

Intended for healthcare professionals

Sage Journals

Public Health Reports®

Impact Factor: 2.5

5-Year Impact Factor: 3.1

Submission guidelines



Submit manuscript

Please read the guidelines in full before submitting your manuscript. Manuscripts not conforming to these guidelines may be returned.

Visit Submission Site 

This Journal is a member of the [Committee on Publication Ethics](#).

The Journal recommends that authors follow the [Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#) formulated by the International Committee of Medical Journal Editors (ICMJE).

Sage is committed to upholding the integrity of the academic record. We encourage authors to refer to the Committee on Publication Ethics' [International Standards for Authors](#) and view the [author responsibilities section](#) on the Sage Journal Author Gateway.

We also encourage you to familiarize yourself with our [Editorial Policies](#) and our [Publication Ethics Policies](#).

Sage Publishing disseminates high-quality research and engaged scholarship globally, and we are committed to diversity and inclusion in publishing. We encourage submissions and peer review from a diverse range of authors and reviewers from across all countries and backgrounds. [Read our diversity, equity, and inclusion pledge.](#)

There are no fees payable to submit or publish in this journal. Open access options are available – see below.

Please read the guidelines below then [submit your manuscript here](#).

Key information

Access: Subscription

Accepts preprints? Yes

Identity transparency: Single anonymized

These instructions for contributors are intended to assist authors who wish to submit manuscripts to Public Health Reports (PHR). The journal follows 3 main publication standards: 1) these instructions, 2) the [AMA Manual of Style](#), 11th Edition, 2020 (AMA Manual), and 3) the [Manuscript Submission Guidelines](#) of Sage, the technical publisher of the journal (Sage Guidelines). When seeking advice on the publication standards used by PHR, you should first consult these instructions. In instances where these instructions are silent on a particular point, consult the AMA Manual. In instances where both these instructions and the AMA Manual are silent, consult the Sage Guidelines. Manuscripts that substantially deviate from these instructions may be returned to the contributor without review.

You should read these instructions before submitting your manuscript. In addition, you should browse the journal to become familiar with the types of articles we publish and our format. Then, visit the journal's submission site at <https://mc.manuscriptcentral.com/PHR> to submit your manuscript. You should take care to ensure that your manuscript conforms to these instructions.

PHR is committed to upholding the integrity of the academic record. The journal follows the ethical standards contained in: 1) the [ICMJE Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#), 2) the best practice guidelines of the [Committee on Publication Ethics \(COPE\)](#), and 3) the policies and recommendations of the [World Association of Medical Editors \(WAME\)](#). PHR encourages contributors to view the [Sage Publication Ethics](#) page on the Sage Author Gateway.

Publishing fees and open access

There are no fees payable to submit or publish in this journal.

Figures submitted in color will be published in color in the online version of the journal at no cost. If you wish to have color figures in the printed version, you will receive

information regarding the costs during production.

Optional open access publishing is available for a fee via the [Sage Choice program](#), and Open Access agreements, where authors can publish open access either discounted or free of charge depending on the agreement with Sage. Find out if your institution is participating by [visiting Open Access Agreements at Sage](#). Open Access agreement eligibility is determined by the corresponding author's affiliation matching an agreement at acceptance. For more information on Open Access publishing options at Sage please [visit Sage Open Access](#).

For information on funding body compliance, and depositing your article in repositories, please [visit Sage's Author Archiving and Re-Use Guidelines](#) and [Publishing Policies](#).

Open access fees do not cover color charges and are charged separately.

Preparing your manuscript for submission

Your article must be within the scope of the journal and be of sufficient quality. If not, it will not be reviewed. Please read the journal's [Aims and Scope](#) to see if your article is appropriate.

The manuscript must be your original work, you must have the rights to the work, and you must have obtained and be able to supply all necessary permissions for the reproduction of any copyright works not owned by you, including figures, illustrations, tables, lengthy quotations, or other material previously published elsewhere.

Article types

The journal accepts manuscripts of the following types: original research; public health evaluation; public health methodology, case studies, brief reports, reports and recommendations, topical reviews, systematic literature reviews, commentaries, and letters to the editor. The following is a description of each article type and its accompanying requirements.

1. Original research

Original research manuscripts report on research or meta-analyses, conducted to increase knowledge of a particular public health concern, establish or confirm facts, reaffirm the results of previous work, solve new or existing problems, or support

previous or develop new theories. You should follow the relevant Equator Network reporting guideline for the study type.

1.1 Number of words, tables, and figures

3000-word limit, 250-word structured abstract (objectives, methods, results, and conclusions), no more than 5 tables or figures

1.2 Peer reviewed

Yes

1.3 Manuscript format

Structured abstract, introduction, methods, results, discussion, conclusions, references, and tables/figures. For meta-analyses: structured abstract, introduction, methods (data sources, inclusion and exclusion criteria, and criteria for assessing data), results, discussion, public health implications, references, and tables/figures.

1.4 Review criteria

The editors review original research submissions in accordance with whether the manuscript: 1) facilitates the movement of science into public health practice, 2) presents actionable results derived from original research, 3) uses sound scientific methods, including the appropriate use of statistics, 4) reports on recent data (preferably less than 5 years old) that include a description of entry criteria for clinical studies and response rates for survey data, 5) follows the relevant [Equator Network guideline](#) for the study type, and 6) uses plain language and statistical presentation relevant to a broad range of public health professionals.

For meta-analyses, the editors review submissions in accordance with whether the manuscript: 1) states clearly a set of objectives with predefined eligibility criteria, 2) provides an explicit, reproducible methodology, 3) uses a systematic search that attempts to identify all studies that would meet the eligibility criteria, 4) offers an assessment of the validity of the findings of the included studies (eg, through the assessment of risk of bias), 5) provides a systematic presentation and synthesis of the characteristics and findings of the included studies, 6) follows the relevant [Equator Network guideline](#) for systematic reviews and meta-analyses, and 7) uses plain language and statistical presentation relevant to a broad range of public health professionals.

Public health evaluation

Public health evaluation manuscripts report on evaluations conducted to determine whether a public health program or practice has met its goals. You should follow the relevant [Equator Network reporting guideline](#) for the study type.

2.1 Number of words, tables, and figures

3000-word limit, 250-word structured abstract (objectives, methods, results, and conclusions), no more than 5 tables or figures

2.2 Peer reviewed

Yes

2.3 Manuscript format

Structured abstract, introduction, description of the program being evaluated, purpose of the evaluation (including evaluation criteria), methods, results, lessons learned, references, and tables/figures

2.4 Review criteria

The editors will review public health evaluation submissions in accordance with whether the manuscript: 1) presents actionable results derived from original work, 2) offers models of practice that can be replicated by others, 3) uses sound scientific methods of evaluation, including the appropriate use of statistics, 4) reports on recent data (less than 5 years old preferred), 5) follows the relevant [Equator Network guideline](#) for the study type, and 6) uses plain language and statistical presentation relevant to a broad range of public health professionals.

3. Public health methodology

Public health methodology manuscripts describe new or proposed applications of epidemiologic or other scientific methods (eg, surveillance, participatory research) to public health problems. You should follow the relevant [Equator Network reporting guideline](#) for the study type.

3.1 Number of words, tables, and figures

3000-word limit, 250-word structured abstract (objectives, materials and methods, results, and practice implications), no more than 5 tables or figures

3.2 Peer reviewed

Yes

3.3 Manuscript format

Structured abstract, introduction, materials and methods, results, discussion, practice implications, references, and tables/figures

3.4 Review criteria

The editors review public health methodology submissions in accordance with whether the manuscript: 1) uses methods relevant to the theory and practice of epidemiology and other public health sciences, 2) includes applications and examples with original data to illustrate methodology, 3) describes how the method can be used in practice and the public health implications of its use, 4) follows the relevant [Equator Network guideline](#) for the study type, and 5) uses plain language and statistical presentation relevant to a broad range of public health professionals.

4. Case study

Case studies describe an innovative public health program or initiative, its current status, documented outcomes, and lessons learned.

4.1 Number of words, tables, and figures

2,500-word limit, 250-word unstructured abstract, no more than 3 tables or figures

4.2 Peer reviewed

Yes

4.3 Manuscript format

Unstructured abstract, introduction, purpose, methods, outcomes, lessons learned, references, and tables/figures.

4.4 Review criteria

The editors will review case study submissions in accordance with whether the manuscript: 1) presents actionable results derived from original work, 2) offers models of practice that can be replicated by others, 3) reports on recent data (less than 5 years old preferred), 4) describes lessons learned clearly, and 5) uses plain language and statistical presentation relevant to a broad range of public health professionals.

5. Brief report

The journal occasionally publishes brief reports of preliminary or exploratory research results. Authors who wish to submit a brief report should first contact the PHR Editorial Office. Invited or approved submissions should note the Editorial Office's pre-approval in the cover letter at the time of submission.

5.1 Number of words, tables, and figures

1,500-word limit, 150-word unstructured abstract, and no more than two tables or figures.

5.2 Peer reviewed

Yes

5.3 Manuscript format

Unstructured Abstract, Introduction, Methods, Results, Discussion, References, and Tables/Figures.

5.4 Review criteria

The editors review brief reports submissions in accordance with whether the manuscript: 1) uses sound scientific methods, 2) includes appropriate use of statistics, 3) reports on recent data (less than 5 years old preferred), and 4) uses plain language relevant to a broad range of public health professionals.

6. Reports and recommendations

Reports and recommendations manuscripts are written by standards-setting or recommendation-making entities to present public health expert consensus, formed policy, or recommendations for practice. These manuscripts have been previously vetted by the standards-setting or recommendation-making entity.

6.1 Number of words, tables, and figures

The word limit is negotiated with the editors. The report includes a 250-word unstructured abstract, no more than 5 tables or figures.

6.2 Peer reviewed

At the discretion of the editor in chief

6.3 Manuscript format

Unstructured abstract, introduction, methods, recommendations (if relevant), public health practice implications, references, and tables/figures

6.4 Review criteria

The editors will review reports and recommendations submissions in accordance with whether the manuscript: 1) presents actionable scientific opinion, standards, or recommendations based on research (may be research of others) or a defined process of expert consensus, 2) offers evidence of thorough vetting by the standards-setting or recommendation-making entity, 3) provides recommendations (if relevant) supported by published science or expert consensus, and 4) uses plain language and statistical presentation relevant to a broad range of public health professionals.

7. Topical review

Topical reviews are narrative summaries of a topic relevant to public health practice, including a comprehensive survey of the topic, often including a review of the existing literature and knowledge base, and an update on the current understanding and state-of-the art of the topic.

7.1 Number of words, tables, and figures

3000-word limit, 250-word unstructured abstract, no more than 5 tables or figures

7.2 Peer reviewed

Yes

7.3 Manuscript format

Unstructured abstract, introduction, methods (if relevant), discussion, public health implications, references, and tables/figures

7.4 Review criteria

The editors review topical review submissions in accordance with whether the manuscript: 1) provides a comprehensive presentation and synthesis of the topic and, if included, a review of the existing literature and knowledge base, 2) leaves the reader with an update on the current understanding and state-of-the art of the topic, and 3) uses plain language and statistical presentation relevant to a broad range of public health professionals.

8. Commentary

By invitation, inquiries welcome. Authors who wish to submit a commentary should first contact the PHR Editorial Office. Invited or approved submissions should note the Editorial Office's pre-approval in the cover letter at the time of submission.

Commentaries are opinion essays that initiate or focus discussion on a current or emerging public health issue, important scientific and programmatic development, new technology, policy issue, or current scientific debate. Commentaries may take a personal viewpoint on a topic, if appropriate.

8.1 Number of words, tables, and figures

2500-word limit and no more than 2 tables or figures

8.2 Peer reviewed

At the discretion of the editor in chief

8.3 Manuscript format

Unstructured format including introduction, discussion, public health implications, references, and tables/figures

8.4 Review criteria

The editors will review commentary submissions in accordance with whether the manuscript: 1) proposes a viewpoint or argument that is can enlighten or improve public health practice, and 2) uses plain language and statistical presentation relevant to a broad range of public health professionals.

9. Editorial

Editorials are submitted by invitation of the editors.

10. Executive perspective

These articles are perspectives on public health issues of the day written by executives of the US Department of Health and Human Services. They are submitted by invitation of the editors.

11. Letter to the editor

Letters to the editor are of 2 types: 1) those that comment on manuscripts published in the journal within the past 8 weeks, and 2) those that make a brief observation or comment upon a topic within the scope of the journal.

11.1 Number of words, tables, and figures

500-word limit. Tables and figures are allowed if relevant to the comments.

11.2 Peer reviewed

No. The authors of the originally published manuscript will be given an opportunity to reply.

11.3 Manuscript format

Unstructured. Limit of 5 references, including the article being commented upon.

11.4 Review criteria

At the discretion of the editors

Special Departments of the Journal

Law and the Public's Health

Law and the Public's Health appears regularly in PHR. Articles address issues of high importance to public health law, policy, and practice in a succinct style (approximately 2000 words). PHR encourages submissions by legal scholars and practitioners. Potential authors should consult previously published articles to determine likely topics and proper formatting. Cover letters should indicate that the submission is intended for Law and the Public's Health. Potential authors with questions about the suitability of a submission should contact the PHR Editorial Office.

From the Schools and Programs of Public Health

The journal welcomes contributions to From the Schools and Programs of Public Health, a department of the journal that specializes in articles on schools and programs of public health, the theory and practice of public health education, and all the issues that are faced by schools and programs of public health, their faculties, and their students. Submissions may be of any manuscript type. Submissions are subjected to peer review according to the manuscript type.

Writing for Public Health

The journal has instituted a new department devoted to writing for public health. The journal welcomes contributions on all aspects of expertise in writing for the field of public health, such as observations on writing quality and quantity at public health agencies and schools of public health, approaches to teaching writing, genres of writing for public health (eg, scholarly and non-scholarly, writing for lay audiences,

advocacy), lessons learned from other spheres where writing is taught (eg, undergraduate institutions), and related topics, such as the relationship of writing to critical thinking in public health. Submissions may be of any manuscript type. Submissions are subjected to peer review according to the manuscript type.

Public Health Chronicles

Public Health Chronicles is devoted to articles on the history of public health. This department appeared in the journal for many years, was reinstated in 2018, and is edited by David Rosner, PhD, Professor of Sociomedical Sciences, and Co-Director, Center for the History & Ethics of Public Health at the Mailman School of Public Health, Columbia University. The submitted format may be any of the articles types described in these instructions or may be accepted as a special article with a flexible format. PHR encourages submissions by public health and history scholars and practitioners. Potential authors should consult previously published articles to determine likely topics and proper formatting. Cover letters should indicate that the submission is intended for Public Health Chronicles. Potential contributors with questions about the suitability of a submission should contact the PHR Editorial Office.

Ethical Dimensions of Public Health

Ethical Dimensions of Public Health welcomes high-quality submissions focused on the ethical practice of public health. We are interested in articles about practical ethics in all public health settings—local, state, national, and global. Articles can be normative or empirical, and might report ethical dimensions of a particularly challenging situation and its resolution, examine teaching and training ethics across all public health personnel and students, address research ethics associated with epidemiological research, evaluate ethics decision making in public health, or address new or emerging ethical issues related to the practice of public health. We encourage broad ethics thinking related to the equity and justice foundations of public health or any of the essential public health services. Submission format may include any of the manuscript types described in instructions for contributors. Please make sure to follow these closely for any special requirements for particular article types. For example, brief report submissions require pre-approval by PHR Editorial Office. Submissions are peer reviewed in accordance with the manuscript type.

Supplemental Issues

In addition to six regular issues per year, PHR produces supplemental issues approximately 2-6 times per year. These issues focus on specific topics, nominated by the supplement organizers/guest editors, that are deemed by PHR editors to be within the scope of the journal and of considerable interest to the journal's readership. To

propose a supplemental issue, prospective organizers should contact the PHR Editorial Office.

Generally, these instructions apply to procedures for submitting manuscripts to the PHR bimonthly issue. Submission to a PHR supplement issue may follow a separate process. Contributors who wish to submit a manuscript to a supplement issue should first contact the PHR Editorial Office.

Clinical trial registration

The journal conforms to the [ICMJE requirement](#) that clinical trials are registered in a [WHO-approved public trials registry](#) at or before the time of first participant enrollment as a condition of consideration for publication. The trial registry name and URL, and registration number must be included at the end of the abstract.

Reporting guidelines

Your manuscript **must** follow the relevant [EQUATOR Network reporting guidelines](#), depending on the type of study. The [EQUATOR wizard](#) can help identify the appropriate guideline. You will need to upload the appropriate checklist with your submission.

Other resources can be found at [NLM's Research Reporting Guidelines and Initiatives](#).

If your research involves animals, you will be asked to confirm that you have carefully read and adhered to the [ARRIVE guidelines](#).

Formatting your manuscript

Accepted file types

The preferred format for your manuscript is Word. You do not need to follow a template, but please ensure your heading levels are clear, and the sections clearly defined.

Your manuscript should use page numbers, continuous line numbering, and 1.5-line spacing. Manuscripts should be formatted with .75-inch margins on all sides and use 12-point Times New Roman font.

The LaTeX files are also accepted. A LaTeX template is available on the [Sage Journal Author Gateway](#).

Your article title, keywords, and abstract all contribute to its position in search engine results, directly affecting the number of people who see your work. For

details of what you can do to influence this, visit [How to help readers find your article online](#).

Title

Your manuscript's title should be concise, descriptive, unambiguous, accurate, and reflect the precise contents of the manuscript. A descriptive title that includes the topic of the manuscript makes an article more findable in the major indexing services.

Abstract

Please include an abstract between the title and main body of your manuscript that concisely states the purpose of the research, major findings, and conclusions. Submissions that do not meet these requirements will not be considered.

Original research, Public health evaluation, Public health methodology: 250-word structured abstract (objectives, methods, results, and conclusions)

Case study, Reports and recommendations, Topical review: 250-word unstructured abstract

Brief report: 150-word unstructured abstract

Commentary, Letter to the editor: Abstract is not required.

For clinical trials, the trial registry name and URL, and registration number must be included at the end of the abstract.

PHR strives to make its content maximally accessible to its readers. As part of PHR publisher's author services, the journal offers American Sign Language translation of the abstracts of accepted publications. Contact PHR's Editorial Office for additional details.

Keywords

Please include a minimum of 3-5 keywords, listed after the abstract. Keywords should be as specific as possible to the research topic.

Artwork, figures, and other graphics

For guidance on the preparation of illustrations, pictures, and graphs in electronic format, please read Sage's [artwork guidelines](#).

Figures supplied in color will appear in color online regardless of whether or not these illustrations are reproduced in color in the printed version. If you have requested color

reproduction in the print version, we will advise you of the costs on receipt of your accepted article.

Please ensure that you have obtained any necessary permission from copyright holders for reproducing any illustrations, tables, figures, or lengthy quotations previously published elsewhere. For further information including guidance on fair dealing for criticism and review, please see the [Frequently Asked Questions page](#) on the Sage Journal Author Gateway.

Acknowledgments

If you are including an Acknowledgements section, this will be published at the end of your article. The Acknowledgments section should include all contributors who do not meet the criteria for authorship. Per [ICMJE recommendations](#), it is best practice to obtain consent from non-author contributors who you are acknowledging in your manuscript.

Writing assistance and third party submissions: if you have received any writing or editing assistance from a third-party, for example a specialist communications company, this must be clearly stated in the Acknowledgements section and in the covering letter. Please see the [Sage Author Gateway](#) for what information to include in your Acknowledgements section. If your submission is being made on your behalf by someone who is not listed as an author, for example the third-party who provided writing/editing assistance, you must state this in the Acknowledgements and also in your covering letter. **Please note that the journal editor reserves the right to not consider submissions made by a third party rather than by the author/s themselves.**

Author contributions

You will be asked to list the contribution of each author as part of the submission process. Please include the Author Contributions heading within your submission after the Acknowledgements section. The information you give on submission will then show under the Author Contributions heading later at the proofing stage. If a coauthor of an article submitted to the journal is deceased, this should be recognized in the acknowledgements.

Statements and declarations

Please include a section with the heading 'Statements and Declarations' at the end of your submitted article, after the Acknowledgements section [and Author Contributions section if applicable] including each of the sub-headings listed below. If a declaration is not applicable to your submission, you must still include the heading and state 'Not

applicable' underneath. Please note that you may be asked to justify why a declaration was not applicable to your submission by the Editorial Office.

Ethical considerations

Please include your ethics approval statements under this heading, even if you have already included ethics approval information in your methods section. If ethical approval was not required, you need to explicitly state this. You can find information on what to say in your ethical statements as well as example statements on our [Publication ethics and research integrity policies page](#).

All papers reporting studies involving human participants, human data or human tissue must state that the relevant Ethics Committee or Institutional Review Board approved the study, or waived the requirement for approval, providing the full name and institution of the review committee in addition to the approval number. If applicable, please also include this information in the Methods section of your manuscript.

Consent to participate

Please include any participant consent information under this heading and state whether informed consent to participate was written or verbal. If the requirement for informed consent to participate has been waived by the relevant Ethics Committee or Institutional Review Board (i.e. where it has been deemed that consent would be impossible or impracticable to obtain), please state this. If this is not applicable to your manuscript, please state 'Not applicable' in this section. More information and example statements can be found on our [Publication ethics and research integrity policies page](#).

Consent for publication

Submissions containing any data from an individual person (including individual details, images or videos) must include a statement confirming that informed consent for publication was provided by the participant(s) or a legally authorized representative. Non-essential identifying details should be omitted. Please do not submit the participant's actual written informed consent with your article, as this in itself breaches the patient's confidentiality. The Journal requests that you confirm to us, in writing, that you have obtained written informed consent to publish but the written consent itself should be held by the authors/investigators themselves, for example in a patient's hospital record. The confirmatory letter may be uploaded with your submission as a separate file in addition to the statement confirming that

consent to publish was obtained within the manuscript text. If this is not applicable to your manuscript, please state 'Not applicable' in this section.

Declaration of conflicting interest

The journal requires a declaration of conflicting interests from all authors so that a statement can be included in your article. For guidance on conflict of interest statements, see our [policy on conflicting interest declarations](#) and the [ICMJE recommendations](#).

If no conflict exists, your statement should read: 'The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article'.

Funding statement

All articles need to include a funding statement, under a separate heading, **even if you did not receive funding**. You'll find guidance and examples on our [Funding](#) page.

Additional Guidance and Requirements for PHR submissions

PHR also follows the guidelines of the AMA Manual of Style, 11th Edition on ethical approval of studies (Section [5.8.1](#), Ethical Review of Studies and Informed Consent), which states that "all reports of research involving human participants should include indication of ethical review and approval or exemption or exclusion based on institutional policies or regulations."

For articles that involve human participants or data on humans, authors must include the name of the IRB and its review number, indicating determination of nonresearch, exempt status, or IRB approval. For example, "This study received a non-human subjects research determination by the University of State's IRB, #23-2032," or "This study was approved by the University of State's IRB, # 23-2034."

Authors should not make their own determinations of nonresearch or exempt status; these determinations should be made by the institution's human research protection program or IRB office or rely on these bodies' policies. If IRB approval was not required, please include the name of the institution, and explain why this was exempted under their policies. In addition, authors must state in the Methods section whether participants provided informed consent and whether the consent was written or verbal.

PHR is not responsible for the accuracy of IRB statements. It merely requires that the article include a statement consistent with the ethical guidelines cited previously. PHR

recommends that authors discuss their IRB statement requirements with their institutions' officials.

Include the IRB statement at the end of the first paragraph of the Methods section. Provide the full name and institution of the review committee, in addition to the approval number, if applicable.

Here are examples of strong IRB statements:

- This project was reviewed and approved by the Washington University in St Louis Institutional Review Board and CDC (IRB # 2020-466 and 20-1789), and its conduct was consistent with applicable federal law and CDC policy (eg, 45 CFR part 46; 21 CFR part 56; 42 USC §241[d]; 5 USC §552a; 44 USC §3501 et seq).
- The Mount Sinai Hospital Medical Center Institutional Review Board determined this study was exempt because it used publicly available data without personal identifiers (IRB # 23-014).
- The UW Institutional Review Board considered this study not human subjects research because of the lack of interaction with or collection of identifiable information about human subjects and because it was conducted as part of public health surveillance (IRB # 2022-3554).
- This project did not involve human data or participants; therefore, IRB assessment was not necessary per the policy of the Office of Science and Medicine at the US Department of Health and Human Services, Office of the Assistant Secretary for Health.

Here are examples of weak IRB statements:

- We did not seek institutional review board approval because we used deidentified data.
- We did not seek institutional review board approval for this study because our research was a public health activity and did not involve human subjects.
- As a secondary data analysis of publicly available, deidentified data, this study was exempt from institutional review board approval.
- This public health evaluation does not include people or contain any data about people.

Data availability

The Journal is committed to facilitating openness, transparency and reproducibility of research, and has the following research data sharing policy. For more information, including FAQs please [visit the Sage Research Data policy pages](#).

Subject to appropriate ethical and legal considerations, authors are encouraged to:

- Share your research data in a relevant public data repository
- Include a data availability statement linking to your data. If it is not possible to share your data, use the statement to confirm why it cannot be shared.
- Cite this data in your research

Reference style and citations

The journal follows the AMA Manual of Style. [View the AMA Manual of Style](#) to ensure your manuscript conforms.

Every in-text citation must have a corresponding citation in the reference list and vice versa. Corresponding citations must have identical spelling and year.

Authors should update any references to preprints when a peer reviewed version is made available, to cite the published research. Citations to preprints are otherwise discouraged.

PHR does not limit the number of references. References should follow the various formats detailed in Chapter 3 (pages 59-111) of the 11th edition of the AMA Manual of Style: A Guide for Authors and Editors. The manual is available in print and online (<https://www.amamanualofstyle.com>).

Before submitting your manuscript, please strip out all coding generated by bibliographic programs (eg, Endnote), and be sure to add DOIs (digital object identifiers) at the end of journal references, when applicable. Do not include in the list of references material that has been submitted for publication but not yet accepted or unpublished data and reports; this information should be noted as a personal communication in parentheses in text where mentioned.

The AMA Manual of Style gives detailed guidance on—and hundreds of examples of—how to correctly format references. For your convenience, here are examples of the 11 most common types of references cited:

Journal Article

Maness SB, Merrell L, Thompson EL, Griner SB, Line N, Wheldon C. Social determinants of health and health disparities: COVID-19 exposures and mortality among African American people in the United States. *Public Health Rep.* 2021;136(1):18-22.
doi:[10.1177/0033354920969169](https://doi.org/10.1177/0033354920969169)

Entire Book

Sarwark JF, LaBella Cr, eds. *Pediatric Orthopaedics and Sports Injuries: A Quick Reference Guide*. 3rd ed. American Academy of Pediatrics; 2021.

Chapter in a Book

Fischer L, Frank P. References. In: Christiansen SL, Iverson C, Flanagan A, et al. *AMA Manual of Style: A Guide for Authors and Editors*. 11th ed. American Medical

Association; 2020:59-111.

Website

Promoting social and emotional health. Centers for Disease Control and Prevention. Updated February 2, 2021. Accessed January 28, 2022. <https://www.cdc.gov/populationhealth/well-being/index.htm>

Government or Agency Report (nonelectronic)

Johnston LD, O'Malley PM, Bachman JG, Schulenberg JE, Miech RA. Monitoring the Future: National Survey Results on Drug Use, 1975-2014: College Students and Adults Ages 19-55. Vol 2. National Institute on Drug Abuse, US Department of Health and Human Services; 2014.

Government or Organization Reports (electronic)

US Department of Health and Human Services. Protection of human subjects. 45 CFR 46. Revised March 10, 2021. Accessed January 28, 2022. <https://www.hhs.gov/ohrp/regulations-and-policy/regulations/revised-common-rule-regulatory-text/index.html>

News Publication

Shashank B. The world surpasses 10 billion vaccine doses administered, but gaps persist in who gets the shots. The New York Times. January 28, 2022. Accessed January 28, 2022. <https://www.nytimes.com/2022/01/28/world/covid-vaccines-10-billion-doses.html>

Blog

Campbell KP. Updated guidance on reporting race and ethnicity: let's start with the why. AMA Style Insider blog. November 15, 2021. Accessed January 28, 2022. <https://amastyleinsider.com/2021/11/15/updated-guidance-on-reporting-race-and-ethnicity-lets-start-with-the-why>

Software

When mentioning software (eg, software used for statistical analysis), there is no need to cite it in the reference list. It can be cited in text, as in the following example: "We used SAS version 9.4 (SAS Institute Inc) to conduct all analyses." Include the name of the program, the version, and, in parentheses, the name of the software creator or manufacturer.

Poster, Paper, Abstract Presented at a Conference

Morales M, Zhou X. Health practices of immigrant women: indigenous knowledge in an urban environment. Paper presented at: 78th Association for Information Science and Technology Annual Meeting; November 6-10, 2015; St Louis, MO. Accessed March 15, 2016. <https://dl.acm.org/doi/10.5555/2857070.2857108>

Personal Communication

Do not include in the list of references material that has been submitted for publication but not yet accepted; this information should be noted as personal communication in the following format: “The Springfield Department of Public Health confirmed that 202 cases of influenza occurred during the study period (A. B. Smith, PhD, Springfield Department of Public Health, email communication, January 28, 2022).”

Supplemental material

This Journal can host additional materials online (e.g. datasets, podcasts, videos, images etc.) alongside the full text of the article. Your supplemental material must be one of our accepted file types. For that list and more information please refer to our [guidelines on submitting supplemental files](#).

English language editing services

Authors seeking assistance with English language editing, translation, or figure and manuscript formatting to fit the journal’s specifications should consider using Sage Author Services. Visit [Sage Author Services](#) for further information.

Submitting your manuscript

As part of the submission process you will need to confirm that this is your original work, that you have the rights in the work, that this is for first publication in this Journal, that it is not being considered for/has not already been published elsewhere, and that you have obtained and can supply all necessary permissions for the reproduction of any copyright works not owned by you.

Please see our [guidelines on prior publication](#) and note that the journal may accept submissions of manuscripts that have been posted on preprint servers.

Preprints

The journal will consider submissions of manuscripts that have been posted on preprint servers.

Please enter the preprint DOI in the designated field when submitting your manuscript. We advise that you inform the Journal Editorial office about your posted preprint at submission.

Note that you should **not** post an updated version of your manuscript on a preprint server while it is being peer reviewed.

[Learn more about our preprint policy.](#)

Submission site

[Submit your manuscript online via Sage Track.](#)

IMPORTANT: Please check whether you already have an account in Sage Track before trying to create a new one. If you have reviewed or authored for the journal in the past year it is likely that you will have had an account created. For further guidance on submitting your manuscript online please visit [ScholarOne Online Help](#).

Manuscripts should only be submitted with the consent of all contributing authors. The individual responsible for submitting the manuscript should carefully check that all those whose work contributed to the manuscript are listed as authors.

Ensure you upload all relevant manuscript files, including any additional supplemental files (including reporting guidelines where relevant).

Authorship

Please [view our authorship policies](#), which includes information on criteria for authorship, who should be the corresponding author and more.

Please note that AI chatbots, for example ChatGPT, should not be listed as authors. For more information see the [policy on Use of ChatGPT and generative AI tools](#).

Files

PHR style

PHR follows the AMA Manual, available at <http://www.amamanualofstyle.com>. You should consult the AMA Manual to ensure that all components of your manuscript, and its style, are in accordance with PHR and AMA style. As a federal publication, PHR also strives to comply with the principles of the [federal plain language writing](#)

[guidelines](#), which promote the use of language that is “clear, concise, and well-organized.”

Four style points that PHR contributors often overlook are: 1) the use of the passive voice, 2) the expression of proportions, 3) the use of abbreviations, and 4) the use of the correct verb tense. With regard to use of the passive voice, Section 7.4.1 of the AMA Manual dictates that “[i]n general, authors should use the active voice, except in instances in which the actor is unknown or the interest focuses on what is acted on.”

With regard to the expression of proportions, Section 18.7.3 of the AMA Manual generally requires presentation of numerators and denominators when showing proportions and percentages: “Whenever possible, proportions and percentages should be accompanied by the actual numerator (n) and denominator (d) from which they were derived.”

Regarding the use of abbreviations, Section 13.0 of the AMA Manual emphasizes that “overuse of abbreviations can be confusing and ambiguous for readers—especially those whose first language is not English or those outside a specific specialty or discipline.” In accordance with that style, PHR prefers to minimize the use of abbreviations.

Regarding correct verb tense, Section 7.4.3 of the AMA Manual provides guidance. Most manuscripts report on analyses and observations made in the past, so the past tense is the proper tense to use.

In addition, PHR: 1) prefers the use of the word, “person” over “individual,” 2) does not use the word, “case,” to refer to a person. A case is not a person, but a case occurs in a person, 3) in accordance with the AMA Manual, PHR prefers that the results section of abstracts contain specific numerical results, and 4) in general, PHR does not use pie charts.

Cover letter

Include a cover letter that contains: 1) a description of the article and brief explanation of the findings, 2) brief descriptions of what is already known about the topic or research question, how the findings of the article will add to, or fill a gap in, the literature on the topic, and the implications of the findings for public health practice, 3) a statement on how the research or commentary is relevant to the mission and scope of PHR, 4) a statement that the material has not been published nor is being considered for publication elsewhere, 5) a statement indicating institutional review board determination (approval or waiver) for all studies involving human subjects research, 6) a statement regarding any potential conflicts of interest for each author, 7) a disclosure noting any similar or related work submitted or published elsewhere

Components of your manuscript

1. *Title page*

Your manuscript should begin with a title page, which should include the following: 1) a title (short and descriptive), 2) keywords, 3) the full names of all authors, including their graduate degrees (when the number of authors exceeds 10, the cover letter should contain a justification for this), 4) all authors' institutional affiliations and job titles during the course of the research (and current affiliation and title for corresponding author if different), 5) the name, advanced degrees, affiliation, street address, telephone number, and email address of the corresponding author, and 6) the total word count of the text, exclusive of abstract, tables, and references, and the number of charts, tables, and figures.

2. *Abstract*

Consult the journal's article types to determine whether an abstract is necessary, how it should be structured, and its length.

3. *Keywords*

Provide 3 to 5 keywords that represent the key topics presented in the article.

4. *References*

Please see the references section above for formatting requirements and examples.

5. *Tables and figures*

Tables and figures should be placed in the manuscript after the references, each on its own separate page in portrait orientation. Tables and figures in landscape orientation will be returned to the author for revision. See the information above on manuscript types to determine limits on the number of tables and figures.

- Titles: PHR follows the AMA Manual of Style. In addition, all tables and figures should stand on their own. That is, a reader who never sees the text of the article should be able to understand the sense of the material being presented. The title should state the “what, where, and when” of the material fully (e.g., “Demographic characteristics of patients who were offered, accepted, and declined HIV testing at an urban health center in Philadelphia, Pennsylvania, 2012-2014”). Footnotes should be added to explain all notations and acronyms used in the table or figure. If the table reports data from a source, the unabbreviated name of the source should be included in the title. The time period covered by the data reported should always be included.
- For tables, “each piece of data needs to be contained in its own cell in the table. Avoid creating tables using spaces or tabs” (AMA Manual, section 4.1.10).

- Format for images: TIFF, JPEG files: Common format for pictures (containing no text or graphs). EPS: Preferred format for graphs and line art (retains quality when enlarging or zooming in). For all graphs and charts created in Excel, please submit the original Excel files. These files should include the actual data used to create the graphs or charts. Please avoid inserting Excel graphs or charts in Word documents, especially when these graphs or charts are no longer linked to the data source.
- Placement: Please add a placeholder note in the running text (i.e., “[insert Figure 1.]”)
- Resolution: Rasterized based files (i.e., with .tiff or .jpeg extension) require a resolution of at least 300 dpi (dots per inch). Line art should be supplied with a minimum resolution of 800 dpi.
- Color: Figures can be printed in color for a fee. Otherwise, images supplied in color will be published in color online and black and white in print. Therefore, it is important that you supply images that are comprehensible in black and white or grayscale. Captions should not use words indicating color.
- Dimension: Check that the artworks supplied match or exceed the dimensions of the journal. Images cannot be scaled up after origination.
- Fonts: The lettering used in the artwork should not vary too much in size and type (usually sans serif font as a default).

Hypothesis, study design, and methods

Contributors should follow the standards of the AMA Manual regarding the presentation of study design, rationale, and statistical analysis. As stated in the AMA Manual, Section 19.1, “Each portion of the manuscript should facilitate the reader’s understanding of why and how the study was done and (1) clearly state a hypothesis or study question, (2) show that the methods adequately answer the research question and that the data were appropriately analyzed, (3) convince the reader that the results are valid and credible, and (4) place the implications of the research in context and show that the study limitations do not preclude interpretation of the results.” Section 19.1.2 states, “In the Introduction, briefly review the literature that documents the nature and importance of the research and rationale for the study. An extended full literature review belongs in the Discussion section. The study hypothesis or research question should be clearly stated in the last sentence(s) of the Introduction before the ‘Methods’ section, preferably including the word hypothesis (or question).”

As stated in the AMA Manual, Section 19.1.3, the Methods section of the manuscript should, “include enough information to enable a knowledgeable reader to replicate the study and, given the original data, verify the reported results.” The Methods section should include certain components listed in Section 19.1.13 that are applicable to the study design.

Expression of statistics

Contributors should review the standards of the AMA Manual to determine proper presentation of statistics. The PHR editors also have found that many errors can be avoided by consulting: Lang TA, Secic M. How to Report Statistics in Medicine. 2nd ed. Philadelphia, PA: ACP; 2006. Another useful reference is the [SAMPL Guidelines](#).

PHR seeks to ensure that general epidemiologists are able to understand the presentation of most statistics in the journal. Contributors should strive to present statistics in a way that can be understood by readers who are general epidemiologists. If more advanced statistical presentations are needed, contributors should explain the method used or refer readers to published references. For example, for many studies, the presentation of simple descriptive results and measures of association (eg, prevalence ratios) should precede the presentation of statistical results intended to control for confounding or test hypotheses.

Authors often have difficulty with the expression of P values. Contributors should take care to avoid the “P value fallacy” and follow the conventions for P values listed in the AMA Manual, Section 19.1 and 19.5. For example, all hypothesis tests should be presented in the text, tables, and figures so as to make clear to the reader what hypothesis is being tested and what groups are being compared. For the presentation of survey data, estimated prevalences generally should be accompanied by a measure of precision, such as the 95% confidence interval.

Contributors should be aware that, according to the AMA Manual, “It is always preferable for results to be presented in terms of point estimates and confidence intervals, which convey more information than do P values alone.” Contributors should be particularly careful to note that a result that fails to meet a criterion for statistical significance (such as $P < 0.05$) does not allow a conclusion that there is “no effect,” “no difference” in outcomes, or “no association” between an exposure or characteristic and an outcome. Inferences should be carefully reasoned and not based solely on statistical hypothesis testing.

Supplemental material

To conserve the use of print pages and editorial resources, PHR does not include supplemental materials in the print version of the article. However, the journal will consider hosting online-only materials (eg, tables, figures, datasets, derivation of complex equations, podcasts, videos, images) when the main article has insufficient space and the materials are deemed to be essential or add value to the main text. Decisions about whether to publish online-only supplemental material files will be made by journal editors as part of the article review process.

If accepted for publication, supplemental materials will be published online only, not in the print version of the article. Although these materials will be subject to peer review, they will not be edited by PHR's scientific editors during the editing and production process (ie, they will not be checked for accuracy, formatted according to the AMA Manual of Style, typeset, or proofread). We do, however, request that authors follow the same formatting guidelines outlined for main text and consult the AMA Manual of Style for presentation of text, tables, and figures. All supplemental materials should be submitted in a single Word file at the same time the main text is submitted. Authors assume responsibility for the scientific accuracy and file functionality of these materials. A disclaimer will be displayed to this effect on supplemental materials: "The authors have provided these supplemental materials to give readers additional information about their work. These materials have not been edited or formatted by PHR's scientific editors and, thus, may not conform to the guidelines of the AMA Manual of Style, 11th Edition."

Authors who wish to include supplemental materials should cite and link them at the same level as a table or figure that appears in the main text. They should be numbered consecutively in the order in which they are cited in the text: eTable 1 in the Supplement, eTable 2 in the Supplement, eFigure 1 in the Supplement, eFigure 2 in the Supplement, and so on.

Another option for authors with supplemental materials is to include a short sentence in the Acknowledgments that indicates supplemental materials are available elsewhere. For example:

- Additional Information: The original dataset is available from the New Jersey State Department of Health.
- Additional Information: A complete list of documents surveyed is available on request from the corresponding author.
- Additional Information: These documents are also available online [insert URL].

Appendices

PHR generally does not include appendices. If an appendix is accepted for publication, it will be edited and formatted by PHR's scientific editors and published in the print version of the article. The journal follows the guidelines of the AMA Manual of Style, 11th Edition: "If the material is worthy of inclusion because it contains important information, it could be considered for online supplemental content."

Other information required for submission

- ORCID ID of the submitting author.
 - It is strongly encouraged that all co-authors ensure their ORCID IDs are linked to their accounts in the submission system prior to article acceptance, as this is the only way

to have their ORCID ID present on the published article. **ORCID IDs cannot be added to manuscripts after acceptance/publication.** Please note that each co-author must log in to the submission system to add their own ORCID ID to their account. To add an ORCID ID, edit your account, click the link when prompted, and sign into your ORCID account to validate your ID. You will then be redirected back to the submission system and your ORCID ID will become part of your accepted publication's metadata.

- [Please create an ORCID ID](#) if you do not already have one or visit our [ORCID homepage](#) to learn more.
- Complete list of authors, with their institutional affiliations.
 - The author information you enter at submission must exactly match what is included on your manuscript and/or title page, including full names, academic affiliations, and corresponding author contact details.
 - **The listed affiliation should be the institution where the research was conducted.** If an author has moved to a new institution since completing the research, the new affiliation can be included in a note at the end of the manuscript.
 - **All listed authors must meet the criteria for authorship (above).**
 - **All persons eligible for authorship must be included at the time of submission.**
 - All authors must have given consent for the manuscript to be submitted in its current form.
- Keywords: During submission, you may be asked to select or enter keywords for your manuscript. These keywords are used to match appropriate reviewers to your manuscript.
- The number of figures, tables, and words in your manuscript.
- Funder information: Name, grant/award number.
- You may be required to enter your declaration of conflicting interest as part of the submission process, in addition to listing it on your manuscript and/or title page. Please have it on hand.
- If you have posted your manuscript to a preprint server, you will be asked to supply the DOI (this does not prohibit submission, but no changes should be made to the preprint version while your manuscript is under evaluation in this journal). Please see our guidelines on [prior publication](#). If the article is accepted for publication, the author may re-use their work according to the journal's author archiving policy. If your manuscript is accepted, you must include a link in your preprint to the final version of your published article.

Peer review policy

The following summary describes the peer review process for this journal:

Identity transparency: Single-anonymized

Reviewer interacts with: Editor

Review information published: None

Your manuscript will undergo an initial evaluation. If it does not conform to the requirements laid out in these guidelines, it will be returned to you for amendments

prior to peer review. Manuscripts may be desk rejected without peer review at this point if they are out of scope for the journal or otherwise unsuitable.

After passing the initial evaluation, your manuscript will then be peer reviewed. You can log in at any time to check the status of your manuscript. We will notify you when a decision has been reached.

The journal operates a conventional single-anonymized reviewing policy in which the reviewer's name is always concealed from the submitting author. Two or more independent reviews are required for a manuscript to reach a Revise or Accept decision.

To ensure the integrity of the peer review process we assign reviewers and cannot accept author recommendations.

All manuscripts are reviewed as rapidly as possible, while maintaining rigor. Reviewers make comments to the author and recommendations to the Editor who then makes the final decision on all manuscripts, including those appearing in a special issue or special collection. The Editor or members of the Editorial Board may occasionally submit their own manuscripts for possible publication in the Journal. In these cases, the peer review process will be managed by alternative members of the Board and the submitting Editor/Board member will have no involvement in the decision-making process.

As a COPE member we engage with multiple forms of post-publication discussion in line with wider guidance from Sage: [Commentaries, Critiques and Responses](#).

You can view our [complaints and appeals policy](#) here.

[Read Sage's complete peer review policy.](#)

Plagiarism

The journal and Sage take issues of copyright infringement, plagiarism or other breaches of best practice in publication very seriously. [Please read Sage's complete policy on plagiarism and the actions we may take.](#)

After acceptance

 Contributor's Publishing Agreement

Before publication, we require the author as the rights holder to sign a Journal Contributor's Publishing Agreement. Sage's Journal Contributor's Publishing Agreement is an exclusive license agreement which means that the author retains copyright in the work but grants Sage the sole and exclusive right and license to publish for the full legal term of copyright. Exceptions may exist where an assignment of copyright is required or preferred by a proprietor other than Sage. In this case copyright in the work will be assigned from the author to the society. For more information please visit the [Sage Journal Author Gateway](#).

It is a condition of publication in the journal that authors, excluding authors employed by the US government, assign copyright to the Association of Schools and Programs of Public Health (ASPPH). Authors may use their own material in other publications provided PHR is acknowledged as the original place of publication. Material published in the journal may be used, modified, reproduced, and distributed by the US government for government purposes.

Preprints

If your manuscript was posted on a preprint server prior to acceptance, you must include a link in your preprint to the final published version of your published article.

Production

Your Sage Production Editor will keep you informed as to your article's progress throughout the production process. Proofs will be made available to the corresponding author via our editing portal, Sage Edit, or by email, and should be returned promptly to avoid delaying publication. Authors are reminded to check their proofs carefully to confirm that all author information, including names, affiliations, sequence, and contact details are correct, and that Funding and Conflict of Interest statements, if any, are accurate. **This is the final opportunity to make changes to your manuscript. Further corrections will not be possible after publication. Changes to the author list are not permitted at this stage.**

Publication

OnlineFirst publication: This enables us to publish final articles online immediately, without waiting for assignment to a future issue of the Journal. This usually significantly reduces publication lead time. Visit the [Sage Journals help page for more details](#), including how to cite OnlineFirst articles.

Access to your published article: We provide you with online access to your published article. The online access link is provided to the corresponding author for sharing with their co-authors.

Promoting your article

Publication is not the end of the process. Between us, we can ensure that your article is found, read, downloaded and cited as widely as possible. Many of the most effective tactics are those you can do quickly and easily to your network of contacts and peers. Visit the [Promote Your Article](#) page on the Sage Journal Author Gateway for numerous resources to help you promote your work.

Further resources

The Sage Journal Author Gateway has some general advice on [how to get published](#), plus links to further resources. [Sage Author Services](#) also offers authors a variety of ways to improve and enhance your article including English language editing, plagiarism detection, and video abstract and infographic preparation.

If you have any questions about publishing with Sage, please visit the [Sage Journals Solutions Portal](#).

You can view our [complaints and appeals procedure](#).

Claim continuing education credits

PHR offers continuing education (CE) credits towards CPH (Certified in Public Health) degree recertification for authoring a published article. Visit the [PHR CE information page](#) to learn more.

Contact us

You can direct any questions to the journal's editorial office:

Suane Buggy, Managing Editor
Suane.Buggy@hhs.gov

Browse journal

Current issue

OnlineFirst

All issues

Free sample

Collections

Journal information

Journal overview and metrics

Editorial board

Submission guidelines

Reprints

Journal permissions

Subscribe

Recommend to library

Advertising and promotion

Keep up to date



Facebook



X



LinkedIn



YouTube



RSS feed



Email alerts

[View all options](#)

Also from Sage



CQ Library

Sage Data

Elevating debate

Uncovering insight

Sage Business Cases

Shaping futures

Sage Campus

Unleashing potential

Sage Knowledge

Multimedia learning resources

Sage Research Methods

Supercharging research

Sage Video

Streaming knowledge

Technology from Sage

Library digital services

