Key Terms

Ways of knowing: The norms, values, and established practices that inform what and how communities generate knowledge. Communities often include, but are not limited to, academic disciplines and cultural groups with distinct traditional knowledge. And, knowledge perspectives informed by identity and lived experiences.

Integrate: Bring together. This could include combining the products of research from different domains; or, bringing together insights, methods, or analyses from multiple disciplines to approach a topic from a unique perspective.

Methods of integration: The ways submissions draw on different aspects of multiple disciplines or ways of knowing, such as their methods, concepts, or forms of evidence.

Check-Plus/Minus System

✓+   Exemplary: no revisions; scholarly level
✓   Good: few revisions; we expect most submissions to be around here on most points
✓-   Fair: some substantive revision required to get to the ✓ territory and be acceptable
X   Lacking/Absent: The expectation isn't met, or major/structural changes would be required
0   Not relevant

1 Knowledge and Understanding

✓?	Question
✓	1. Does the submission **clearly** display **accurate working knowledge** of a **breadth** of current and ongoing research that is relevant to the areas of inquiry identified?
✓	2. Does the submission draw **novel connections** between works, to their project, and to other ongoing projects?
✓-	3. Does the submission demonstrate knowledge of many **relevant constructive arguments and objections?**
✓-	4. Does the submission **properly cite all points** that are not the author's own?

Comments:
- Provides overview of different forms of trust in literature
- Seems to demonstrate a strong understanding of the literatures, most points are grounded in/connected back to epistemology of trust
- Does not appear to engage with objections. The second paragraph of Assessing Expertise and Trustworthiness would be a great place to bring up objections to the point you're making and address them. You could do this by thinking about what Collins and Evans might say about the points you've made here, and respond to what you think they might say.
- There are some points that aren't well-defined. In the expertise section, you talk about "weaker" forms of expertise. In what way are they weaker? Is the "weaker" aspect coming from Collins & Evans, or from your analysis of their work?
- Some missing citations (noted in-text)

2 Application

✓?	Question
✔+	1. Are the methods **described explicitly and accessibly**? *Note: for submissions that do not conduct empirical research, methods refers to the decisions made in the construction of an argument by drawing on sources and ideas.*
✔+	2. Are the **methods used justified and well-aligned** with the goals of the project? *Note: a description of possible alternate methods can mark an exceptional submission.*
X	3. Are **limitations and confounding factors** discussed? *If you have any concerns or questions about the quality or suitability of data or other evidence, please include them here.* *Note: an exceptional submission will also identify the values embedded in their methodological choices.*

Comments:
- Methods are appropriate for scope and goals
- Methods section is very clear
- One alternative is briefly discussed.
- Limitations and confounding factors not discussed. Are there any perspectives that are missing from this argument (limitations of your methods) that should be addressed?
- Even if it's just talking about what you won't address, discussing your limitations and how your methods impact your scope is great.

Phys-patient for Analysis

3 Analysis

✓?	Question
✔	1. Does the submission substantially engage with relevant scholarship and perspectives, enriching their submission with **fair, constructive, and appropriately critical** discussion?
✔-	2. Are the conclusions strongly **supported across the disciplinary perspectives or ways of knowing** involved?
✔-	3. Have most **significant potential objections** been addressed, with the **conclusions tempered** as appropriate?
X	4. Does the submission give interesting **insights into the project's process or content** under consideration through methods of integration? *Note: this is not a requirement, but marks a stronger submission.*
✔	5. Do the insights and conclusions **contribute to solving the issue** identified as motivation for the work? *Note: problems are complex! Submissions are not expected to provide comprehensive solutions to real-world problems, but should follow through on what they set out to do in their opening.*

Comments:
- Application of the theories to the specific case of doctor-patient relationships is great! The paragraphs in the Expertise section might be easier to follow if you outlined the forms of expertise at the start.
- Does not address potential objections, e.g., possibility of patients undermining the diagnosis with misinformation, or of making the process less time-efficient by opening consultations up to dialogue
- Very interesting and critical engagement with diverse scholarship

Assessing expertise for Integration

4 Integration

✓?	Question
✔-	1. Does the submission explicitly indicate where different disciplinary perspectives or ways of knowing are drawn upon or integrated in the project?
✔	2. Are the methods of integration **appropriate for** the project? Consider the disciplines, ways of knowing, goals, research questions, theoretical perspectives, and methods involved.
X	3. Does the author **show intention and careful justification** in/of their methods of integration? *Note: this is an element of a stronger submission.*
X	4. Does the author recognize and fairly discuss the **benefits and challenges of an integrative approach** they encountered in their process? *Note: this is not a requirement, but marks an exceptional submission.*
✔-	5. Does the author generate **meaningful insights about the disciplines or ways of knowing** involved? *Note: this is not a requirement, but marks an exceptional submission.*
✔	6. Does the author's use of methods and integrations **impact the scope** of the project's content or context, or demonstrate **adaptation to different ways of knowing?** *In other words, how does the author's choice of disciplines and ways of knowing change the questions that can be asked or the methods that can be used?*

Comments:
- Author explains integrative methods in the outline and occasionally indicates where different disciplinary perspectives are drawn upon in the body of the paper
- In the methods section, justifying why those different theories/disciplines/experiences are used in the construction of the argument is awesome!
- In the second paragraph of Trust, you're integrating disciplinary perspectives with stakeholder knowledge. Well aligned with the goals of the project, so it would be great if you were more explicit about your integration
- Under Physician-Patient Relationships, explaining what kind of expertise the patient exhibits in the scenarios listed here would be a great way of explicitly noting your integration
- Given the length of the paper, methods were appropriate, but others could be used in an expansion to better answer the questions. Actually putting the conclusions into conversation (through their assumptions, values, methods, etc.).

5 Creation

✓?	Question
✓-	1. Does the submission **present new advances** to the existing literature or problems addressed in the submission?
✓	2. Does the author's deployment of theories make a creative **(novel, interesting, or innovative) contribution** to existing literature in the context?
✓-	3. Does the submission **draw meaningfully** upon all disciplines and ways of knowing involved? *Note: see paper metadata on OJS for the disciplines and ways of knowing the author has identified.*
X	4. Does the author **reflect upon barriers** to their project (e.g., personal, communicative, affective, institutional) and **how they influenced the project?** *Note: this is not a requirement, but marks an exceptional submission.*

Comments:
- Diverse perspectives are brought into a dialogue that advances the topic under consideration
- Ways of knowing are social epistemology (philosophy), healthcare, sociology, and case studies from informed patients (stakeholders)
- The author could've been more critical of the understandings and perspectives from the different source disciplines, instead of just using them as content more uncritically
- Outlining next steps in the conclusion is a great way to highlight where your contributions and engagement lie within the existing literature

6 Communication and Clarity

✓?	Question
✓+	1. Does the submission provide **clearly stated and compelling goals,** such as a <u>thesis</u>, main idea, aim, or objective? *Consider both the statements themselves and their motivation. In the comments section here, <u>underline</u> the thesis or statement of goals.*
✓	2. Is the submission **well-organized, with a logical flow** (or if not, is this structure intentional and justified)?
✓	3. Do **points support** each other, leading to constructive conclusions?
✓-	4. Is the submission **easy to follow,** with consistent and effective **signposting** throughout? *Does the author outline their points at the outset, follow through in the order and structure presented, and summarize their points and connections to the submission's goals?*
✓-	5. Are works cited **current** as in accordance with what is appropriate in the discipline(s) or ways of knowing involved, with a **consistent referencing style?**
✓	6. Is the submission **free from spelling/grammatical errors?** *Please mark any errors on the submission.*

✔	7. Is language used **clearly and thoughtfully?**
✔	8. Is the writing **well-edited and appropriate** for undergraduate audiences? *Mark any confusing, unclear, or specialized language that is not defined.*
✔	9. Is the submission **intellectually generous**, i.e., is all relevant background described **fairly and accessibly** for people unfamiliar with the involved ways of knowing?

Comments:

Informed patients bring useful information and expertise to their relationship with physicians, but are often distrusted. Through understanding the nature of expertise and trust relationships between patients and physicians, we may improve medical policy and practice through encouraging uptake of information from both physicians and patients.

- 6.3: could be more clearly indicated in some places
- 6.4: This signposting makes the rest of your paper very easy to follow, and helps me understand your goals better.
- 6.9: yes in most places, but not all
    - Without any knowledge of Epstein's account of AIDS treatment, this point is lost on me. Could you explain in further detail how this example impacts and advances theories of expertise?