useful	41	(57.7)	51(48.6)	) 4.	In future cha	nce of	Accept	51(71.8)	35(33.3)	
			Not usef	ful 9(1	(12.7)	13(12.3)		gifted author	rship is	Reject	20(28.2)	70(66.7)	
			Necessar	ry 21	(29.6)	41(39.1)		given					
T	Table 3: Attitude towards data cooking/falsification and   fabrication of data							Table 4: Perc	ception	of the pla	giarized a	uthor.	
Sl.n	o. Questions		JI uutu	Dental	M	edical	SIno	Ouestions		-	Dental	Medical	
1.	Frequency of	Never		13(18.3)	) 22	(20.9)	1.	Attitude as a	No me	easures	0(14.1)	11(10.5)	
	observed situation	Rare		12(16.9)	) 32	(30.5)		plagiator	agains	t			
	of data cooking	Comm	on	46(64.8)	) 51	(48.6)		ΓΟ	plagia	tor			
2.	Action should be	Take no	o action	0(0)	0((	))			Warnin	ng 4	9(69)	47(44.8)	
	taken against data	Warnin	ıg	3(4.2)	11	(10.5)			Punish	nment	12(16.9)	58(55.7)	
	cooking	Punish	ment	68(95.8)	) 94	(89.5)	2.	Punishment	Moder	rate 1	0(83.3)	47(81.1)	
3.	Punishment should	Modera	ate	52(76.5)	) 74	(78.7)		should be	Severe	e 2	2(16.7)	11(18.9)	
	be	Severe		16(23.5)	) 20	(21.3)	3.	Reaction on	Would	l react	59(83.1)	83(79.1)	
4.	Ever done this data	Had do	one	5(7.1)	11	(10.5)		being	public	ly			
	cooking	Had ne	ever done	66(92.9)	) 94	(89.5)		plagiarized	Take l	egal 2	2(2.8)	5(4.7)	
5.	In future chance of	Accept	-	0(0)	0((	))			action				
	Sl.no 1. 2. 3. Ta 5.	Table 1: PerceptSl.noQuestion1.Do you think you has information about rese ethics2.From where do you nel education on research3.Opinion on the need research ethics educatTable 3: Attitude towar fabrSI.no.Questions1.Frequency of observed situation of data cooking2.Action should be taken against data cooking3.Punishment should be4.Ever done this data cooking5.In future chance of	Table 1: Perception of residual   SI.no Question   1. Do you think you have the information about research ethics   2. From where do you receive education on research ethics   3. Opinion on the need for research ethics education   Table 3: Attitude towards data fabrication of data cooking   1. Frequency of data cooking   2. Action should be taken against data warning cooking   3. Punishment should Moder be   3. Punishment should Moder be   5. In future chance of Accept	Table 1: Perception of research effection   SLno Question   1. 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- gender, designation and number of years of experience.
- $2^{nd}$  part 4 questions perception- research ethics education.
- $3^{rd}$  part 9 questions perception of gifted authorship.
- $4^{\text{th}}$  part 9 questions on attitudes towards data cooking/falsification and fabrication of data.
- $5^{\text{th}}$  part 3 questions of perception of plagiarized • author. The questionnaire will take 10 minutes to complete for each individual.

Data was fed in SPSS (IBM version 23) for analysis. Descriptive statistics included mean, standard deviation, frequency and percentage.

Out of 176 participants, 105 were medical and 71 were dental faculties. 60% of the faculty were females in both

RESULTS

105(100) 71(100) reject data cooking is given

react

Would not

In terms of consequences, a high percentage of both medical (89.5%) and dental (95.8%) faculty believed that punishment should be imposed for data cooking suggesting a strong commitment to research integrity. The results were statistically significant (p<0.05) highlighting the need for tailored interventions to address these variations in ethical practices and perceptions within the two fields.

## DISCUSSION



10(14.1) 17(16.2)

- Research misconduct reporting truth has its price in terms of academic rivalries; oppression and victimization. Dutch study (6813 researchers), 10% confessed to falsifying data. 3000NIH funded scientists, 2% admitted to misconduct.
- Ambition to become famous and financial/promotional/contract retention Data fraud Roger Poisson, Jon Sudbo, Yoshitaka Fujii, Harry W Synder Jr and Renne Peugot.
- Kingori P et al (2016); Fanelli D (2009) Prevention Articles retracted or corrected; researcher removed from committees; no funding. Audit and methodological, ethical and presentational aspects of the study should be evaluated through the peer

review system of journals. Training – research ethics, research integrity (national body) and research misconduct.

• Awasthi S et al (2019); Kingori P et al (2016) – observed plagiarism in many disciplines.

dental and medical institute. Average age (in years) was

 $37.84\pm10.79$  in dental and  $39.\pm11.83$  in medical faculty.

Majority of the faculties were assistant professor and

associate professors. The average years of experience was

 $8.32\pm8.71$  in dental and  $13.\pm9.75$  in medical faculty.



## CONCLUSION

This study reveals common occurrences of data cooking and gifted authorship among researchers. Global criminalization of data fabrication is unlikely. Continuous research ethics and prevention are vital. Institutions should provide thorough training and foster an integrity-driven culture to establish researchers' ethical foundation for responsible practices. Cultivating

accountability and ethical conduct helps mitigate data fabrication risks, preserving scientific integrity in crucial fields.



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