

## INSTRUCTION FOR AUTHORS

### ONLINE SUBMISSION

International Journal of High Risk Behaviors and Addiction accepts only manuscripts through the online submission system, easy to use and easy to track, thus by conducting all procedures electronically your submission will be done rather faster. Keep our website in mind: [www.JHRBA.com](http://www.JHRBA.com). Once you submit an article, it will be forwarded to one of the editors and afterwards to at least two of the peer-reviewers. At once after submission, the author will be notified of both the submission process by means of email and the follow-up ID code. It is recommended to save the sent ID code for all the future correspondence regarding each article separately.

**COVER LETTER** [required for original articles, review articles, case reports]

This letter should be uploaded through online system as a word file. By an official letter corresponding author should state that:

1. The manuscript has not been and will not be published elsewhere or submitted elsewhere for publication.
2. To prevent the information on potential conflict of interest for authors from being overlooked or misplaced, mention this information in the cover letter.
3. Ethics of experimentation/Informed consent: The cover letter must include a statement declaring that the study complies with current ethical considerations. Authors reporting experimental studies on human subjects must include a statement of assurance in the Materials and Methods section of the manuscript reading that: (1) informed consent was obtained from each patient included in the study and (2) the study protocol conforms to the ethical guidelines of the 1975 Declaration of Helsinki as reflected in a priori approval by the institution's human research committee. In studies involving animal experimentation, provide assurance that all animals received humane care according to the criteria outlined in the "Guide for the Care and Use of Laboratory Animals" prepared by the National Academy of Sciences and published by the National Institutes of Health (NIH publication 86-23 revised 1985).

### COPYRIGHT FORM

All authors should fill their complete names and specifications in the copyright form which is available in word format. Author should print, sign, scan and send this form by email to [info@jhrba.com](mailto:info@jhrba.com). According to the new policy, authors should send the copyright just in the first step of submission process. The copyright form is available to download at: <http://kowsarcorp.com/pub/index.php/help/journals/users/authors/instruction-for-authors#20>

### MANUSCRIPT PREPARATION

To send electronically, manuscripts should be in Word Document (Microsoft Word 97, 2003, 2007). Manuscripts, well-written in English, should follow the style of the agreement detailed in the Uniform Requirements for Manuscripts Submitted to Biomedical Journals, a copy of which can be found at [www.icmje.org](http://www.icmje.org). Please double check the article for spelling, structure and format mistakes. What follows is a series of recommendations on how the article should be like in order to process it faster and more efficiently.

### WORD COUNT LIMITS

These numbers shows International Journal of High Risk Behaviors and Addiction word count limitations:

- *Short Articles*: 1500 - 2000 words (Maximum number of references is 20, Maximum Number of illustrations/Tables is 2)
- *Original Reports*: 2500 - 3500 words (Maximum number of references is 55, Maximum Number of illustrations/Tables is 5)
- *Review Articles*: 3500 - 4000 words (Maximum number of references is 80, Maximum Number of illustrations/Tables is 5)
- *Case Report*: 1500 - 2000 words (Maximum number of references is 20, Maximum Number of illustrations/Tables is 2)
- *Figure legends (including multiple figure parts)*: 55-75 words
- *Acknowledgments (not including research funding)*: 45-55 words

### FONTS

To distinguish different parts of the article, it is recommended to use the font Times New Roman size 12 for the body, size 12 bold for subheadings, size 14 for headings and size 14 bold for the title.

### TITLE PAGE

All the following should be clearly stated on the title page:

- **Title**: choose a title that is long enough to cover the main points and by considering the importance of shortness. Only the first letter of the first word of each title and also abbreviations should be in upper case.
- **Author(s)**: full name of all authors should be mentioned.
- **Affiliation**: Author's affiliation contains only department and university not author's degree or position. Example: [name of department], [name of university], [city], [country]
- **Institution(s)**: all institutions should be written for each author.
- **Corresponding author**: one of the authors should be picked out for possible correspondence before and after publication. Their address, telephone and fax number and email should be written.
- **Support**: sources of any supports should be mentioned.
- **Running title**: a shorter version of the title (40 characters at most) is needed for page footer.
- **Word counts**: especially for long articles, it is necessary to mention the total number of words.

**ABSTRACT AND KEYWORDS** [required for original articles, review articles, case reports]

An abstract of 250-350 words should be provided to state the reason for the study, the main findings and the conclusions drawn from the observation. Abstract of original articles and brief reports should be structured under the following headings: Background, Objectives, Materials/Patients and Methods, Results and Conclusions. A list of 3-10 keywords must be provided for indexing purposes. All keywords should be provided according to MeSH terms at: <http://www.nlm.nih.gov/mesh/MBrowser.html>. To read more about Keywords refer to: <http://www.nlm.nih.gov/mesh/authors.html>.

**ARTICLE BODY** [especially required for original articles]

The rest of the article differs according to the Article type you are submitting but generally includes the following headings: Background, Objectives, Materials/Patients and Methods, Results, Discussion and References.

- **Background**: This should summarize the purpose and the rationale for the study. It should neither review the subject extensively nor should it have data or conclusions of the study.
- **Objectives**: Author(s) should declare objectives/aims of the study.
- **Materials/Patients and Methods**: This should include exact method or observation or experiment. If an apparatus is used, its manufacturer's name and address should be given in parenthesis. If the method is established, give reference but if the method is new, give enough information so that another author is able to perform it. If a drug is used, its generic name, dose and route of administration must be given. Statistical method must be mentioned and specify any general computer program used. The Info system used should be clearly mentioned.
- **Results**: It must be presented in the form of text, tables and illustrations. The contents of the tables should not be all repeated in the text. Instead, a reference to the table number may be given. Long articles may need sub-headings within some sections (especially the Results and Discussion parts) to clarify their contents.
- **Discussion**: This should emphasize the present findings and the variations or similarities with other work done in the field by other workers. The detailed data should not be repeated in the discussion again. Emphasize the new and important aspects of the study and the conclusions that follow from them. It must be mentioned whether the hypothesis mentioned in the article is true, false or no conclusions can be derived.
- **Acknowledgments**: All contributors who do not meet the criteria for authorship should be covered in the acknowledgment section. It should include persons who provided technical help, writing assistance and departmental head that only provided general support. Financial and material support should also be acknowledged.
- **Tables**: All tables must be included at the end of the manuscript.
  - Tables in the word file should be separated by page break (each table in a separate page).
  - Each Table should have borders with normal style without any colored row or column.
  - The style of table should be simple.
  - Each cell contains only one paragraph or one line.
- **Figures**: (Figures must be submitted as separate files)
  - Authors should declare in the cover letter that all figures of their manuscripts are original, otherwise the original source of figures

should be mentioned and reprint form must be uploaded in the attachments.

- Scanned graph or from other resources will not be accepted to publish.
- All Line Arts should be in the form of encapsulated postscript (.eps), power point (.ppt), or portable document format (.pdf). It is highly recommended that figures not be sent as TIF (.tiff) or JPG (.jpg) files. If you are unsure about this, please send to us the graph or its data in Microsoft excel format and we will convert it into eps or tif formats.
- All Halftones should be in the form of tiff (.tif), jpeg (.jpg), png (.png), or Photoshop (.psd).
- Combination of halftone and text or line art elements should be in the form of encapsulated postscript (.eps), power point (.ppt), or portable document format (.pdf).
- Please scan all images in at least 300dpi. Most consumer scanners scan in sRGB by default. However, if you are using a high-end scanner then Adobe RGB is recommended for optimum colour depth. Colorspace should be in RGB.
- Image quality specification for Line art (an image composed of lines and text which does not contain tonal or shaded areas) has resolution of 900 dpi, halftone (a continuous tone photograph which contains no text) with 300 dpi and combination of both should have 500 dpi of resolution. For more clarification please refer to: <http://kowsarcorp.com/pub/index.php/help/journals/users/authors/instruction-for-authors#1-9-8> Figures.
- We will NOT accept any images with resolution below 300 dpi.
- More information about file specifications can be seen at: [http://www.ncbi.nlm.nih.gov/pmc/about/PMC\\_Filespec.html#Image\\_File\\_Requirements](http://www.ncbi.nlm.nih.gov/pmc/about/PMC_Filespec.html#Image_File_Requirements)

**Units, symbols, and abbreviations:** Internationally accepted units (International System of Units), symbols, and abbreviations must be used. Abbreviations should be used sparingly and must be introduced in parentheses upon first mention. Abbreviations that have meaning only within the context of the specific manuscript should be avoided.

**Drug names:** Generic drug names must be used in the title and throughout the manuscript text. The proprietary name should be included in parentheses, along with the name of manufacturer, and city upon first mention in the text.

## REFERENCES

International Journal of High Risk Behaviors and Addiction accepts references according to a style based on Vancouver style (with some minor changes). Vancouver, a numbered style, follows rules established by the International Committee of Medical Journal Editors. Writing references as an ENDNOTE or REFMAN file will be considered as an advantage when submitting a manuscript. For more information please refer to: <http://kowsarcorp.com/pub/index.php/help/journals/users/authors/instruction-for-authors#16>

Some Examples:

### Books:

Mistik R, Balik I. Epidemiological analysis of viral hepatitis in Turkey. In: Kilicurgay K, Badur S, editors. *Viral Hepatitis*. Istanbul; 2001. p. 10-55.

### Journal Article

Petersen KM, Bulkow LR, McMahon BJ, Zanis C, Getty M, Peters H, et al. Duration of hepatitis B immunity in low risk children receiving hepatitis B vaccinations from birth. *Pediatr Infect Dis J*. 2004;23(7):650-5.

### Online Sources

WHO. Hepatitis B. Dublin: World Health Organization; 2004 [cited 2010 Jun 06]; Available from: <http://www.who.int/mediacentre/factsheets/en/>.

### TIPS

**a) How can we cite International Journal of High Risk Behaviors and Addiction in the reference part?**

Some other journals have more than two parts and should be abbreviated when write in the references like: Example: Hepatitis Monthly which should be written as: Int J high Risk Behav Addict.

### b) How can we cite Iranian Journals in the reference part?

Some of the Iranian journal called according to their Universities, like Scientific research Journal of Babol Medical Science. Authors should write these journals like below:

[J: Abbreviation of Journal] [full name of the city] [Univ: Abbreviation of University] [Med: Abbreviation of Medical] [Sci: Abbreviation of Sciences]

Example: *J Babol Univ Med Sci*

Some other journals have unique names and should write complete names in the reference part like:

Example: *Yakhteh*

## REVIEW PROCESS

All submitted manuscripts are subject to peer review and editorial

approval. Articles will be sent to at least three reviewers. Sometimes, the reviewers are masked as to the identity of the authors and their affiliation. Authors are usually notified within 1-2 months about the acceptability of their manuscript. Reviewers are selected based on their expertise within the topic area of the submission, and their purpose is to assist the authors and the journal by providing a critical review of the manuscript. On receiving reviewers comments, authors are requested to send the revised article, and a copy of their reply to the reviewers, including the comment and explaining the replies to questions and changes made to the revised version. Communication regarding a specific manuscript will take place between the journal and the designated corresponding author only.

## PROOFS

Proofs will be sent to the corresponding author. Galley proofs should be returned within 72 hours from receipt with clear indication of any changes.

## NEW GUIDELINES FOR AUTHORS

To improve success rate of publishing articles, authors can have a look at these checklists which will be considered as a checklist by Reviewers in the review process at: <http://kowsarcorp.com/pub/index.php/help/journals/users/authors/instruction-for-authors#NEW%20GUIDELINES%20FOR%20AUTHORS>

## TYPE OF ARTICLES

International Journal of High Risk Behaviors and Addiction publishes original articles, systematic review articles, meta-analyses, invited review articles, case reports, and letter to editors monthly. The papers in all fields of high risk behaviors and addiction which will assist the practitioners in making clinical decisions and psychologists to conduct basic research, are welcomed.

## ORIGINAL ARTICLES

The content of the paper must justify its length. For reports of original investigative work, traditional division into sections is required: Title, Keywords, Addresses and which author address for correspondence, Structured abstract, Background, Objectives, Materials/Patients and Methods, Results, Discussion, References and Acknowledgements, Legends for display items (Figures and Tables).

## SYSTEMATIC REVIEW / META-ANALYSIS

Authors should report systematic reviews and meta-analyses in accordance with the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) statement. For Systematic Reviews, the abstract should be subdivided into the following sequential sections: Background; Objectives; Search Strategy; Selection Criteria; Data Collection and Analysis; Main Results; Conclusions; and Keywords. Systematic reviews are welcome. They should be critical assessments of current evidence covering a broad range of topics of concern to those working in the field of risky behaviors and addiction. Systematic reviews should be 4000-5000 words (abstracts to be structured as above). N.B. For advice on writing systematic reviews consult: The Cochrane Reviewers' Handbook

Meta-analysis of observational studies: A MOOSE checklist is required for meta-analysis of observational studies.

## REVIEW ARTICLE

Only invited review articles will be accepted. In a review article both abstract and text of the manuscript, include following items:

➤ **Context:** Include 1 or 2 sentences describing the clinical question or issue and its importance in clinical practice or public health.

➤ **Evidence Acquisition:** Describe the data sources used, including the search strategies, years searched, and other sources of material, such as subsequent reference searches of retrieved articles. Explain the methods used for quality assessment and the inclusion of identified articles.

➤ **Results:** Address the major findings of the review of the clinical issue or topic in an evidence-based, objective, and balanced fashion, emphasizing the highest-quality evidence available.

➤ **Conclusions:** Clearly state the conclusions to answer the questions posed if applicable, basing the conclusions on available evidence, and emphasize how clinicians should apply current knowledge.

## BRIEF REPORT

Report sorts should not exceed 1000 words and should contain a structured abstract of 200 words maximum. Short reports should comprise sections of Introduction, Materials & Methods, Results and Discussion with not more than 2 tables or figures and up to 20 references.

## LETTERS TO THE EDITOR

Letters to the editor will be considered if they give significant comments on recent articles published in International Journal of High Risk Behaviors and Addiction or they contain relevant preliminary data providing new insights. Letters need no abstract and must cite the previous article in International Journal of High Risk Behaviors and Addiction that is being discussed, and should have no more than 10 references.

## CLINICAL CHALLENGE

Clinical challenges present a striking clinical image that is meant to challenge and inform readers and to illustrate and teach important medical points and the diagnosis and discussion should make an important medical teaching point. Clinical challenges need no abstract but should include up to 10 references.

## CLINICAL TRIALS

"International Journal of High Risk Behaviors and Addiction" requires registration of randomized clinical trials in such public trial registries as those of the National Institutes of Health and the International Standard Randomized Controlled Trials. The International Committee of Medical Journal Editors (ICMJE) has established a requirement that all clinical trials be entered in a public registry before the onset of patient enrollment, as a condition of consideration for publication. The definition of a clinical trial as established by the ICMJE is any research project that prospectively assigns human subjects to intervention and comparison groups to study the cause-and-effect relation between a medical intervention and a health outcome. ClinicalTrials.gov or similar registries provide a vehicle which allows organizations and individuals to provide the data requested by ICMJE, which has adopted the World Health Organization (WHO) minimal registration data set. Clinical trials should have a NCT registration code or IRCT code or other similar codes (see below) which can be starting on July 2010. International Journal of High Risk Behaviors and Addiction will be including the

identifier number in Clinical Trial articles. This rule is concluded from the International Committee of Medical Journal Editors (ICMJE) Web site for their editorial and updates on the topic of registering clinical trials before publication of the results. The ICMJE recommends that the clinical trial registration number be included at the end of the abstract. A sample of general display format for the code obtained from ClinicalTrials.gov is: an alphabetic label of ClinicalTrials.gov followed by a slash and then an 11-digit alphanumeric string starting with NCT followed by eight numbers. For instance, an example in the Citation format display would be: ClinicalTrials.gov/NCT00000161.

Which trials registries are acceptable to the International Journal of High Risk Behaviors and Addiction?

Phase III trials must be registered, and phase II trials are appropriate to register. Most phase I trials do not need to be registered. Please clearly state in the methods section of the manuscript the trial registration number including where the registration is publicly available. Visit the website of the Consolidated Standards of Reporting Trials (CONSORT) for more information. International Journal of High Risk Behaviors and Addiction accepts registration in the following registries:

- > [www.irct.ir](http://www.irct.ir)
- > [www.actr.org.au](http://www.actr.org.au)
- > [www.clinicaltrials.gov](http://www.clinicaltrials.gov)
- > [www.ISRCTN.org](http://www.ISRCTN.org)
- > [www.umin.ac.jp/ctr/index/htm](http://www.umin.ac.jp/ctr/index/htm)
- > [www.trialregister.nl](http://www.trialregister.nl)

More information and update can be found at: [http://www.icmje.org/faq\\_clinical.html](http://www.icmje.org/faq_clinical.html) and Primary Registries in the WHO Registry Network

## HEALTH POLICY CHALLENGE

Health policy challenge identify and discuss important issues of Risky behaviors and addiction, linked to health policies of a country or region as well as analysis of social, economic, ethical and political issues. Health policy challenge should normally not be more than 2500 words with an unstructured abstract of no more than 150 words.

## PRIVACY POLICY

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## PERMISSION TO REUSE

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