Global Health’s colonial legacies are perpetuated by persistent power imbalances in knowledge production and publications, exacerbated by racialised and gendered hierarchies of being. Previous analyses of authorship trends between 2014 – 2019 show that researchers based in HICs dominate in the prestigious first and last author positions, whilst a high number of papers lack representation from LMICs. We analysed 1,269 single-country (one LMIC), multi-country (two or more countries with at least one LMIC), and global (countries from three or more WHO regions) papers from 2019-2021 to see if the picture has improved.*

**Who occupies positions of prestige?**
Authors affiliated to institutions in HICs continue to dominate authorial positions of prestige which confer influence and impact; their share of the pie is disproportionately large in stark contrast to LIC-affiliated authors.

<table>
<thead>
<tr>
<th>HIC-affiliated authors</th>
<th>LIC-affiliated authors</th>
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<tbody>
<tr>
<td>71.1% of all first authors</td>
<td>2.3% of all first authors</td>
</tr>
<tr>
<td>74.2% of all last authors</td>
<td>1.7% of all last authors</td>
</tr>
</tbody>
</table>

**HIC-affiliated men** 40.3% of all first authors 48% of all last authors
**LIC-affiliated women** 0.4% of all first authors 0.6% of all last authors

We also observed an intersectional gender gap, echoing and exacerbating race- and gender-based power asymmetries rooted in coloniality.

**Who is stuck in the middle?**
Sandwich authorship is the phenomenon of in-country authors being relegated to the middle of the authorship list for papers focusing on research in their own contexts. This is particularly egregious in light of the fact that local researchers often playing pivotal roles in research design, data collection, and community engagement.

**Single-country papers**
390 out of 470 single-country papers had middle authors.
- (n=116) of these papers could only claim in-country representation through middle authors, while
- 9% (n=36) had no in-country representation at all.

**Multi-country papers**
235 out of 316 multi-country papers had middle authors.
- (n=79) of these papers could only claim in-country representation through middle authors, while
- 18% (n=43) had no in-country representation at all.

HICs appear as study locations in 112 multi-country papers, and HIC authors are thus considered in-country authors where their primary institutional affiliation matches any of the study locations. Of these 112 papers, 22 are coded as having in-country sandwich authors due solely to the presence of HIC researchers and study locations.

**Who sets the global health agenda?**
- HIC dominance is most prevalent within the global papers, suggesting that power structures governing collective agenda-setting remain unchanged.
- HIC-affiliated men remain the largest cohort of authors at the global level, while LIC-affiliated women and men do not appear as first and last authors, respectively, in any of our 483 global papers.
- These findings serve as a sobering reminder that global health has a ways to go towards decolonisation.

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*For a written analysis as well as more information on our methodology, scan the QR code or visit [https://go.unu.edu/76qPN](https://go.unu.edu/76qPN) to access the full briefing paper, *Coloniality in Patterns of Authorship.*