Instructions to Authors

Manuscript preparation instructions

Submission

Open Access

How to contact the Editorial Office

Language editing pre-submission

Article types

Manuscript format and structure

Tables, text boxes and figures/illustrations

Correspondence

Supplementary data

Journal style

Permission to reproduce figures and extracts

Copyright

Proofs

Advance access

Preprint Policy

Availability of Data and Materials

Manuscript Preparation Instructions

International Health, an official journal of the Royal Society of Tropical Medicine and Hygiene, publishes original, peer-reviewed articles and reviews on all aspects of global health, including the social and economic aspects of communicable and non-communicable diseases, health systems research, policy and implementation, and the evaluation of disease control programmes and healthcare delivery solutions.

It aims to stimulate scientific and policy debate and provide a forum for analysis and opinion sharing for individuals and organisations engaged in all areas of global health.

Submission

Please read these instructions carefully and follow them closely to ensure that the review and publication of your paper is as efficient and quick as possible. The Editors reserve the right to return manuscripts that are not in accordance with these instructions.

All material to be considered for publication in *International Health* should be submitted in electronic form via the journal's online submission system.

Cover letter

Please include a covering letter along with the submission. The letter should explain the importance of the manuscript, putting the work described into context, and highlighting why it is a valuable addition to the scientific literature. It is your chance to explain to the editors and referees why the work presented is important and impactful, and to highlight anything particularly novel or unusual.

Open Access

International Health is a fully open access journal, and all articles are published in the journal under an open access licence immediately upon publication. You will need to pay an open access charge to publish under an open access licence.

Details of the open access licences and open access charges.

- CC BY, CC BY-NC licence £2000
- CC BY, CC BY-NC licence member rate £1900
- CC BY, CC BY-NC licence Short Communications, Commentaries, Commentary articles – £1040

Corresponding authors based in countries and regions that are part of the developing countries initiative are eligible for a full waiver of publishing fees in our fully open access journals. For further details, please see our APC Waiver Policy.

OUP has a growing number of Read and Publish agreements with institutions and consortia which provide funding for open access publishing. This means authors from participating institutions can publish open access, and the institution may pay the charge. Find out if your institution is participating.

Please note that you may be eligible for a discount to the open access charge based on society membership (RSTMH). Authors may be asked to prove eligibility for the member discount.

How To Contact The Editorial Office

To contact the Editorial Office, please email journals@rstmh.org.

Language Editing Pre-Submission

Language editing, if your first language is not English, to ensure that the academic content of your paper is fully understood by journal editors and reviewers is optional.

Language editing does not guarantee that your manuscript will be accepted for publication. For further information on this service, please visit our Language Services webpage. Several specialist language editing companies offer similar services and you can also use any of these. Authors are liable for all costs associated with such services.

Article Types

International Health publishes the following types of paper:

Reviews of different lengths are sometimes commissioned by the editorial team. Please contact the Editorial Office journals@rstmh.org if you are considering writing a review.

- Editorials, which are commissioned by the Editorial team.
- Original Articles are up to 3500 words (main text) in length with a structured abstract of up to 200 words and with up to 30 references. These provide accounts of original investigations in

all aspects of tropical medicine including: Social and economic aspects of communicable and non-communicable diseases

- Public health and social medicine
- Healthcare delivery solutions
- Evaluation of disease control programmes
- Health systems research
- Quantitative and qualitative studies
- Economic aspects of health
- Health policy and implementation
- Short Communications should be up to 800 words long, with only one table or figure, a structured abstract of up to 100 words and 5 references. The Results and Discussion sections can be combined if appropriate.
- Reviews should be up to 3500 words in length, with an unstructured abstract of up to 200 words and up to 60 references. Appropriate and relevant display items (text boxes, tables and figures) can also be included. Reviews give an authoritative account of an aspect of tropical medicine, but do not recapitulate material found in postgraduate textbooks. Highlighting these reviews provides readers with an insight into topics of current interest and widens the scope of the Journal bringing to the attention of readers emerging diseases and other developing aspects of global health.

A systematic review, as defined by The Cochrane Collaboration, is a review of a clearly formulated question that uses explicit, systematic methods to identify, select and critically appraise relevant research, and to collect and analyse data from the studies that are included in the review. These reviews differ substantially from narrative-based reviews or synthesis articles. Statistical methods (meta-analysis) may or may not be used to analyse and summarise the results of the included studies. A systematic review should include a Methods section stating clearly the sources (databases, journal or book reference lists, etc) of the material covered and the criteria used to include or exclude studies.

• Commentaries should be up to 1000 words, with an unstructured abstract of up to 100 words and 10 references. These set in context and illustrate the significance of articles

published in International Health and are usually written as a result of a specific invitation. The Editor may invite commentaries on other topics that highlight developments in global health; for example commentaries can:

- highlight and set in context a recent discovery
- critically appraise established information and ideas
- illustrate how established information and ideas can be relevant in a new context
- show how established policy in global health may have unintended consequences.

If you are interested in writing a commentary please contact the Editorial Office journals@rstmh.org to discuss your idea with the editorial team.

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Lessons from the Field should be short editorial-style articles highlighting lessons learnt from fieldwork, pilot projects or programme implementation across the tropical medicine and global health community, with the aim of informing others working in similar situations and sharing advice with the wider community. This knowledge will also help to drive positive change in our communities, through raising awareness and funding, as well as informing research and policy work. The journal is particularly interested in articles that directly discuss the experiences and lessons learned from those working on the front line of outbreaks, including those with other external factors such as conflict. Submissions should be between 1,000 and 1,500 words and can have up to five references and one figure or table.

Manuscript Format And Structure

Please prepare your typescript text using a word-processing package (save in .doc format).

Save and upload the complete text of the manuscript (i.e. title page, abstract, text, reference list and figure legends) as a single file. Tables and figures should be submitted as separate files (with appropriate file names), tables in Word or Excel and

figures in an appropriate file format (see relevant section on submitting figures below). Each single figure should be saved in a separate file. Where a figure is made up of several panels these can be submitted in a single file, but it must be of an appropriate file format and resolution.

Include the files for any supplementary material to be submitted with your manuscript.

Please use short, simple filenames when saving all your documents, and avoid special characters, punctuation marks, symbols (such as &), and spaces. Macintosh users must also type the extension at the end of the chosen file name (.doc, .rtf, .jpg, .gif, .tif, .xls, .pdf, .eps, .ppt, .mov or .qt).

Submitting figures: Each figure should have a title and a descriptive legend of a maximum of 200 words and must provide enough detail to allow the figure to stand alone. The description should indicate the interesting points of the figure. If a figure has been published elsewhere it is essential that you have permission to reproduce or adapt it for publication. It is the authors' responsibility to obtain such permission from the copyright holder and copies of permission should be forwarded to the Editorial Office.

If figures include patients and the patients could recognise themselves please obtain their written consent to publication before submitting your manuscript. You will be able to download the consent form from the submission page. Please be aware of the requirements for figure file formats and resolution. Figures submitted to the journal should be high-resolution .eps, .tif, PDF or .ppt files in vector graphics and/or editable formats. We also accept figures e.g. flowcharts in Word or Excel. Minimum resolutions are 300 d.p.i. for colour or tone images, and 600 d.p.i. for line drawings, saved at the size at which you would want it published. Saving images in a high resolution at a small size means that resolution will be lost when they have to be enlarged.

Title page

The title should be short, specific and informative and include the type of study. Avoid abbreviations and formulae where possible.

Authors and affiliations

Give the first name, initial(s) and surname of each author.

To ensure that the authors' full surnames and forenames are tagged correctly, for accurate indexing online, it is important to check that:

i. all names have the correct spelling and are in the correct order (first name, then family name); occasionally, the distinction between forenames and surnames can be ambiguous

ii. initials are correct.

Below the names, list the authors' affiliation addresses (where the actual work was done). Indicate all affiliations (department, institution, city with postcode and country) with a lowercase superscript letter immediately after the author's name and in front of the appropriate address. Indicate the corresponding author with an asterisk, and provide his or her telephone and email address.

If an author has moved since the work described in the article was done, or was visiting at the time, a 'Present address' may be indicated as a footnote to that author's name. Superscript numerals are used for such footnotes. The address at which the author actually did the work must be retained as the main affiliation address.

Inclusion of a footnote stating that 'The authors wish it to be known that, in their opinion, the first x authors should be regarded as joint First Authors' is permitted if the appropriate box is checked on the submission website.

An example of how the affiliations should be presented is shown below:

Name One ^a, Name Two ^{b,1}, Name Three ^{c,*}

^a Affiliation one; ^b Affiliation two; ^c Affiliation three

*Corresponding author: Tel: +00 0 000 0000; E-mail: xxx@yyy.zz

Any deletions or additions to the author list after acceptance of the paper must be submitted in writing, signed by all authors, to the Editorial Office.

Abstract

The second page of the manuscript should contain the Abstract, which will be printed at the beginning of the paper.

The Abstract of a published paper needs to encourage the reader to read or obtain the full text. It is also used by referees to decide whether they are willing to review. Make sure that your Abstract will be comprehensible to reviewers and readers before they have read the paper. Use it to describe accurately and succinctly the content, scope and importance of the work reported. Do no use reference citations. Avoid non-standard or uncommon abbreviations unless essential, in which case define them at first mention.

A structured abstract (background; methods; results; conclusions) is required for all Original Articles and Short Communications. For Commentaries and Reviews, the Abstract should not be structured.

Word limit: the Abstract must not exceed 200 words for Original Article and Review submissions or 100 words for Short Communications and Commentaries.

Accession Numbers

If you are reporting new sequence accession numbers (DDBJ/EMBL/Genbank), these should be listed below the abstract as well as being cited within the text.

¹Present address: xxxxx

Keywords

Immediately after the Abstract, please list up to six keywords. All keywords should be capitalised and in alphabetical order, separated by commas.

Authors are recommended to use keywords from the US National Library of Medicine's Medical Subject List, wherever possible. Choosing keywords in this manner may help increase citation of your paper by making it more discoverable.

The suitability of keywords can be checked on the NLM MeSH Browser.

Main text

Start the main text on a new page.

Commentaries should not have section categories, but Original Articles, Short Communications and Systematic Reviews should normally have standard section headings, as follows.

Introduction . State here the key objectives of the work reported, and provide some background.

Materials and methods. Provide sufficient detail to allow the work to be reproduced. If a review, please provide details of the literature search carried out.

Results . Results should be precisely presented once, in the text, tables or figures, without discussion of their significance. When results are presented in tables or figures, the text should comment only on the important points.

Discussion. This should explore the significance of the results, not repeat them. Highlight any limitations of the study in a separate paragraph and discuss in full.

For Short Communications, the Results and Discussion sections can be combined.

Conclusions. The main conclusions of the study should be presented in a short concluding paragraph at the end of the Discussion section.

Reviews other than systematic reviews do not need to include Materials and methods, Results and Discussion sections. They must, however, include Introduction and Conclusions sections and the rest of the manuscript should be separated by appropriate headings and subheadings where necessary. They should also include Review criteria, detailing the searches performed to identify papers included in the review and any selection criteria applied to them.

Authors' statements

These should include in the following order: Authors' disclaimers (if required); Authors' contributions; Acknowledgements (if required); Funding; Competing interests; Ethical approval.

Authors' contributions

All authors listed on the manuscript should have contributed significantly to the experimental design, its implementation, or analysis and interpretation of the data. All authors should have been involved in the writing of the manuscript at draft and any revision stages, and have read and approved the final version. Anyone who made major contributions to the writing of the manuscript should be listed as an author (e.g. 'ghost writing' is prohibited by the Journal). Any other individuals who made less substantive contributions to the experiment or the writing of the manuscript should be listed in the acknowledgements section. The guarantors of the paper must be named. Please make sure that the Declaration of author contributions is signed by all authors when submitting.

Please use the following format (use initials to refer to each author): CJ and HGM conceived the study; BJA and CJ designed the study protocol; BJA and HGM carried out the clinical assessment; CJ and FT carried out the immunoassays and cytokine determination, and analysis and interpretation of these data. BJA and CJ drafted the manuscript; BJA HGM and FT

critically revised the manuscript for intellectual content. All authors read and approved the final manuscript. BJA and CJ are guarantors of the paper.

Acknowledgements

Acknowledgements and details of non-financial support must be included at the end of the text, after 'Authors' Contributions', and not in footnotes. Personal acknowledgements should precede those of institutions or agencies. Authors should obtain permission to acknowledge from all those named in the Acknowledgements and forward details of this permission to the editorial office at the time of submission.

Please note that acknowledgement of funding bodies and declarations regarding competing interests should be given in separate Funding and Competing Interests sections, respectively.

Funding

Please give details of all funding sources for the work in question, and note the following rules:

The sentence should begin: 'This work was supported by ...'

The full official funding agency name should be given, i.e. 'the National Cancer Institute at the National Institutes of Health' or simply 'National Institutes of Health' not 'NCI' (one of the 27 subinstitutions) or 'NCI at NIH' (full RIN-approved list of UK funding agencies)

Grant numbers should be complete and accurate and provided in brackets as follows: '[grant number ABX CDXXXXXX]'

Multiple grant numbers should be separated by a comma as follows: '[grant numbers ABX CDXXXXXX, EFX GHXXXXXX]'

Agencies should be separated by a semi-colon (plus 'and' before the last funding agency)

Where individuals need to be specified for certain sources of funding the following text should be added after the relevant agency or grant number 'to [author initials]'.

In order to meet your funding requirements authors are required to name their funding sources, or state if there are

none, during the submission process. For further information on this process or to find out more about CHORUS, visit the CHORUS initiative.

An example is given here: 'This work was supported by the National Institutes of Health [P50 CA098252 and CA118790 to R.B.S.R.] and the Alcohol & Education Research Council [HFY GR667789].

Competing interests

At the point of submission, each author should reveal any financial interests or connections, direct or indirect, or other situations that might raise the question of bias in the work reported or the conclusions, implications or opinions stated – including pertinent commercial or other sources of funding for the individual author(s) or for the associated department(s) or organisation(s), personal relationships or direct academic competition. When considering whether you should declare a competing interest or connection please consider the competing interests test: Is there any arrangement that would embarrass you or any of your co–authors if it was to emerge after publication and you had not declared it?

As part of the online submission process, corresponding authors are required to confirm whether they or their coauthors have any competing interests to declare, and to provide details of these. If the Corresponding author is unable to confirm this information on behalf of all co-authors, please contact the Editorial Office. It is the Corresponding author's responsibility to ensure that all authors adhere to this policy.

If the manuscript is published, competing interests information, including if none was declared, will be communicated in a statement in the published paper.

Ethical approval. Authors should observe high standards with respect to publication ethics as set out by the Commission on Publication Ethics (COPE) and International Committee of Medical Journal Editors (ICMJE). By submitting your manuscript to the Journal it is understood that it is an original manuscript, is unpublished work and is not under consideration

elsewhere. Falsification or fabrication of data, plagiarism, including duplicate publication of the authors' own work without proper citation, and misappropriation of the work are all unacceptable practices.

Plaqiarism

Manuscripts submitted may be screened with iThenticate antiplagiarism software in an attempt to detect and prevent plagiarism. Any manuscript may be screened, especially if there is reason to suppose part or all of the text has been previously published. Prior to final acceptance any manuscript that has not already been screened may be put through iThenticate. More information about iThenticate is available.

Any cases of ethical misconduct are treated very seriously and will be dealt with in accordance with the COPE guidelines.

Authorship and 'Umbrella' groups

For studies involving a large collaborative study or multicentre group, a joint decision should be made to list only those members who qualify for authorship and are willing to accept responsibility for the manuscript.

The involvement of a group in the authorship list should be indicated by the connector 'and',

• e.g. Bryna J. Harrington, Bethany L. DiPrete, Allan N. Jumbe, McNeil Ngongondo, Laura Limarzi, Shaphil D. Wallie, Maganizo B. Chagomerana, Mina C. Hosseinipour and the S4 Study Team

The other members of the group should be listed in the acknowledgements section of the manuscript. All authors must be aware of and agree to the submission of the manuscript to the journal. The National Library of Medicine (NLM) indexes the group name and authors and lists the names of collaborators if they have been listed in the acknowledgements. Please refer to the PubMed rules for more information.

When the study has been carried out on behalf of a group, the connector 'on behalf of' should be used in the authorship list,

• e.g. Bryna J. Harrington, Bethany L. DiPrete, Allan N. Jumbe, McNeil Ngongondo, Laura Limarzi, Shaphil D. Wallie,

Maganizo B. Chagomerana, Mina C. Hosseinipour on behalf of the S4 Study Team

When the authorship list contains a group name but no individual names, all members of the group must qualify for authorship. The names and affiliations of group members must be listed in the acknowledgements.

Animal experiments

When reporting animal experiments, authors should indicate whether the institution's, national research council's or any other law on the care and use of laboratory animals was followed. The ARRIVE guidelines should be used to ensure good practice in reporting their work.

Human subjects

When reporting on human subjects, authors should indicate whether the procedures followed were in accordance with the ethical standards of the Helsinki Declaration (1964, amended most recently in 2008) of the World Medical Association.

Manuscripts should include a statement that the patient's written consent was obtained and any information, including illustrations, should be as anonymised as far as possible.

Authors should indicate that the design of the work has been approved by local ethical committees or that it conforms to standards currently applied in the country of origin. The name of the authorising body should be stated in the paper.

We encourage authors to use the following tools to ensure good practice in reporting their work:

- The CONSORT checklist of items to include when reporting randomised trials;
- The STARD checklist of items for reporting studies on diagnostic accuracy;
- The PRISMA checklist for systematic reviews and metaanalyses;
- The ARRIVE guidance on animal research and reporting of in vivo experiments.

If you have no declaration to make for funding, competing interests and ethical approval please insert the following statements:

Funding: None.

Competing interests: None declared.

Ethical approval: Not required.

References

Full references should be provided in accordance with the style of *International Health* and the Oxford SCIMED referencing style, following the instructions and examples below.

References must be numbered in the list in the order in which they appear in the text using superscript numbers which are placed after punctuation marks and should not be in brackets or parentheses. All references present in the reference list must be cited in the text. Any references applicable only to display items (i.e. not cited in the main text) should be cited in the relevant table, box or figure legend and added to the end of the reference list.

Journal titles and author initials should be properly abbreviated and punctuated. Page numbers should be truncated, i.e. 345–9 and not 345–349.

Et al. is used; for references with *more than four authors*, list the first three followed by et al.

If a web address is given, please include the accessed date. See example 4 below.

The citation of journals, books, multi-author books and articles published online should conform to the following examples:

- 1. Kennedy T, Jones R. Effect of obesity on esophageal transit. Am J Surg 1985;149:177–81.
- 2. Long HC, Blatt MA, Higgins MC et al. Medical Decision Making. Boston: Butterworth-Heinemann; 1997.
- 3. Manners T, Jones R, Riley M. Relationship of overweight to haitus hernia and reflux oesophagitis. In: Newman W (editor).

The Obesity Conundrum. Amsterdam: Elsevier Science, 1997;352–74.

4. Public Health Laboratory Service. Antimicrobial Resistance in 2000: England and Wales.

http://www.hpa.org.uk./infections/topics_az/antimicrobial_r esistance/amr.pdf [accessed 7 January 2013].

Personal communications (J. Jones, personal communication) must be authorised in writing by those involved, and unpublished data should be cited in the text as (unpublished data). References to manuscripts submitted, but not yet accepted, should be cited in the text as (B. Jones and L. Smith, manuscript submitted) and should not be included in the list of references. Citations of submitted manuscripts should include all authors involved (use et al if more than four). If referring to a website, cite the web URL in parenthesis at the appropriate mention in the text.

Please note that Wikipedia cannot be cited as a reference.

Tables, Text Boxes And Figures/Illustrations

Place any

- Tables, each on a separate page
- Text boxes, each on a separate page
- Figure captions, listed together on a separate page
- Figures/illustrations, each on a separate page

in the above order at the end of the manuscript. Each item must be cited in the text at the appropriate point(s).

Tables

All tables should be cited in the text and numbered according to the order they are cited. Each table must have an explanatory title, so that it can be understood without reference to the text. Tables must be prepared using Excel spreadsheets or the table function of Word i.e. they must be cell based (tabs and hard returns must not be used to separate columns and rows). Avoid overcrowded tables and keep words to a minimum. Shading should not be used in tables. Give the units in which results are

expressed in parentheses at the top of each column or start of each row; do not repeat units in each entry. Avoid blank cells by using ND, NA, etc. and define in a footnote below the table body. If p-values in a table are not significant, replace numbers with NS (define NS in footnote). Define any non-standard abbreviations alphabetically in a footnote, even if they are defined in the text. Indicate any explanatory footnotes with lowercase superscript letters, as in the example below:

CFR: case fatality rate; DOT: directly observed treatment; TST: tuberculin skin test.

Check carefully that the data given in tables are correct and that percentages add up to 100%.

Please note that tables must be provided in an editable format (such as .doc, .docx or .xls) and not in picture format (such as .tif).

Text boxes

Text boxes are a useful way of presenting information such as lists, formulae, questionnaires, literature search criteria or quotes. Cite each box within the text and number them consecutively in order of appearance. Provide each with an explanatory title.

Figures and illustrations

Number figures consecutively, in order of their citation within the text; use A, B, etc. to denote different panels.

Each figure must have a complete caption (figure legend) that clearly explains all elements of the figure, including different panels and abbreviations. Figure legends must not exceed 200 words.

The Journal reserves the right to reduce the size of illustrative material. Wherever possible, photographs should fit within the

^a Per 1-year increase.

^b p-value <0.01.

print area (180mm wide) or within a column width (90mm wide).

Figures cannot be edited or relettered by the Publishers or Editorial Office. When creating figures, please make sure any embedded text is large enough to read. Any characters not easily readable in the submitted figure will most likely be illegible in the final version.

Any photomicrographs, electron micrographs or radiographs must be of high quality; add arrows to indicate points of interest. Photomicrographs should provide details of staining technique and a scale bar. Patients shown in photographs must have their identity concealed or must have given their written consent to publication.

Certain image formats such as .jpg and .gif do not have high resolutions, so you may elect to save your figures and insert them as .tif instead. Please see the notes on file submission at the start of this guidance.

General points:

Make sure you use uniform lettering, symbols and sizing in your original artwork

Arial font should be used in figures

The axes of graphs must be clearly labelled and should be carefully chosen so as to occupy the space available to the best advantage

Line drawings should be as simple as possible: do not use overcomplicated figure styles, e.g. three-dimensional graphs (when there are only two data sets), fine lines, backgrounds behind graphs, gradations of stippling and unusual symbols.

Define any abbreviations in the figure legend, even if they are defined in the main text.

For useful information on preparing your figures for publication, go to Digital Art Support page.

Colour illustrations

International Health offers free reproduction of colour figures. Figure captions must be suitably worded to apply to the online version of the article.

Correspondence

Correspondence relating to a recently published article (Comments) International Health allows readers to comment on articles (formerly known as eLetters). Commenting provides a forum for professional feedback, and submission of comments is open to all; you do not need to be a subscriber, but you do need to have an Oxford Academic account. To avoid redundancy, we urge you to read other people's comments before submitting your own. Your name, current role and place of work, and email address are required to submit a comment, and will be published with it. We also require that you declare any competing interests (for instance financial or academic).

Unprofessional submissions will not be considered nor responded to. Comments will be formatted for you prior to publication. Your exact spacing may not be retained. Precede new paragraphs with either a blank line or an indentation.

Important: your agreement with us

Before submitting your comment, please read the Comment Guidelines and Licence to Publish for the *International Health* below, and tick the box on the comment submission screen to confirm your agreement to them.

When you submit a comment, you agree to both the following Guidelines and Licence to Publish, which may be amended from time to time.

Guidelines

• In order to submit a Comment you must be a registered Oxford Academic user. Details on how to register (free of charge) and sign in can be found on the registration webpage or at the top right hand corner of the International Health Homepage.

- To submit your Comment please go to the 'Comment' button in the left hand contents menu of the article you wish to comment on.
- We aim to post within five (5) working days all Comments that make a valid contribution to the topic; however, it is at the Editor's absolute discretion whether to publish. The Editor and Oxford University Press also reserve the right to edit comments before and after publication without consulting the author.
- Your submission must be accompanied by accurate and complete author details, including a functioning email address, as you may be required to respond to enquiries.
- Your name and institutional affiliation will be published with each comment. If you want your email address to appear on the website, include it in the body of the text of your comment.
- All comments are eligible for consideration for publication in *International Health* in any present or future medium at the Editor's discretion.
- Publication of a comment does not guarantee publication in *International Health*.
- If patients could be recognized from your description or from any images, please obtain their written consent to publication before sending your comment and forward the original signed print version immediately to the Editor at the following address: journals@rstmh.org. It is highly unlikely that a case report will be accepted for publication without written consent. You should explicitly confirm in the body of your comment that such written consent has been obtained.
- If your comment reports a research study, you must confirm in the body of the comment itself that appropriate research approvals were obtained. Failure to do this will result in rejection of the comment.
- Your comments must be original and not infringe any third party's intellectual property rights.
- You must declare any competing interests during submission of your comment.
- Once your comment has been published on the website of the journal, you will not have the right to have it removed or edited. The Editor and Oxford University Press shall, however, have the right to remove any comment at their discretion.

• Please note that comments are not indexed in PubMed. If you need to refer to your comment, the advised citation would be as follows: [Author Surname], [Author First Name or Initial(s)], [Title of comment] [comment published [publication date], accessed [date comment was accessed], on [Article Author Surname], [Article Author First Name or Initial(s)], [+ Co-author(s)], [Article Title], International Health, Volume [No.], Issue [No.], [Article publication date], Pages [no.]—[no.], https://doi.org/[DOI detail].

• Licence to Publish

The Royal Society of Tropical Medicine and Hygiene are hereby granted a licence to publish my comment in all languages and media and the right to grant third-party permissions to republish my comment in whole or parts thereof in any medium, without limitation. I warrant that my comment is free of plagiarism and that I have exercised reasonable care to ensure that it is accurate and, to the best of my knowledge, does not contain anything that is libelous, or obscene, or infringes on anyone's copyright, right of privacy, or other rights. I warrant that I will declare any competing financial interests and I agree to the Guidelines and terms of the Licence to Publish.

Supplementary Data

Supporting material that is not essential for inclusion in the full text of the manuscript, but would nevertheless benefit the reader, can be made available by the Publisher as online-only content, linked to the online manuscript. The material should not be essential to understanding the conclusions of the paper, but should contain data that is additional or complementary and directly relevant to the article content. Such information might include more detailed methods, extended data sets/data analysis or additional figures.

All material to be considered as supplementary data must be submitted at the same time as the main manuscript for peer review. It cannot be altered or replaced after the paper has been accepted for publication, and will not be edited.

All text and figures must be provided in suitable electronic formats. Please indicate clearly all material intended as

supplementary data upon submission and name the files e.g. 'Supplementary Figure 1', 'Supplementary Data', etc. Also ensure that the supplementary data is referred to in the main manuscript where necessary, for example as '(see Supplementary data)' or '(see Supplementary Figure 1)'.

If you have supplementary data for your article, please ensure every supplementary material file contains the phrase "supplementary data" as part of the actual file name. For example, "Figure A1_Supplementary Data." This is important for production purposes so the files are published in the correct place.

Journal Style

Key points of this journal's style guide are shown below. When preparing your manuscript, please format according to these instructions.

DNA sequences and GenBank accession numbers. Gene accession numbers refer to genes or DNA sequences about which further information can be found in the databases at the National Center for Biotechnology Information (NCBI) at the US National Library of Medicine.

Authors wishing to enable other scientists to use the accession numbers cited in their papers via links to these sources should type this information in the manner set out below. Letters in the accession number should always be capitalised whenever cited in the text (see example below). Authors are encouraged to check accession numbers very carefully.

Example: '(GenBank accession nos. AI631510, AI631511, AI632198 and BF223228), a B-cell tumor from a chronic lymphatic leukemia (GenBank accession no. BE675048), and a T-cell lymphoma (GenBank accession no. AA361117)'.

If you are reporting new sequence accession numbers (DDBJ/EMBL/GenBank), these should be listed below the abstract as well as being cited within the text.

Headings should follow the journal style.

Abbreviations. Define non-standard abbreviations at their first occurrence in both the Abstract and the main text, figures and tables. Ensure consistency of abbreviations throughout the article. Avoid using abbreviations in headings.

Mathematical formulae. Present simple formulae in the line of normal text where possible. In principle, variables are to be presented in italics. Use the solidus (/) instead of a horizontal line, e.g. Xp/Ym.

Mathematical formulae. Present simple formulae in the line of normal text where possible. In principle, variables are to be presented in italics. Use the solidus (/) instead of a horizontal line, e.g. Xp/Ym.

Powers of e are often more conveniently denoted by exp.

Nomenclature and units. Follow internationally accepted rules and conventions: use the international system of units (SI). If other quantities are mentioned, give their equivalent in SI. You are urged to consult IUB: Biochemical Nomenclature and Related Documents for further information.

Organisms should be referred to by their scientific names according to the Linnaean binomial system. Generic names should be given in full and in italics when first used and subsequently abbreviated to a single letter in italics followed by a full stop and a space, e.g. *Plasmodium vivax* and *P. vivax*. The full generic name should always be used at the beginning of a sentence or in a heading or subheading.

Use one letter for genus abbreviation except when a two-letter abbreviation is needed to avoid confusion, e.g. when *Aedes* and *Anopheles*, are mentioned in same paper. However, when several unusual genera are being discussed with only a few references to each spread throughout the manuscript, it is better to use the whole generic name.

Numbers. Numbers one to nine are spelt out unless they are measurements, e.g. 5 mg. Numbers (and units if appropriate) are spelt out if they begin a sentence, e.g. Five microlitres. Large numbers should be set without commas, i.e. 10 000 not 10,000. Decimal points must be indicated by a full point on the line (not commas). Decimal fractions should always be preceded by a zero, e.g. 0.05.

When reporting percentages in the text, include both numerator and denominator. When the sample size is greater than 100, report percentages to one decimal place. When the sample size is 100 or less, report percentages in whole numbers.

Statistical methods should be fully referenced and details of any statistical software packages used must be given, e.g. Epi Info (CDC, Atlanta, GA, USA).

p-values. p must always be expressed as equal to, less than, less than or equal to, much less than, greater than, or much greater than that number (p=0.0001; p<0.01, p≤0.01, p<<0.01; p>0.01). Exact values of p should be given to two decimal places, but for smaller values use p<0.001.

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