

Statistical Communications in Infectious Diseases



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Scope and general policies of the journal

Scope

The mission of *Statistical Communications in Infectious Diseases (SCID)* is to serve as the primary vehicle for the communication and education of statistical thinking in infectious disease research and policy. *SCID* publishes significant research on the application of statistical ideas to problems arising from studies of infectious diseases. *SCID* takes a broad perspective on the role of statistics in infectious disease research including application, policy, education and theory. *SCID* fosters much-needed communication among statisticians on the best approaches to evolving complex infectious disease data.

SCID is a hybrid journal, published as a continuous issue online only. *SCID* publishes only English-language articles in the categories below.

Article categories

- Original Articles – Reports of original research
- Review Articles
- Letters to the Editor and Replies
- Editorials
- Commentaries
- Conference Proceedings

Submissions in the following fields are welcome

- How heavily should the public invest in research or implementation of different prevention modalities?
- What is necessary to achieve control of epidemics (for example, do we require a vaccine to control the spread of HIV or what procedures are required to halt the spread of Ebola)?
- How can statisticians help with grass roots epidemic control efforts?
- How can we optimally evaluate the benefits vs. harms vs. costs of competing interventions?
- How can we best characterize the trade-offs between civil liberties and public safety?
- How should we adjust the traditionally required level of evidence to address areas of unmet medical need?
- How do we revise our traditional approaches to the design, monitoring, analyses, and reporting of infectious disease studies to improve medical practice and public health?
- How can we improve the evaluation of diagnostics in infectious diseases?

Peer review, turnaround times and preprint policies

Peer review information

Statistical Communications in Infectious Diseases is a single-blind journal. Manuscripts are reviewed anonymously by at least two independent reviewers selected by the Editor-in-Chief. The authors may provide the names, institution, country and e-mail addresses of up to four potential reviewers. Reviewers indicated by the authors must be of institutions and countries different from those of any of the authors. Authors may also provide names of reviewers they wish to exclude from reviewing their manuscripts.

The editors reserve the right to reject submitted manuscripts without peer review if the studies are not novel or important enough to merit publication in the journal. Manuscripts deemed unsuitable (insufficient originality or limited interest to the target audience) will be also rejected without review.

Turnaround time

The *Statistical Communications in Infectious Diseases (SCID)* aspires to inform authors of the peer review decision within 6-8 weeks from submission date. Revised manuscripts should be returned within 3–6 weeks. Accepted articles will be published online within 4 weeks of acceptance.

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Manuscripts dealing with subjects that have been well studied in the literature, and that do not resolve questions raised by previous studies, or manuscripts that are statistically underpowered, are likely to be rejected without peer review.

Reporting of negative results must be justified by prior evidence that a positive result would be expected. Manuscripts are also returned to authors if they do not comply with the Instructions for Authors (e.g., if the number of words allowed for a certain article type will be exceeded).

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We advise the following approach: Aim for gender neutrality by using plural nouns (clinicians, clients, participants) as standard and avoiding "he" or "she", wherever possible. Instead, please use "they". We recommend avoiding the use of descriptors that refer to personal characteristics such as age, gender, race, ethnicity, culture, sexual orientation, disability or health status unless they are relevant and valid.

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Acknowledgments

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