Journal of
Preventive Medicine & Public Health

Instructions to Authors

General Information

The mission of the *Journal of Preventive Medicine and Public Health (JPMPH)* is to promote research, policy, education, and practice in the field of preventive medicine and public health by publishing papers of high scientific quality. Contributions of original articles, reviews, special articles, brief reports, case reports, perspectives and critical commentaries, letters, methods in the fields of research, and public health debates are welcome. The journal is issued six times a year (the last day of January, March, May, July, September, and November) and the contents of the ***JPMPH*** are indexed in MEDLINE, Emerging Sources Citation Index (ESCI), PubMed, PubMed Central, Scopus, EMBASE, EBSCO, CAS, DOAJ, KoreaMed, KoMCI, CrossRef, and Google Scholar.

Editorial and Publication Policies

Research and Publication Ethics

For the policies on research and publication ethics not stated in the Instructions, Guidelines on Good Publication (http://publicationethics.org/) or Good Publication Practice Guidelines for Medical Journals (http://kamje.or.kr/) can be applied.

Authorship

Authorship credit should be based on: (1) substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data; (2) drafting the article or revising it critically for important intellectual content; (3) final approval of the version to be published; and (4) agreeing to be accountable for all aspects of the work in ensuring that the questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. Those who do not meet all four criteria should be acknowledged as contributors not be authors.

The addition of an author to a manuscript under review is possible only with the editor's approval. Changes in authorship cannot be made after the manuscript is accepted for publication.

If the number of authors is equal to or greater than 2, there should be a list of each author's role in the submitted paper. The description of co-first authors or co-corresponding authors is also accepted if the corresponding author believes that such roles existed in contributing to the manuscript. The authors are obliged to participate in the peer review process for other submitters' manuscripts.

Originality, Plagiarism and Duplicate Publication

Submitted manuscripts must not have been previously published or be under consideration for publication elsewhere. No part of the accepted manuscript should be duplicated in any other scientific journal without the permission of the Editorial Board. Submitted manuscripts are screened for possible plagiarism or duplicate publication by CrossCheck (http://www.ithenticate.com/) upon arrival. If plagiarism or duplicate publication related to the papers of this journal is detected, the manuscripts may be rejected, the authors will be announced in the journal, and their institutions will be informed. There will also be penalties for the authors.

Any part of the accepted manuscript should not be duplicated in any other scientific journal without permission of the Editorial Board, although the figures and tables can be used freely if the original source is verified according to the Creative Commons Attribution License. It is mandatory for all authors to resolve any copyright issues when citing a figure or table from other journal that is not open access.

Secondary Publication

It is possible to republish manuscripts if the manuscripts satisfy the conditions of secondary publication of the International Committee of Medical Journal Editors (ICMJE) Recommendations (http://www.icmje.org/urm_main.html).

Conflict of Interest Statement

The corresponding author must inform the editor of any potential conflicts of interest that could influence the authors' interpretation of the data. Examples of potential conflicts of interest are financial support from or connections to companies, political pressure from interest groups, and academically related issues. In particular, all sources of funding applicable to the study should be explicitly stated.

Statement of Human and Animal Right

Clinical research should be done in accordance of the Ethical Principles for Medical Research Involving Human Subjects, outlined in the Helsinki Declaration (https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/). Clinical studies that do not meet the Helsinki Declaration will not be considered for publication. Human subjects should not be identifiable, such that patients' names, initials, hospital numbers, dates of birth, or other protected health-care information should not be disclosed. For animal subjects, research should be performed based on the National or Institutional Guide for the Care and Use of Laboratory Animals, and the ethical treatment of all experimental animals should be maintained.

Description of Participants

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, the sex of animals or cells, 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). Authors should define how they determined race or ethnicity and justify their relevance.

Statement of Informed Consent and Institutional Review Board Approval

Copies of written informed consent documents should be kept for studies on human subjects. For studies of human subjects or animal subjects, a certificate, agreement, or approval by the institutional review board (IRB) of the author's institution is required. If necessary, the editor or reviewers may request copies of these documents to resolve questions about IRB approval and study conduct.

Process for Managing Research and Publication Misconduct

When the journal faces suspected cases of research and publication misconduct such as redundant (duplicate) publication, plagiarism, fraudulent or fabricated data, changes in authorship, an undisclosed conflict of interest, ethical problems with a submitted manuscript, a reviewer who has appropriated an author's idea or data, complaints against editors, and so on, the resolution process will follow the flowchart provided by the Committee on Publication Ethics (http://publicationethics.org/resources/flowcharts). The discussion and decision on the suspected cases are carried out by the Editorial Board.

Editorial Responsibilities

The Editorial Board will continuously work to monitor and safeguard publication ethics: guidelines for retracting articles; maintenance of the integrity of the academic record; preclusion of business needs from compromising intellectual and ethical standards; publishing corrections, clarifications, retractions, and apologies when needed; and excluding plagiarism and fraudulent data. The editors maintain the following responsibilities: responsibility and authority to reject and accept articles; avoiding any conflict of interest with respect to articles they reject or accept; promoting publication of corrections or retractions when errors are found; and preservation of the anonymity of reviewers.

Registration of Clinical Trial Research

It is recommended that any research dealing with a clinical trial be registered at on appropriate online public registry. Manuscript with non-registered interventional clinical trials will not be considered for publication.

Data Sharing Statement

JPMPH accepts the ICMJE Recommendations for data sharing statement policy (http://icmje.org/icmje-recommendations.pdf). All manuscripts reporting clinical trial results should submit a data sharing statement following the ICMJE guidelines.

Review Process

Upon submission of a manuscript, the board of editors for the ***JPMPH*** will review the paper for appropriateness of content. Articles can be rejected at this initial review process. Articles that pass this preview are then reviewed by two or three experts in the field. The authors' names and affiliations are removed during peer review. Double-blind peer review averages 2 months to complete. The board of editors reserves the right to edit a manuscript for phrasing, style, and overall length at any stage prior to publication, while maintaining the scientific accuracy of the manuscript. Based on comments from reviewers and editors, authors may be asked to revise their manuscript. Authors are required to submit a letter of explanation regarding how they dealt with all comments and questions raised by reviewers and editors. If revisions cannot be submitted within one month, author(s) may request a one-month grace period. If the revised manuscript is not submitted within the required period, the manuscript will automatically be rejected. Manuscripts will not be returned after submission.

Manuscripts After Acceptance

Publication

If the manuscript is finally accepted, the proofreading will be sent to the corresponding author after professional manuscript editing and/or English proofreading. Proofreading should be performed again for any misspellings or errors by the authors. Before final proofreading, the manuscript may appear at the journal homepage or PubMed as an epub ahead of print with a unique digital object identifier (DOI) number for rapid communication. The epub ahead of print version will be replaced by the replacement XML file and a final PDF.

Publication order is based on the order of submission of finalized manuscripts. Dates of submission and acceptance appear in the journal.

Galley Proofs

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Open Access

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All the content of the journal is available immediately upon publication without embargo period.

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Manuscript of Categories

Original Articles

Manuscripts that report the results of original quantitative or qualitative public health research are published as original articles (up to 3000 words in the main text, not including abstract, tables, figures, references, and online-only material). A structured abstract of 250 words is required, with up to 5 tables and figures and no more than 40 references. The main text must follow the standard ***JPMPH*** format, with an Introduction and separate sections for Methods, Results, and Discussion. This format is the highest priority for the ***JPMPH*** and represents the majority of papers published.

Systematic Review

Systematic review presents a comprehensive search and appraisal of accumulating evidence of an important public health topic using a systematic approach for well-defined questions. A systematic review may, or may not, include a meta-analysis. A structured abstract is required; for more information, see instructions for preparing structured abstracts. The text should not exceed 3500 words in length (not including abstract, tables, figures, references, and online-only material), with up to 100 references and no more than a total of 6 tables and figures. Scoping reviews and rapid reviews can be also submitted under Systematic Review category. These reviews should follow the relevant PRISMA (Preferred Reporting Items for Systematic reviews and Meta-Analyses) protocols, respectively.

Narrative or Other Non-systematic Review

Narrative reviews are aimed at identifying and summarizing what has previously been published. Narrative reviews have no

predetermined research question or specified search strategy, only a topic of interest. They are not systematic and follow no specified protocol. A structured abstract is required; for more information, see instructions for preparing structured abstracts. The text should not exceed 3500 words in length (not including abstract, tables, figures, references, and online-only material), with up to 100 references and no more than a total of 6 tables and figures.

Special Articles (including Methodology, Lecture, Policy, Cohort Design, and Cohort /Data Profile)

This is limited to invitation only on a recent or emerging topic of public health importance. The text is limited to 3500 words, with up to 50 references and no more than 5 tables and/or figures. Authors seeking to submit articles on a special topic should first contact the editor.

Brief Reports

Preliminary or novel findings may be reported (limited to 2000 words in the main text, a structured abstract, a maximum of 3 tables and figures, and up to 20 references). The main text of the brief report must follow the standard ***JPMPH*** original article format, with an Introduction and separate sections for the Methods, Results, and Discussion.

Case Reports

Case reports are limited to 1500 words in the main text, an unstructured abstract, a maximum of 2 tables and figures, and up to 15 references.

Perspectives (including Critical Commentary)

Perspectives present a forum for raising awareness to timely public health issues. It provides an opportunity for authors to offer their critical evaluation of recent trends and advances in preventive medicine and public health. Perspectives are limited to 1200 words in the main text, an unstructured abstract with maximum of 200 words, a maximum of 2 table or figure, and up to 10 references. There is no special format of the main text.

Public Health Debates

From time to time ***JPMPH*** will publish Public Health Debates that will serve as a forum for discussing controversies and critical issues in public health. Typically, 2 articles address a controversial topic and present different or opposing viewpoints. Each author is allowed 1000 words of text and up to 10 references in which to state her or his position. The Editorial member will commission the articles for debate, but authors are welcome to suggest potential topics of interest and to inquire about possible submission.

Editorials

Editorials in the ***JPMPH*** are considered opinion pieces and do not undergo peer review. They may be commissioned by members of the formal editorial team or on occasion, reformatted as editorials from other submitted papers. Editorials are 1000 words in length with no abstract and up to 10 references. Subheadings may be used to guide readers through the major arguments in the text. Authors may upload suggested images as supplemental files at submission. Editor-in-Chief triages editorials to the member of the formal editorial team who is expert in the content area of the column.

Letters to the Editor and Responses

Letters to the Editor referring to a recent ***JPMPH*** article are encouraged up to 3 months after the article is published. No abstract is required. The editors reserve the right to edit and abridge letters and to publish responses. Letters may include a maximum of 5 references.

Other Publication Types

Other publication types may be accepted. Recommended format can be discussed with Editorial Board.

Key features of articles of ***JPMPH*** publishes are as shown in the below Table 1.

Table 1. Recommended maximums for articles submitted to *Journal of Preventive Medicine & Public Health*

Type of articles	Abstract (word)	Main body (word)[1]	References	Tables & figures
Original article[2]	250	3000	40	5
Review[2]	250	3500	100	6
Special article	250	3500	50	5
Brief report[2]	200	2000	20	3
Case report	200	1500	15	2
Perspective	200	1200	10	2
Public health debates	Not required	1000	10	2
Editorial	Not required	1000	10	2
Letter to the editor/ Response	Not required	1000	5	2

[1]Maximum number of word count is exclusive of the abstract, references, tables, and figure legends.
[2]Structured abstract is required.

Manuscript Preparation and Submission Requirements

All manuscripts should be submitted at the ***JPMPH*** e-submission website (http://submit.jpmph.org). Manuscripts can be submitted at any time. Original source files (cover letter, main text, tables, and figures) are required for submission.

Manuscript Preparation

Manuscripts submitted to the ***JPMPH*** should be in proper and clear English. Manuscripts should be written and numbered in the following sequence: title page, abstract, keywords, manuscript body, acknowledgements, references, tables, and figures.

All manuscripts are subject to editorial peer review. The editors reserve the right to improve the style and, if necessary, return the manuscript to the author for revision. When a manuscript is received for consideration, the editors assume that no similar paper has been or will be submitted for publication elsewhere. The main document with manuscript text and tables should be prepared with MS Word file.

Title Page

The title page should include the following: (a) concise and descriptive English titles, (b) full author(s) names and affiliations, (c) description of funding source(s), and (d) the name and address of the corresponding author. Specification of study design in the title is recommended. Do not use abbreviations in the title. Running heads of no more than 40 characters, including letters and spaces, should be provided. Word counts for the abstract and text should be provided. Number of tables and figures should also be noted on the title page.

Abstract

Abstracts should appear on a separate page and be no more than 250 words in length. For original articles, brief reports, and reviews, provide a structured abstract with headings for Objectives, Methods, Results, and Conclusions. Unstructured abstracts are allowed for other types of papers (e.g., special articles, case reports). References should not be included in abstracts and abbreviations should be used sparingly.

Keywords

Authors should provide a list of no more than six keywords below the abstract. Keywords should be selected from main headings listed in the Medical Subject Headings (MeSH) in Index Medicus published by the U.S. National Library of Medicine (www.nlm.nih.gov/mesh/MBrowser.html). If suitable MeSH terms are not yet available, current terms may be used.

Manuscript Text

The manuscript body should follow the requisites of each category of paper. A brief paragraph to clarify the main conclusion should be included at the end of the discussion section. Abbreviations should be spelled out in full the first time they appear in the manuscript body with the abbreviations in parentheses. Avoid over-use of abbreviations except for abbreviations of standard measurement units. All references in the text should be cited in English. In text, tables, and legends, identify references with Arabic numerals in square brackets, such as [1], [2]. Authors' last names should be cited in English. For two authors, connect the names by "and." For citations of three or more authors, include the first author's last name followed by "et al." When reporting drug names, generic names should be used. Commercial drug names can be used only when it is important for the study purpose. All measurement numbers should be written in Arabic numbers. When reporting probability, a lowercase p should be used. Percent should be written as % throughout. Lengths are expressed according to the metric system. Temperature is expressed in degrees Celsius, blood pressure as mmHg, and hemoglobin as g/dL. All other measures should be reported in International System of Units (SI Units). A space is placed between a measured value and its unit.

Supplementary Materials

If there are any supplementary materials to help the understanding of readers or too great amount data to be included in the main text, it may be placed as supplementary data. They should be cited as Supplemental Material 1, 2, 3, etc. They should be numbered in the manuscript by the numerical order in which it is cited. Supplementary material(s) will be published as submitted without editing.

Conflict of Interest

It should be disclosed here according to the statement in the Research and Publication Ethics regardless of existence of conflict of interest. If the authors have nothing to disclose, please state: "The authors have no conflicts of interest associated with the material presented in this paper."

Funding

All sources of funding applicable to the study should be stated here explicitly.

Acknowledgements

If necessary, persons who have made substantial contributions, but who have not met the criteria for authorship, are acknowledged here.

Author Contributions

JPMPH participates in the CRediT standard for author contributions. The contributions of all authors must be described using the CRediT Taxonomy of author roles. For each of the categories below, please enter the initials of the authors who contributed in that category. If no one contributed in a category, you may leave that box blank.

The corresponding author is responsible for completing this information at submission, and it is expected that all authors will have reviewed, discussed, and agreed to their individual contributions ahead of this time

Examples of authors' contributions are as followings:

Conceptualization: Cho SI. Data curation: Park SK. Formal analysis: Park SK. Funding acquisition: Cho SI. Methodology: Cho SH, Park BJ, Lee Y. Project administration: Park SK. Visualization: Cho SI, Park SK. Writing - original draft: Cho SH, Park BJ, Lee Y. Writing - review & editing: Cho SI, Park SK.

ORCID (Open Researcher and Contributor ID)

ORCID of all authors are recommended to be provided. To have ORCID, authors should register in the ORCID web site available from: http://orcid.org/. Registration is free to every researchers in the world.

References

Authors are responsible for the accuracy and completeness of references used in the manuscript. All references should be written in English. References written in other languages are indicated by writing (Korean, Japanese, Chinese, etc.) at the end. References should be numbered sequentially and cited in their order of use in the main body of the manuscript. References should be cited according to the system in the Index Medicus used by the US National Library of Medicine as shown in the following examples. Other types of references not described below should follow *The NLM Style Guide for Authors, Editors, and Publishers* (http://www.nlm.nih.gov/citingmedicine). Avoid using "abstracts," "unpublished observations", and "personal communications" as references. If an article has been published online, but has not yet been given an issue or pages, the DOI should be supplied.

Article within a journal

For six or fewer authors, list the surnames and initials of all authors; for seven or more list the first six authors and add et al., title of article, name of journal abbreviated according to Index Medicus style, year, volume, issue, first and last page numbers and DOI.

Yoo BK. How to improve influenza vaccination in the U.S. J Prev Med Public Health 2011;44(4):141-148. https://doi.org/10.3961/jpmph.2011.44.4.141

Juonala M, Magnussen CG, Berenson GS, Venn A, Burns TL, Sabin MA, et al. Childhood adiposity, adult adiposity, and cardiovascular risk factors. N Engl J Med 2011;365(20):1876-1885. https://doi.org/10.1056/NEJMoa1010112

Books

Rose GA, Khaw KT, Marmot MG. Rose's strategy of preventive medicine. New York: Oxford University Press; 2008, p. 35-40.

Chapter in books

Barker WH. Prevention of disability in older persons. In: Wallace RB, editor. Wallace/Maxcy-Rosenau-Last public health & preventive medicine. 15th ed. New York: McGraw-Hill; 2008, p. 1185-1194.

Data found on the Internet

Centers for Disease Control and Prevention. Eastern equine encephalitis: epidemiology & geographic distribution [cited 2022 Jan 11]. Available from: http://www.cdc.gov/EasternEquineEncephalitis/tech/epi.html

Conference papers

Ferreira de Oliveira MJ. Accessibility and quality of health services. In: Proceedings of the 28th Meeting of the European Working Group on Operational Research Applied to Health Services (ORAHS); 2002 Jul 28-Aug 2; Rio de Janeiro, Brazil. Frankfurt: Peter Lang; 2004.

News articles

Kim EA. The definition of internet newspaper and the characteristic of the media. Yeongchun News 24; 2008 Dec 13 [cited 2022 Oct 19]. Available from: http://blog.daum.net/airgirl620/2 (Korean).

Theses

Lee OH. Assessment of air pollution and temperature effects on health [dissertation]. Seoul: Seoul National University; 2010 (Korean).

Tables and Figures

The use of tables, figures, and photographs that supplement the text are recommended but should not duplicate material found in the body of the manuscript. Tables and figures are placed at the end of the manuscript body and should be numbered (Arabic numerals) in the sequence in which they appear in the text. Approximate locations should be marked in the manuscript body. Titles for tables and figures should be self-explanatory with the first word written with an upper case letter and the rest in lower case letters. The same principle is applied to the content of a table or figure. Tables are prepared with no horizontal or vertical dividing lines. Explanations for and abbreviations used in tables and figures are included as footnotes. Footnotes are indicated by superscript numbers in numerical order ($^{1,2,3,\cdots}$). A *p*-value may be indicated as follows in the footnotes: $^{\dagger}p<0.1$, $^{*}p<0.05$, $^{**}p<0.01$, $^{***}p<0.001$, etc.

Key Message

JPMPH requires the submission of a Key Message. The authors of original articles, reviews, special articles, brief reports, case reports, cohort profiles, and perspectives have to summarize the articles consisting of; what are the unmet needs, important findings for the unmet needs and scientific and public health meanings of published article. Avoid copying the part of abstract and exceeding 100 words.

Korean Summary

The Korean Summary in Korean is requested only for Korean authors and for original articles, review articles, special articles, case reports, and brief reports in this issue. The files of published articles are supplied through an icon "Korean Summary" in the electronic table of contents on the website of ***JPMPH*** (https://www.jpmph.org/).

Reporting Guidelines

In addition to the Uniform Requirements, a number of reporting guidelines have been developed by groups of experts to facilitate reporting of research studies or clinical trials. Authors are encouraged to condult with guidelines relevant to their specific research design. A good source of reporting guidelines is the Equator Network (http://www.equator-network.org/).

Contact Us

Any inquiry including submissions, the review process, certification of acceptance, or copyrights should be directed to the editor from the website (https://www.jpmph.org/about/contact.php) or sent via surface mail or fax to:

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NOTICE: These instructions to authors will be applied beginning with the September 2024 issue.