

# Author guidelines

---

## **Purpose of *Public Health Research & Practice***

*Public Health Research & Practice* is an open-access, peer-reviewed quarterly online journal that publishes innovative, high-quality papers that inform public health policy and practice. It has a special focus on innovations, data and perspectives from policy and practice.

The journal will publish:

- Original research and reviews relevant to policy and practice
- Articles that seek to improve methods of research relevant to policy and practice or the understanding of these methods
- Commentaries on emerging or debated issues or concepts in public health policy and practice
- Examples of innovative programs or policies, or new data or perspectives from the practice of public health
- Brief reports of research or data of special relevance in strengthening public health practice.
- A high standard of academic writing is expected. We do not publish clinical articles that focus on the treatment of individual patients.

## **Audience**

The journal's primary audiences are population and public health policy makers and practitioners and researchers who wish to influence public policy and practice.

While we have a special focus on public health in NSW, we are also interested in reaching similar audiences across Australia and the world. We also aim to reach policymakers and practitioners elsewhere within the health sector (e.g. health service managers and clinicians), and practitioners outside the health sector (e.g. government departments/agencies and NGOs).

## **International relevance**

As we are an online, open-access journal, we have national and international audiences, so authors must ensure that the context for their paper, especially the introduction, would be easily understood by someone from outside NSW or Australia.

Please ensure the text is not too NSW-centric and use terminology that is widely understood internationally.

You are also strongly encouraged to offer observations that might reflect the specificity or generalisability of your findings and/or commentary to both Australian and international contexts. Consider questions such as: What value do your findings add to existing international evidence? What implications might they have more widely in Australia, and internationally? Where do your findings fit within the international context in your topic area?

## Governance

The journal is published by the Sax Institute, a national leader in promoting the use of research evidence in health policy. Formerly known as *The NSW Public Health Bulletin*, the journal has a long history. It was published by the NSW Ministry of Health for nearly 25 years.

Responsibility for its publication transferred to the Sax Institute in 2014. It receives guidance from an expert [editorial board](#).

## Standards

The journal conforms to the International Committee of Medical Journal Editors (ICMJE) [Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals](#) and abides by the [Principles of Transparency and Best Practice in Scholarly Publishing](#) issued by the Committee on Publication Ethics. A full list of policies is available on our [website](#).

## The peer-review process

The journal uses peer review to maintain standards and ensure relevance. Not all material submitted to the journal is accepted. Papers must provide new information and be scientifically valid. Authors of highly clinical papers are referred to other journals.

The peer-review process is managed by the editorial team. For each proffered and commissioned paper, two peers in the subject area are invited to review the paper. Some papers require an additional review. Papers may require some revision by the authors and, depending upon the level of revision, may be reviewed again upon resubmission.

Each reviewer is provided with a link to our [Guidelines for reviewers](#). Reviewers regularly request feedback on their reviews; in this case, the editorial team sends reviewers a copy of the other reviews of the paper they reviewed. This process is anonymous and no reviewers are identified.

Manuscripts will be reviewed against the following criteria:

- Relevance to the aims of the journal
- Potential contribution to public health policy and practice
- Innovation and contribution to knowledge
- Scientific quality and appropriateness of methods

If submitted manuscripts are judged useful for the readership, authors are given anonymous peer-reviewer comments to help in the revision of their papers. The time between submission of a manuscript and a decision by the editor regarding publication depends on the nature of the manuscript and the availability of suitable reviewers, however, a guide to [the publication process](#) and the timelines we work by is available from our website.

## Confidentiality

The journal uses a system of single-blind peer review, where reviewers' details are kept confidential and authors' details are attached to their manuscripts.

The journal is committed to treating unpublished manuscripts as confidential but they will be subject to peer review and may be reviewed internally by editorial staff and editorial board members. If an issue of fact is raised concerning a manuscript during this process we will take the necessary steps to clarify factual accuracy with authors. Only in cases of suspected misconduct will we seek advice outside of the process described above. Our peer review guidelines also outline the manuscript confidentiality requirements we place on reviewers.

## Submitting your manuscript

Please submit your manuscript via the online journal management system ScholarOne. This is accessible via our [website](#). For assistance with ScholarOne, please refer to the ScholarOne [online help guide](#) for authors or contact the journal's [Editor](#). An outline of the steps involved in submitting your manuscript can be found on the [Submit a paper](#) page in the authors' section of our website.

You will be prompted during the online submission process to list the names, institutional affiliations, addresses and contact numbers of all authors. We also request you attach a cover letter to your manuscript containing this information.

You will also be prompted to complete detailed authorship contribution information.

## Policies and forms

Before uploading your manuscript, please familiarise yourself with the journal's editorial policies on: authorship; peer review; conflicts of interest; confidentiality; dissemination; embargoes and media releases; corrections and retractions; misconduct, appeals and complaints; copyright; and linking. These are available in succinct form on the [Editorial policies](#) page in the 'About us' section of our website.

The following forms (available from our website and ScholarOne) must be completed and submitted with the manuscript:

- Conflict of Interest declaration (see below: all authors to complete, contributing author submits online via ScholarOne)
- Licence to Publish Form (contributing author submits online via ScholarOne)
- Data Availability Statement (contributing author submits online via ScholarOne)

Optional:

- Author Inclusivity & Diversity Statement – this is not mandatory (contributing author submits online via ScholarOne)

## **Conflicts of interest**

Each author is required to sign the International Committee of Medical Journal Editors (ICMJE) Conflict of Interest Declaration in the interest of transparency. Conflicts may be financial or non-financial. The corresponding author should also include a summary statement on conflicts of interest. This will be published with the article. If there are no conflicts to declare, this will be stated in the article.

## **Authorship and affiliations**

Authors are required to supply a short statement outlining each author's contribution to each manuscript. This can be uploaded to ScholarOne. Please review our [Authorship policy](#) before compiling this statement.

Each author should limit their listed affiliations to a maximum of three organisations/institutions unless an alternative arrangement is agreed to by negotiation with the Editor.

The journal is a member of [CrossCheck](#), a multi-publisher initiative to screen published and submitted content for originality. The journal uses iThenticate software to detect instances of overlapping and similar text in submitted manuscripts.

## ***Artificial intelligence***

Artificial Intelligence (AI) tools cannot meet the requirements for authorship as they cannot take responsibility for the submitted work. As non-legal entities, they cannot assert the presence or absence of conflicts of interest nor manage copyright and licence agreements.

Authors are required to disclose in the manuscript if any content, including text, images or figures, has been created by artificial intelligence, language models, machine learning or similar technologies, or if they have used such tools in their research. A clear description of the name of the model or tool, version, manufacturer, and how it was used should be included in the manuscript methods or acknowledgements section.

Authors must take responsibility for the integrity of the content created by artificial intelligence, language models, machine learning, or similar technologies, and are liable for any resulting breach of publication ethics.

## **Acknowledgements**

Acknowledgements, if there are any, should appear immediately before the reference list. The names, initials and, where necessary, official positions of those mentioned should be included. Please do not mention everyone who has been marginally involved in the work. Expressions of appreciation to political figures should not appear.

Sources of funding should be declared by filling out the Conflict of Interest form and also in the relevant text field in ScholarOne.

## **Data availability**

When submitting a manuscript, the corresponding author must fill out the [Data availability form](#) detailing where the data that supports the findings of their research is located.

The journal encourages authors, where possible and applicable, to deposit data that support the findings of their research in a public repository such as an institutional repository (e.g., with the authors' affiliated university) or a general repository such as figshare.

Authors may be requested by the editorial team to provide data and/or to verify findings.

## **Authorship Inclusivity & Diversity Statement**

We encourage all authors to consider inclusivity and diversity in conducting their research/analysis, and in authorship of manuscripts.

To enable the journal to assess inclusivity and diversity practices, we invite authors to complete an optional [Inclusivity & Diversity statement](#), which highlights author characteristics that may be relevant to inclusion and diversity.

Authors are invited to complete the questionnaire comprising a series of 'tick-box' questions about inclusivity and diversity. If authors opt to complete the questionnaire, they should upload it together with their manuscript submission in the Scholar One Manuscript Management system.

The statement gives authors an opportunity to express ways in which their work is contributing to public health research, policy and practice becoming more inclusive and diverse.

Please note the following:

- We acknowledge the questions provided in the questionnaire are not comprehensive. We apologise if there are areas authors would like to highlight that are not included as options.
- The corresponding author is responsible for completing the questionnaire on behalf of all contributing authors. We recommend they ask co-authors what, if any, information they would like to share.
- No author is required to provide information they do not feel comfortable with, and completion of the questionnaire is optional.
- The information provided on the form, and authors' decision whether or not to complete the questionnaire, will not influence the journal's decisions regarding publication of the manuscript.

### *Inclusion of statements on manuscripts*

Authors can provide consent (or not) via a check box on the questionnaire for their Inclusivity & Diversity Statement to be included in the published manuscript (if accepted). All authors must agree to the publication of the statement. If any authors do not agree, the statement should not appear.

If authors consent to their statement being published, it will comprise the questionnaire statements to which they ticked 'yes'. Below is an example of a statement that could be included in the manuscript Acknowledgements section:

### **Example of an Inclusivity & Diversity Statement within a published manuscript:**

*“One or more of the manuscript authors self-identifies as Aboriginal or Torres Strait Islander. The authorship of the manuscript includes consumers and/or practitioners who are the subject of the paper.”*

The journal will monitor the completion of Inclusivity & Diversity statements over time, as we strive to reflect inclusivity, diversity and equity in all journal practices.

### **Submission checklist**

Please complete our [Author checklist](#) to ensure you have followed all necessary steps for submission.

For details about how the *Public Health Research & Practice* submissions process operates, please refer to the [Publication process](#) page in the authors' section of our website. Consideration of manuscripts may be delayed if submission requirements are not met.

### **Research involving Aboriginal and Torres Strait Islander people**

When research involves Aboriginal and Torres Strait Islander people, researchers need to consider how the research demonstrates the following six values, as described in the [NHMRC Values and ethics guidelines](#):

- Spirit and integrity
- Reciprocity
- Respect
- Equality
- Survival and protection
- Responsibility

All research involving Aboriginal and Torres Strait Islander people should have ethical approval from an Indigenous Human Research Ethics Committee (HREC) (such as the [Aboriginal Health and Medical Research Council of NSW HREC](#)), if the researchers have access to an Indigenous HREC. Papers on Indigenous health should have at least one Indigenous author or an explanation why not.

We also ask authors to ensure their manuscript addresses the checklist of items to include in health research involving Indigenous people as outlined in the CONSIDER (Consolidated criteria for strengthening reporting of health research involving Indigenous peoples) Statement. [Click here to read the CONSIDER Statement \(see checklist in Table 1\).](#)

Where the Journal receives a submission reporting on research involving indigenous populations from other countries, we would seek assurance on equivalent ethical approval and authorship.

### **Reporting of sex and gender**

With respect to the reporting of sex and gender, *Public Health Research & Practice* follows the guidance of the International Committee of Medical Journal Editors Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals:

Ensure correct use of the terms sex (when reporting biological factors) and gender (identity, psychosocial or cultural factors), and, unless inappropriate, report the sex and/or gender of study participants, and describe the methods used to determine sex and gender. If the study was done involving an exclusive population, for example in only one sex, authors should justify why, except in obvious cases (e.g., prostate cancer).

Discuss the influence or association of variables, such as sex and/or gender, on your findings, where appropriate, and the limitations of the data.

For further guidance, please see:

- The European Association of Science Editors (EASE) SAGER guidelines [ease.org.uk/communities/gender-policy-committee/the-sager-guidelines/](http://ease.org.uk/communities/gender-policy-committee/the-sager-guidelines/)
- The Lancet editorial policies [www.thelancet.com/journals/lancet/article/PIIS0140-6736\(16\)32392-3/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)32392-3/fulltext)

## Author proofs

Once your manuscript has been accepted and edited, you will receive an author proof with editing queries to review. Once author changes have been made we will not supply further proofs, however, if any further material queries arise in relation to content, you will be contacted before publication.

## IMPORTANT NOTES

- Published or in-press articles based on the same research data as a manuscript submitted to PHRP must be disclosed and a copy supplied as a supplementary file with the manuscript
- Authors must obtain the appropriate clearances for the material contained in their paper from their directors or supervisors before submission
- Authors will be prompted in ScholarOne to provide an assurance that their research has received the relevant ethics approvals.

## Presenting your manuscript

### Step 1: Choose your article type

*Public Health Research & Practice* publishes five main types of articles. Please choose one from the list below and note the accompanying guidelines on word count, abstracts etc.

### RESEARCH

The journal publishes:

Original research reporting quantitative or qualitative data

- Reviews of published research
- Articles that improve methods of research relevant to policy and practice or the understanding of these methods.
- We will occasionally publish study protocols that are very pertinent to policy and practice and are relevant to the aims of the journal. No more than one study protocol will be published per issue.

These manuscripts are peer-reviewed and can be commissioned or proffered.

*Word count:* 2500–3500 words (excluding references and figures, but **including** tables). The total word count includes the abstract and key points.

*Abstract:* 350 words covering the following information in structured abstract form: objectives and importance of study, study type, methods, results and conclusions.

*Body:* should be structured with five components: Introduction, Methods, Results, Discussion and Conclusion.

*Key points:* 75 words in dot point form summarising what the article adds to the body of knowledge.

*References:* limited to 25 per research article and 50 per systematic review unless an arrangement is agreed to by negotiation with the Editor.

*Images, tables and figures:* up to four per article.

*Internationally recognised reporting guidelines* should be followed.

These include:

CONSORT statement (Consolidated Standards of Reporting Trials) statement for randomised trials

TREND statement (Transparent Reporting of Evaluations with Nonrandomized Designs)

STROBE statement (Strengthening the Reporting of Observational Studies in Epidemiology)

MOOSE (Meta-analysis of Observational Studies in Epidemiology)

PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses).

Other study checklists are available from the EQUATOR Network (Enhancing the QUALity and Transparency Of health Research).

## **PERSPECTIVES**

The journal publishes:

- Overviews of emerging or topical issues or of new research developments of interest to public health policy and practice
- Concept development, frameworks or models
- Commentary on research articles published in the journal.

These manuscripts are peer-reviewed and can be commissioned or proffered. The journal also publishes editorials from the Editor-in-Chief or the Editorial Board – these are not peer-reviewed.

*Word count:* 1000–1500 words (excluding references and figures, but **including** tables). The total word count includes the abstract and key points. Longer articles will be considered in cases where a topic of special interest for policymakers and practitioners warrants further discussion.

*Abstract:* Unstructured abstract of up to 350 words.

*Key points:* 75 words in dot point form summarising the key points of the article.



*References:* up to 15 per article.

## **IN PRACTICE**

The journal publishes articles:

- That are led by practitioners working in policy, program development or service delivery and describe insights from their work in the field, based on analysis of empirical information (quantitative or qualitative).

For example, this might include descriptions of innovative programs or policies using a case study approach. Assertions about the effects of policies or programs should be substantiated by verifiable information and accessible performance data.

Papers that are simply descriptions of programs or services will generally not be accepted nor will 'promotional pieces' more suitable for a newsletter.

These manuscripts will be peer-reviewed against the criteria outlined above. They can be commissioned or proffered.

**Word count:** 1500–2000 words (excluding references and figures, but **including** tables). The total word count includes the abstract and key points.

**Abstract:** 350 words covering the following information in structured abstract form: objectives, type of program or service, methods, results, lessons learnt.

**Key points:** 75 words in dot point form summarising what the article adds to the body of knowledge.

**References:** up to 20 per article.

*Images, tables and figures:* up to four per article

## **BRIEF REPORTS**

The journal publishes brief reports of:

- Research or data of relevance to public health practice, including original empirical research or evaluations
- Preliminary or novel findings that are limited in scope, e.g. of trials or pilot demonstrations, or of health promotion strategies in the process of implementation
- Notable results that may be of interest to public health practitioners, but which make only a limited contribution to the knowledge base.

These manuscripts will be peer-reviewed and can be commissioned or proffered.

**Word count:** 600–800 words (excluding references and figures, but **including** tables).

**References:** Up to five per article.

*Images, tables and figures:* one per article

## **NEWS & VIEWS**

We welcome your letters and will publish correspondence about our editorial content in this section. Please send your correspondence via email to the [Editor](#).

Letters should be no longer than 350 words and submitted no later than eight weeks after publication of the original article.

## **Step 2: Format your manuscript**

Papers should be submitted with double spacing throughout. The recommended text is 12-point Arial. All pages of the manuscript must be numbered consecutively, including those carrying references and tables. References are to be placed after the text. (See Tables, figures and images, p6). Do not number the lines in your manuscript.

Please remove all track changes and mark-up alterations. Superscript numbers for references should be manually inserted and checked against the numbering of the reference list at the end.

### ***Paper titles***

Titles should be brief and include as many keywords as necessary to indicate the contents of the paper and assist with electronic searching for the article.

Other features:

- Left aligned
- Bold
- No full point at end
- No capital letter after a colon
- Use abbreviations for Australian states and territories
- Use no other abbreviations.

### ***Running heads***

An abridged title should be included for use as a running head at the top of the printed page. This abridged title must not exceed 50 characters (including spaces).

### ***Reference requirements***

Authors are responsible for the accuracy of references. The journal uses the Vancouver referencing system. Details on Vancouver referencing are available in our A-Z Style guide.

### ***Abstract style***

The format of an abstract is determined by the type of paper presented. Research articles require structured abstracts and In Practice and Perspectives articles require unstructured abstracts. In both cases, it is important that the abstract accurately reflects the content of the paper.

The following questions provide a guide for preparing an unstructured abstract:

- What topic or issue does your paper seek to address?
- Why is this topic important?
- What methods did you follow (if applicable)?
- What are the key points and/or findings of your paper?

Structured abstracts should contain the following four headings:

- Objectives
- Methods
- Results
- Conclusions

Abstracts do not include references, acronyms, trade names or any abbreviations apart from those of Australian states and territories.

### **Author list – style**

- First and last names are given in full, and the initial of middle names are followed by a full point and a space (e.g. John F. Smith)
- Lists of names are separated by commas, with 'and' instead of the penultimate comma. The names and addresses of the organisations to which the authors are attached should be placed immediately beneath the list of names
- List professional affiliations e.g. Faculty of the Built Environment, UNSW Sydney; Communicable Diseases Branch, NSW Ministry of Health
- Include the city, state and country of each affiliated institution, but don't repeat the name of the city or state if it is in the Institution's name e.g. NSW Ministry of Health, University of Sydney
- Do not include academic qualifications or official positions
- Use lowercase, superscript letters (a,b,c...) to match names with organisations and addresses
- Place superscripts after the last name but before the punctuation
- Identify the corresponding author with the final superscript letter.

### **Affiliation example**

James G Brown<sup>a,c</sup>, John Andrews<sup>a,b</sup> and Brigid F Smith<sup>a</sup>

<sup>a</sup> Department of Biological Science, Macquarie University, Sydney, NSW, Australia

<sup>b</sup> Department of Biology, Faculty of Science, University of Mumbai, Maharashtra, India

<sup>c</sup> Corresponding author: [jbrown@researchg.edu.au](mailto:jbrown@researchg.edu.au)

### **Figures, images and tables**

See limits for figures/tables for each type of manuscript detailed below. Include only those figures/tables that are central to your work and please *place tables in the text where they should appear, and indicate for each figure or image where it should appear.*

### **Figures and images**

- Figures and images should be simple; every line in a figure should have a purpose and should be relevant to the message of the figure. They should be complete in themselves without reference to the accompanying text. Information presented in the figure should not be repeated in the text.

- Figures and images should be appropriately labelled and uploaded into ScholarOne separately to the body of the paper i.e. they should not be embedded in the Word document (see below on acceptable file formats).
- If you have references in your figures, please ensure they are included in the correct order in the reference list rather than at the end.
- Please also supply the data from your graph as a separate Excel file for our designers, who may need to access this file if redrawing is required.
- If you are sourcing figures and images from elsewhere, you must ensure the appropriate copyright permissions are in place to support republication.
- Illustrations and images should be high-resolution files: pictures cut and pasted from the internet are not acceptable. Images should be supplied at a minimum 300 dpi.

### **Formatting and style**

- Acknowledge data sources below the figure
- Provide a descriptive figure title and a legend
- Label axes so that quantities increase from bottom to top and from left to right
- For comparative graphs displayed adjacently, use the same scale and range on the Y-axis
- Use plain, non-technical language in graph titles and headings, e.g. 'new cases' instead of 'incidence', 'times more likely to die' instead of 'death ratio'
- Do not use 3D boxes or shading
- Use patterns rather than colour/shading to distinguish between columns or lines
- Do not use grid lines across graphs
- Do not place figures in boxes
- Spell out acronyms in the text at the bottom of the figure
- Use line or bar graphs in preference to dot graphs or pie charts. If using a pie chart, label the quantity represented by each segment
- To present discrete comparisons, use a bar graph, to present a trend, use a line graph
- Reduce the amount of information presented in graphs. Instead of layering information on one graph, create a series of graphs
- Label axes so that quantities increase from bottom to top and from left to right.

### **File formats**

- Supply all figures in original file types (editable, scalable, vector-based files)
- For maps supply .eps (encapsulated postscript) or editable PDF. Use a neutral colour for land areas and white for sea areas
- For diagrams supply .eps or .ai (Adobe Illustrator) or other original format files such as PowerPoint or editable PDF
- For graphs supply Excel data as well as example charts
- Only supply raster-based files (jpeg, tiff) if it is impossible to supply vector-based files.
- Raster-based files are not scalable or easily editable
- Supply all figures with editable text so they can be copyedited
- Include the following in the text of the Word document, not in the figure itself: figure number (e.g. Figure 1) and title, sources, permissions, acknowledgments, references, caveats or other information
- Illustrations and images should be high-resolution files: pictures cut and pasted from the internet are not acceptable.

*Some information is sourced from [Better Health Graphs](#) (NSW Health, 2006).*

## Tables

- Tables should be appropriately labelled. They should be simple without shading. Use lines at the top and bottom and below the heading row only. Do not use vertical lines or boxes.
- Tables should be self-contained without reference to the accompanying text, have a title that clearly describes what the table is about, and each row and column should have a heading.
- Tables should be placed in the section of the word document you would like them to appear. They should be numbered consecutively.
- Information presented in the table should not be repeated in the text.
- If you have references in your tables, please ensure they are included in the correct order in the reference list rather than at the end.

## *Formatting and style*

- Supply as tables in the main Word document
- Acknowledge data sources below the table
- Explain abbreviations in the text below the table
- Include exact *p* value in tables

## Text boxes

Boxes are useful for separating different types of information and are usually independent of the rest of the text. Boxes can be used for highlighting examples. As per tables, the box should be inserted in the main Word document where you would like it to appear.

If you have references in your text boxes, please ensure they are included in the correct order in the reference list rather than at the end.