JHCPU
INFORMATION FOR AUTHORS

The *Journal of Health Care for the Poor and Underserved* publishes original papers, commentaries, brief communications, reports from the field, columns, and reviews regarding the health of low-income and other medically underserved people. We welcome manuscripts. Though our concerns—health, health policy, and health care for the underserved—are universal, our focus is on North America, Central America, the Caribbean, and sub-Saharan Africa. We also consider papers concerning internally dispossessed Indigenous populations worldwide. Questions about the suitability of a topic should be sent to JournalAdministration@mmc.edu. Our mailing address, telephone numbers, and fax number are:

Journal of Health Care for the Poor and Underserved
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1005 D. B. Todd Blvd.
Nashville, TN 37208
Phone: 1-800-669-1269 or (615) 327-6819
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CHECKLIST FOR PREPARATION OF MANUSCRIPTS

SUBMISSION WEBSITE
- ☐ Visit our submission website at Scholar One/Manuscript Central: http://mc.manuscriptcentral.com/JHCPU.
- ☐ Register as an author and follow instructions for manuscript submission.

COVER LETTER
- ☐ Include a cover letter addressed to the editor with your submission. The cover letter must state that the research has received institutional review board (IRB) approval, when suitable, and that the paper is neither presently under consideration at another publication nor will be while it is under consideration with *JHCPU*. It also must state that all co-authors have both contributed substantially to the paper and have approved the version being submitted.

AUTHOR CONTACT LIST
- ☐ Include as a separate file a list of all authors (in the order of precedence used on the title page) with their degree abbreviations and complete contact information. No more than 10 authors are allowed, although one or more of the 10 may be a group (with members identified in a footnote).

TITLE PAGE
- ☐ Please include the following on the title page (as a separate document from the blinded manuscript):
  - The category for which the paper is intended (Report from the Field, Brief Communication…)
  - The title (no more than 20 major words)
  - A list of author names, including degree abbreviations
  - Statements of affiliation for each author
  - Running head: A short tile (no more than five major words) to run as a header with the article
  - The address to which correspondence should be sent
  - The address(es) to be published with author information in the article
  - The number of tables, figures, boxes, and references
  - A list of abbreviations used in the article.

ABSTRACT AND KEY WORDS

☐ Please retain the abstract and key words in the blinded copy of the manuscript (as well as loading them into the Manuscript Central system when prompted to do so). If possible, use terms from the Medical Subject Headings from *Index Medicus* for the key words. Abstracts must not exceed 150 words. Summaries (for Reports from the Field) are limited to 50 words.

WRITING STYLE AND FORMAT

☐ Please submit all documents as Word files (rather than as pdfs).
☐ Double-space throughout.
☐ Do not use proportional spacing or justified margin.
☐ Follow the more detailed guidance regarding grammar, style, and usage found on our sheet, *Grammar, Style, and Usage in JHCPU*.
☐ For guidance on formatting references, see the end of this document. (Please do NOT use programs that embed references with hyperlinks in the paper you submit.)

NAMES OF POPULATION GROUPS: SPELLING

This journal spells the names of all racial, ethnic, and racial/ethnic population groups with initial capital letters (Black, White, Latino, Asian, American Indian, Indigenous, Native, and so on for other groups). We spell them this way to call attention to the complex meanings associated with these terms, in contrast with their lower-case relatives used as adjectives describing other things (*black cat, wildlife native to the area*...). The spelling is also consistent with conventional spellings of the names of religious population groups (Hindu, Christian, Muslim, Jewish, and so on for other religious population groups).

SPECIFIC GUIDELINES FOR SPECIFIC TYPES OF PAPERS

The *Journal* publishes several types of paper, including these primary types:

- Original Papers and Brief Communications: These are empirical research papers, differing in length. Some policy papers also fit into these categories.
- Literature Reviews: These are scholarly reviews of the literature on a given topic; in cases where there is a substantial literature, these must be *systematic* rather than narrative reviews.
- Commentaries: These are opinion pieces, strongly grounded in the scholarly literature. Some policy papers fit in this category.
- Reports from the Field: These are brief descriptive accounts of innovative policies, clinical practices, and programs, situated as needed in literature on comparable programs and the background to the general issue being addressed.

Guidelines for writing papers of these types, as well as the columns that we publish and book reviews, follow. *More detailed guidance——which applies to all paper types——appears after these specific guidelines*.

1. ORIGINAL PAPERS

Empirical research papers, health policy papers, evaluations of innovative or otherwise noteworthy health and health care programs; 2,501-10,000 words of text. *N.B.*: While we allow research papers and literature reviews as many as 10,000 words of text, rarely does a paper merit that length. If your paper is very long, please edit it as carefully as possible, eliminating redundancy, unnecessarily protracted presentation of background material, and excessive verbiage.

Text
- [ ] Clearly state the problem or issue at hand, describe past efforts to address it, and specify how the manuscript represents a new contribution to the field.
- [ ] Note and discuss policy implications, as appropriate.
- [ ] Include brief section headings. Research reports should contain the following sections: **Introduction**, **Methods**, **Results**, **Discussion**. Omit the ***Introduction*** section heading.
- [ ] For any subheadings, use the following format:

1st level subheading: **Boldface heading (with initial cap only) followed by period run into text.**

2nd level subheading: *Italicized heading (with initial cap only) followed by period run into text.*

In cases where the primary heading, a 1st subheading, and a 2nd subheading all occur in immediate succession, simply follow the same pattern. For example,

Methods

Population studied. *Demographic characteristics.* The population studied was …

2. BRIEF COMMUNICATIONS

Shorter empirical research papers, health policy papers, evaluations of innovative or otherwise noteworthy health and health care programs; up to 2,500 words of text.

- [ ] Above sections on cover letter, abstract and key words, tables, figures, permissions, submission, copyright, and proofs and reprints apply.

3. LITERATURE REVIEWS

Literature reviews: A *literature review* is a type of academic/scientific publication that is of great value to scholars who wish to gain a holistic understanding of scholarly literature and findings on any given topic. *N.B.*: While we allow research papers and literature reviews as many as 10,000 words of text, rarely does a paper merit that length. If your paper is very long, please edit it as carefully as possible,

eliminating redundancy, unnecessarily protracted presentation of background material, and excessive verbiage.

It is generally agreed that a *systematic review* is different from the traditional *narrative review* in that a systematic review (a) addresses a focused question; (b) involves a comprehensive search of the literature; (c) has explicit inclusion and exclusion criteria for papers included in the review; (d) addresses methodological quality of the papers; and (d) synthesizes results in a systematic way. (Thanks to John Philbrick of UVA for this formulation.)

We prefer systematic literature reviews except in the cases of topics that are inadequately represented in the conventional scholarly literature. The authors should make the case for a looser sort of literature review in the event that they submit one.

Some of the databases researchers might draw on to search the scholarly literature and gray literature (select among these and others, based on topic area):

Academic Search Premier
BioMed Central databases
CCTR: Cochrane Controlled Trials Register, or Cochrane Central Register of Controlled Trials
Cochrane Database of Systematic Reviews
CINAHL: Cumulative Index to Nursing and Allied Health
DARE: International Social Science Directory
EMBASE: Biomedical answers (Medline + 5 million other records, emphasis on evidence-based medicine)
ERIC: Education Resources Information Center
GOOGLE Scholar
Health Source Nursing/Academic Edition
PsychARTICLES
PsychINFO
PubMed/MedLine
Science Direct
Sociological Abstracts
SPORTDiscus
Web of Knowledge

4. COMMENTARIES
Commentary on timely or controversial issues, grounded in the relevant scholarly literature; 1,000-4,000 words of text.
☐ Above sections on cover letter, abstract and key words, permissions, submission, copyright, and proofs and reprints apply.

5. REPORTS FROM THE FIELD

This section of the Journal is intended for brief, descriptive papers. These papers may be about a host of different things that we believe will interest our readers — including but not only

- *Programs, interventions, innovative practices;*

- *Understudied issues in public health;*

- *Efforts to use prior research findings to craft policy and/or practice.*

Sometimes, a Report may make reference to program instruments or other materials suggesting the potential for future evaluations. We welcome this. Where applicable, authors should explicitly address future expectations based on this preliminary work: <u>Do</u>, if possible, talk about evaluation design and the time course over which you anticipate change. At the same time, bear in mind that the descriptive Report from the Field is <u>not</u> the place for drawing conclusions about effectiveness or causality: such conclusions may be drawn only on the basis of scientific study that goes well beyond the scope of what is covered in a Report from the Field.

Additionally, authors of Reports from the Field should take care to contextualize their work as much as possible – provide descriptive information about (for example) the demographic profile or history of the population, condition, region, neighborhood, program, or practice that is the topic of the Report. Similarly, be sure the submission is contextualized in the literature —— we expect citation and brief discussion of related published material.

While still hewing to the highest standards for timeliness and accuracy. Reports are not structured as research papers and do not contain statistical analyses (other than purely descriptive statistics). Innovative and/or newsworthy events especially will interest our readers. Word limit: 2,000 words of text.

- *Where applicable, the above sections describe policies and procedures for cover letter, tables, figures, permissions, submission, copyright, and proofs and reprints.*
- *In place of an abstract, include a summary of the paper's contents. The summary should be no longer than 50 words. Also include a list of key words. These should appear in the blinded manuscript as well as being loaded onto Manuscript Central (with the summary being loaded in place of an abstract).*

6. HEROES AND GREAT IDEAS COLUMNS

A column published in the Journal since 2005, Heroes and Great Ideas is a space for telling the stories of people and initiatives that have worked successfully to improve life in medically underserved communities. Styles adopted vary widely and include traditional biographical or historical accounts, essays, and narratives. We welcome submissions to this section, which is reviewed by members of the editorial staff and editorial board. We recommend a limit of 2,000 words.

☐ Where applicable, the above sections describe policies and procedures for cover letter, tables, figures, permissions, submission, copyright, and proofs and reprints.

7. ACU COLUMNS

The ACU Column originates in the office of the Association of Clinicians for the Underserved. Interested authors should write to the ACU office, care of Amanda Pears Kelley apearskelly@clinicians.org.

8. BOOK REVIEWS AND OTHER REVIEWS

Critical summaries of books, reports, videotapes, educational materials, and other materials of interest to our readers; 500-1,500 words. See Scholar One/Manuscript Central site (http://mc.manuscriptcentral.com/JHCPU) for current list of books available from the Journal office for review.

☐ Above sections on cover letter, permissions, submission, copyright, and proofs and reprints apply. Authors receive a complimentary copy of the Journal issue in which their work appears.

☐ Assess the contributions of the material being reviewed to the broad field of health care for the poor and underserved.

☐ Summarize the salient features of the work; assess its accuracy, readability, completeness, biases, and important omissions; and suggest an audience that might find the work useful.

General Submission Requirements (All Paper Types)

- [ ] List any acknowledgments and grant support at the end of the text under a new section heading, **Acknowledgments**.
- [ ] The list of references should follow a section heading, **References**.

Tables
- [ ] Type tables on pages separate from the text. Provide a title and consecutive Arabic numbering for each.
- [ ] Use the table formatting option in Microsoft Word®.
- [ ] Tables should be in black and white.
- [ ] List source for table, if called for.
- [ ] Please place tables at the end of the document rather than within the text stream, and please do NOT use anchored boxes.
- [ ] Tables should be in Word rather than Excel.
- [ ] Columns in tables should be separated with tabs rather than spaces.

Figures
- [ ] Maps, diagrams, drawings, and figures (bar graphs, pie charts, etc.) must be rendered in sharp detail and appear in black and white.
- [ ] Include actual data. For figures that contain percentages, include raw numbers.
- [ ] List source for figure, if called for.
- [ ] Please refrain from using scanned figures, as we are unable to edit them.
- [ ] Please supply a native digital file for art (e.g., .jpg), rather than placing it as a picture in the Word document.

Permissions
- [ ] Obtain written permission from the copyright holder to use published figures or tables or any other copyrighted material.

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- [ ] Follow the instructions on Scholar One/Manuscript Central.

Review
- [ ] Authors are notified promptly when manuscripts are received. Manuscripts that pass an internal review are sent to at least two external reviewers who are experts in the topic area addressed by the paper. Reviewers provide comments to the editor, who relays them to the primary author. Reviews are double-blind (*i.e.*, neither authors nor reviewers know each other's identity or institutional affiliation).

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☐ After revisions are completed, primary authors receive galley proofs for review from the publisher, Johns Hopkins University Press. Galleys must be returned with any substantive corrections within the (brief) time frame established by the publisher. Primary authors receive two complimentary copies of the *Journal* issue in which their work appears and co-authors receive one copy each.

REFERENCES

☐ In the text, refer to each reference with an Arabic numeral (1, 2, 3…) in superscript, without parentheses. Number references consecutively and list the full citations at the end of the text (under the heading **References**).

☐ List all authors of cited works when there are three or fewer. Otherwise, list the first three, then *et al*.

☐ Use the following formats, based on *Index Medicus*/PubMed styles:

Journal article (GIVE COMPLETE PUBLICATION DATE PLUS VOLUME AND NUMBER. PubMed citations may be used as a guide):

1. Zuckerman B, Frank DA, Hingson R, et al. Effects of maternal marijuana and cocaine use on fetal growth. N Engl J Med. 1989 Mar 23;320(12):762-8.

Chapter in Book:

2. Morris JN. The last weeks of life: does hospice care make a difference? In: Mor V, Greer DS, Kastenbaum R, eds. The hospice experiment. Baltimore: Johns Hopkins University, 1988.

Government report:

3. National Center for Health Statistics. Health, United States, 1989. (DHHS Pub. no. [PHS] 90-1232.) Hyattsville, MD: U.S. Public Health Service, 1990.

Published conference presentation:

4. Hinman AR. Progress over the last decade. In: Proceedings of the 24th Immunization Conference, Orlando (FL), May 21-5, 1990:17-20. Atlanta: Centers for Disease Control, 1990.

Unpublished conference presentation:

5. McJamerson E, Pearson W Jr. The declining participation of African-American males in higher education: causes and consequences. Presented at: Mid-South Sociological Association Conference, Baton Rouge (LA), Oct 1989.

Material accepted for publication:

6. Hall LE, Callender CO, Yeager CL, et al. Organ donation in blacks. Transpl Proc (In press.)

Other unpublished material (cite in the text but not in the references):

(B. Jones, personal communication)

☐ Please note: *JHCPU* accepts Internet urls only as supplementary information. All references must include specification of the published source in the format described above. After a period ending that print citation, a new sentence reading "Available at…" where "… is replaced by the Internet address, may be added. In cases where the printed version is inaccessible, provide a citation modeled on those for print citations (supply the information referred to by words in capital letters here):

7. AUTHOR. TITLE of work being cited. LOCATION of organization/publication: ORGANIZATION/PUBLICATION posting the work being cited, YEAR posted. Available at…URL HERE.

☐ Please note: We prefer that authors do not embed references using automatic reference numbering programs. However, authors may want to use such a program while working on their papers (converting them to plain text only at the end and prior to submission). RefWorks (but *not* EndNote) includes the JHCPU/*Index Medicus*/PubMed citation style.

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