WHO
style guide

SECOND EDITION

World Health Organization

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KMS/WHP/13.1

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Contents

Introduction

Any professional publisher has a house style: the preferred spelling, punctuation, terminology and formatting to be used for all its information products in all media. WHO's house style is a particular way of using English chosen to meet its particular needs. Following this style offers three key advantages.

First, by giving WHO information products a correct, consistent and professional appearance, house style increases WHO's credibility. When authors use a consistent style, readers can obtain the information they seek without being distracted by variations in spelling, punctuation, terminology and formatting. Products whose appearance is as professional as their content are more credible and convincing to readers.

Next, the use of house style helps WHO to present a single, cohesive image to readers, even though its information products come from a range of different groups and offices. Issuing a range of high-quality products strengthens the WHO brand, and its logo as a mark of quality.

Finally, following house style benefits WHO staff. It streamlines and increases the efficiency of the writing and editing process. When staff know how to use and format text and illustrations correctly and consistently, they can give more of their attention to what they are saying, rather than how they are saying it.

All staff members who produce written information for WHO in hard copy and electronic formats, as well as freelance writers and editors, should learn and follow house style. The contents of this guide follow the policy laid down in the WHO eManual, which requires all WHO information products to follow WHO style (section VIII.2.5).

About this guide

The *WHO style guide* outlines WHO house style for use in all information products in all media. As far as possible, the principles and practices described here apply to all types of products, but the guide makes clear the cases in which practices for print and electronic publications differ from those for websites or other online products.

The *WHO style guide* is packed with details, but really contains only two rules.

1. Use the right names for WHO, its Member States and its partners.
2. Treat text correctly and consistently.

The guide provides not only rules and examples but also links to further guidance and relevant forms in hard copy and online. To maximize its usefulness to everyone involved in preparing WHO information products, it has been kept as short and specific as possible.

The guide is part of a range of guidance on publishing provided by WHO headquarters and the Regional Office for Europe and the Regional Office for the Eastern Mediterranean. If you have a question about WHO style that this guide does not answer or about publishing policies and procedures, contact publishing staff at headquarters (publishing@who.int) and the regional offices.

1. Names

WHO

Always use the correct names for WHO and its structures and members. Never use internal, abbreviated WHO names in any text for an external audience. Here are some commonly used WHO names.

> World Health Organization, WHO, the Organization (*not* World Health Organisation, the WHO)
>
> WHO Constitution, and its Chapters and Articles
>
> WHO Director-General (*but* WHO directors-general), WHO Assistant Director-General (but WHO assistant directors-general)
>
> WHO Executive Board, 132nd session of the WHO Executive Board
>
> WHO headquarters (*not* WHO Headquarters or HQ)
>
> WHO Regional Office for the Eastern Mediterranean (*but* WHO regional offices)
>
> WHO Regional Director for South-East Asia (*but* WHO regional directors)
>
> World Health Day
>
> World Health Assembly (*not* WHA), Sixty-sixth World Health Assembly (*not* 66th World Health Assembly)
>
> WHO Regional Committee for Europe (*but* WHO regional committees), 63rd session of the Regional Committee
>
> WHO Member State, WHO Member States (*not* member nations, Member Governments)
>
> WHO Secretariat

Structure

WHO Member States are grouped into six regions, each of which has a decision-making body (a regional committee) and a regional office with a regional director. When listing them, give the names in alphabetical order by continent (such as Africa) or sea and ocean (such as the Mediterranean and the Pacific), as shown in Table 1.

WHO regions are organizational groupings and, while they are based on geographical terms, are not synonymous with geographical areas. They are not the same as the regions of the United Nations.

Table 1.   WHO structures

WHO regions	WHO regional committees	WHO regional offices
African Region	Regional Committee for Africa	Regional Office for Africa
Region of the Americas	Regional Committee for the Americas (also Pan American Sanitary Conference and Directing Council of the Pan American Health Organization[a])	Regional Office for the Americas (also Pan American Sanitary Bureau[b])
South-East Asia Region	Regional Committee for South-East Asia	Regional Office for South-East Asia
European Region	Regional Committee for Europe	Regional Office for Europe
Eastern Mediterranean Region	Regional Committee for the Eastern Mediterranean	Regional Office for the Eastern Mediterranean
Western Pacific Region	Regional Committee for the Western Pacific	Regional Office for the Western Pacific

[a] The Pan American Sanitary Conference and the Directing Council of the Pan American Health Organization (PAHO) simultaneously serve as the WHO Regional Committee for the Americas, except when the Conference or the Council is considering matters relating to PAHO's Constitution, PAHO's juridical relations with WHO or the Organization of American States, or other questions relating to PAHO's role as an inter-American specialized organization.

[b] The Pan American Sanitary Bureau (PASB) is PAHO's executive arm; it simultaneously serves as the WHO Regional Office for the Americas.

Each WHO regional committee comprises representatives of that region's Member States and Associate Members, if any.

Use initial capital letters when referring to a specific WHO regional director.

> Dr L. Sambo, WHO Regional Director for Africa

Use initial capital letters when referring to a specific WHO region or regional committee, regional office or regional director, but lower case when discussing more than one or making a general reference to them.

Usage tips

Internally, WHO uses acronyms as nicknames for headquarters, a regional office, regional committee and regional director, such as HQ, WPRO, RC and RD, respectively. Never use them in any material intended for an audience outside the Organization, as this may lead to confusion.

Further, do not confuse a regional office with a regional committee or region. In particular, avoid expressions such as "AFRO decided …" when in fact the WHO Regional Committee for Africa or the Member States in the Region made the decision, not the WHO Regional Office for Africa. Similarly, readers might think that "the increase in alcohol dependence in parts of EURO" refers to the WHO Regional Office for Europe, when the author meant the WHO European Region.

When mentioning a particular region or regional office, committee or director for the first time, give the name in full. Afterwards, a short name can be used.

WHO African Region, the African Region, the Region
WHO Regional Office for South-East Asia, the Regional Office
WHO Regional Committee for the Americas, the Regional Committee
WHO Regional Director for the Western Pacific, the Regional Director

Continue to use full names only when there is a danger of confusion, such as when more than one entity is discussed.

Governing bodies

WHO's highest policy-making body is the World Health Assembly; its short name is "Health Assembly", not "Assembly". Avoid the acronym WHA, except in references to World Health Assembly resolutions (such as resolution WHA65.3); outside audiences often think WHA is a misspelling of WHO. The Health Assembly comprises delegates of all Member States, while representatives of each region's Member States make up the regional committees.

The Executive Board of WHO has the dual role of making proposals to the Health Assembly and ensuring that the policies of previous Health Assemblies are put into effect. It is made up of members designated by and representing their Member States.

Use lower-case letters to refer to "the governing bodies" of WHO. For further information, see the WHO headquarters intranet.

Member States

For WHO Member States and Associate Members, use only the names listed on the WHO headquarters intranet and in Annex 1 (valid as of 20 June 2013). See the United Nations Multilingual Terminology Database (UNTERM; http://unterm. un.org, accessed 5 August 2013) for information on names of Member States in the six official languages, and the WHO headquarters intranet for countries' allocation to the six WHO regions. Use "Member States" when describing countries' interactions with WHO; "countries" is preferable when discussing them and their activities, particularly in texts for general audiences.

Some countries' names are given in different forms in different formats. For example, use the article "the" in some countries' names when giving them in text (such as the Comoros, the Niger and the Russian Federation), but not in figures and tables or on name-plates. See Annex 1 for examples.

Give any list of countries in alphabetical order, as shown in Annex 1, unless there is a good reason to list them in another way, such as to rank them according to a health or economic indicator.

Always use initial capital letters for the term "Member State(s)".

Politically and legally sensitive topics

Because WHO is an intergovernmental organization whose mission is to cooperate with all its Member States, staff should be alert to potentially controversial issues and avoid statements that may offend Member States. Offensive statements

pass subjective judgements on countries or their political systems, activities or historical background (by, for example, using such terms as "underdeveloped countries", the "Third World", the "Western World" or the "Iron Curtain"). Be aware of the possibility of causing embarrassment to governments, and ensure that information products use objective language.

As a general rule, technical units or departments should inform the governments concerned if they mean to publish any texts that describe the workings of, or criticize, particular governments or national health systems. Brief statements of this nature, presented as examples from particular countries or as attributed views from other information products, are usually acceptable.

If you are doubtful about how Member States might receive a certain text, or your text refers to countries or territories whose international status or borders are disputed, send it to the Office of the Legal Counsel at WHO headquarters for clearance. As all information products under WHO copyright and with the WHO logo are perceived as giving WHO's views, these requirements apply to all WHO information products. See also the WHO eManual, section VIII.2.6.

Geographical designations and regions

See Annex 2 for a list of accepted names for some cities in Member States; capital cities are included in Annex 1. In general, WHO follows United Nations practice in dealing with geographical terminology. If you have any doubts about the acceptability of a particular name or designation, or a country's WHO membership, check with the Office of the Legal Counsel.

Use names for regions that have a geographical context only; the easiest way to do this is to use lower-case letters for geographical designations, such as "western Europe" and "central Asian countries" (see also Chapter 2). Avoid using terms with capital letters, such as "the West", which may seem to carry political meanings. Avoid using "westernized" to mean "developed" or "industrialized".

Country, state, territory

All WHO publications carry a standard disclaimer on the designation of countries, territories, cities, areas and their authorities, and the delimitation of frontiers; see the WHO eManual, section VIII.6.5. Disclaimers in the official languages are available on the intranets of headquarters and the regional offices.

The term "country" means a sovereign state. In lists of countries, do not include territories not responsible for their international relations, such as Gibraltar. Normally, the heading "country or area" covers such cases. If you must refer to the status of self-governing territories, call them "territories that are not responsible for the conduct of their international relations". Avoid the words "colony" and "colonial".

Sensitive geographical designations

Take particular care when using some geographical designations. These are listed in Table 2 according to WHO region. See the WHO headquarters intranet for updates. Again, see Annex 1 for correct names and refer doubtful cases to the Office of the Legal Counsel.

Partners

All proper names must retain their original spelling, capitalization and punctuation, even if these conflict with WHO style. Call partner and other organizations the names they have chosen for themselves.

> Bill & Melinda Gates Foundation
> Centers for Disease Control and Prevention
> GAVI Alliance
> Organisation for Economic Co-operation and Development

Alphabetical order

The following general rules apply in lists of names and addresses and in indexes and alphabetical reference lists, etc.

When the first component of a family name is a particle, such as al or al-, de, Le, Van or von, use the first letter of the particle for alphabetizing, unless established usage or another specific reason dictates otherwise.

Always arrange names beginning with the prefix Mac or Mc as if the letter "a" were present.

When writing Chinese personal names in the traditional way – that is, placing the single-syllable family name first – use the family name for alphabetizing. For example, Dr Hu Ching-Li should be listed under H.

In the alphabetization of chemical names, ignore Greek letters and italicized prefixes.

Technical terms
Anatomy

In general, use the anglicized versions of Latin anatomical terms, as found in standard medical dictionaries. If Latin terms are preferred in a given context for a specific reason, do not italicize them.

Animals, plants, bacteria and viruses

Use codes of international nomenclature. Give the Latin names of the higher taxonomic groups (class, family, etc.) with initial capital letters, but no italics.

> Diptera, Bacteriaceae

Table 2. Sensitive geographical designations by WHO region

Region	Country or area	Issues
African	Congo (the)	This is the short form for "the Republic of the Congo", whose capital is Brazzaville. Do not confuse it with the Democratic Republic of the Congo (no short form), whose capital is Kinshasa.
	Côte d'Ivoire	Do not use "Ivory Coast".
	United Republic of Tanzania (the)	Do not use "Tanzania".
Americas	Bolivia (Plurinational State of)	Use this form in alphabetical lists, tables and name-plates. For other purposes, use "the Plurinational State of Bolivia".
	United States of America (the)	Once the full name has been used or where space is limited (as in a table), the shorter forms "the United States" or "the USA" may be used. Do not use the abbreviation "US", except when referring to the US dollar.
	Venezuela (Bolivarian Republic of)	Use this form in alphabetical lists, tables and name-plates. For other purposes, use "the Bolivarian Republic of Venezuela".
South-East Asia	Democratic People's Republic of Korea (the)	Do not use "North Korea". Never use the term "Korea" on its own.
European	Germany	Avoid pre-1990 names for Germany: "the former Federal Republic of Germany" is not acceptable. You can use expressions such as "the Federal Republic of Germany before reunification" and "the former German Democratic Republic", or "western Germany" and "eastern Germany", to clarify the geographical area to which health statistics predating October 1990 apply.
	Israel	Do not refer to either Tel Aviv or Jerusalem as the capital. WHO follows United Nations practice and omits references to the capital of Israel or leaves a blank space. See also the discussion below on "Palestine".
	Kosovo (in accordance with Security Council resolution 1244 (1999))	Do not use "Kosovo" on its own, and avoid using the name in a way that implies it is either a country or a region. Consulting the Office of the Legal Counsel is advisable before mentioning it or including information or data concerning it in WHO information products.

Region	Country or area	Issues
European (contd)	Montenegro	Since Montenegro and Serbia are now separate states, you can use expressions such as "the former state union of Serbia and Montenegro" to clarify the geographical area to which health statistics predating June 2006 apply.
	Serbia	"The Republic of Serbia" (full name) continues the membership of "the former state union of Serbia and Montenegro" in the United Nations, including all the organs and organizations of the United Nations system. You can use expressions such as "the former state union of Serbia and Montenegro" to clarify the geographical area to which health statistics predating June 2006 apply.
	The former Yugoslav Republic of Macedonia	Never use "Macedonia", "the Republic of Macedonia" or "TFYROM". Use a capital T to start the country name when it (a) starts a sentence and (b) appears in a figure or table. Otherwise, use a lower-case t. Alphabetize the country name under T.
	United Kingdom of Great Britain and Northern Ireland	Use this form on title pages, in signatures and in recording nominations, elections and votes. In addresses, mention the specific area (England, Northern Ireland, Scotland or Wales). Once the full name has been used or where space is limited (as in a table), the shorter form "the United Kingdom" may be used. Never use the abbreviation "UK".
Eastern Mediterranean	Iran (Islamic Republic of)	Use this form in alphabetical lists, tables and name-plates. For other purposes, use "the Islamic Republic of Iran".
	Palestine	The term "Palestine" is used in WHO to designate the Palestine Liberation Organization as an entity enjoying observer status in WHO pursuant to resolution WHA27.37. According to resolution EM/RC40/R.2 of the Regional Committee for the Eastern Mediterranean, Palestine is a member in the Regional Committee for the Eastern Mediterranean.

The use of the expression "occupied Palestinian territory" is acceptable in reports prepared by the Secretariat in response to requests contained in resolutions of WHO governing bodies using the same expression. In other documentation, including publications, the WHO Secretariat uses the expression "West Bank and Gaza Strip" to designate the territory in question. The expression "occupied Palestinian territory, including east Jerusalem, and the occupied Syrian Golan" is routinely used in certain documentation for the Health Assembly, such as the information document on the "Health conditions in the occupied Palestinian territory, including east Jerusalem, and in the occupied Syrian Golan". |

Region	Country or area	Issues
Western Pacific	China	
	Hong Kong Special Administrative Region (Hong Kong SAR)	Do not use "Hong Kong". If data for this area are to be presented separately from those for China in a list or table, give them immediately after those for China, with the identification "China, Hong Kong SAR".
	Macao Special Administrative Region (Macao SAR)	Do not use "Macao". If data for this area are to be presented separately from those for China in a list or table, give them immediately after those for China, with the identification "China, Macao SAR".
	Taiwan, China	Do not use "Taiwan". Use the expression "Chinese Taipei" only for lists of participants, summary records and similar documents of World Health Assemblies to which that entity is invited as an observer. If data for this area are to be presented separately from those concerning China in a list or table, give them immediately after those for China. Consult the Office of the Legal Counsel before mentioning this area or including information or data concerning it in WHO information products.
	Lao People's Democratic Republic (the)	Do not use "Laos".
	Micronesia (Federated States of)	Use this form in alphabetical lists, tables and name-plates. For other purposes, use "the Federated States of Micronesia".
	Republic of Korea	Do not use "South Korea". Never use the term "Korea" on its own.
	Viet Nam	Do not use "Vietnam".

Italicize the Latin names of genera, species and subspecies (if any), giving the generic name an initial capital. Even when derived from a proper name, specific and subspecific names do not have initial capitals.

> *Anopheles gambiae, Chamomilla recutita, Salmonella dublin,*
> *Wuchereria bancrofti pacifica, Yersinia pestis*

Once you have identified the genus in a given context, you can abbreviate further mention to the initial capital letter, such as *S. dublin*, *Y. pestis*, unless this leads to ambiguity.

Common names (not italicized) may be used for certain genera and species.

> pseudomonad, salmonella, blackfly, gorilla

Both one- and two-word names for viruses are in use.

> herpesvirus, papillomavirus, poliovirus, retrovirus, *and*
> cowpox virus, influenza virus (including A(H1N1)pdm09), mumps virus, rubella virus

See the website of the International Committee on Taxonomy of Viruses (ICTV; http://www.ictvonline.org/virusTaxonomy.asp?bhcp=1, accessed 5 August 2013) for further information on virus taxonomy.

Chemical names

For chemical names, follow the International Union of Pure and Applied Chemistry (IUPAC) rules, as interpreted by the American Chemical Society (see also Annexes 3 and 4). Some exceptions and spellings to note are:

- sulfur *instead of* sulphur
- aluminium *instead of* aluminum
- caesium *instead of* cesium.

Spell out chemical names in text unless the symbolic formula is graphically useful.

Currency units

In general, WHO information products use symbols or abbreviations for currencies. Do not use three-letter currency codes (GBP, USD, etc.) in these products. See Chapter 4 for guidance, examples and links to online sources of information.

Diseases and medical terms

Follow WHO terminology – based on the *International nomenclature of diseases* (IND), published by the Council for International Organizations of Medical Sciences (CIOMS) and CIOMS/WHO; 1979–1992 (see Annex 4) – for disease names and their spelling; otherwise, consult standard medical dictionaries, such as those given below.

- Dorland's [online database]. Philadelphia (PA): Elsevier; 2012 (http://www.dorlands.com/wsearch.jsp, accessed 18 April 2013 [subscription required]).

- Dorland's illustrated medical dictionary, 32nd edition. Philadelphia (PA): Saunders/Elsevier; 2011.

- Stedman's medical dictionary, 28th edition. Baltimore (MD): Lippincott, Williams & Wilkins; 2005.

In general, use British, rather than North American, spellings; see also Chapter 2 and Annex 3.

The International Classification of Diseases is a statistical classification, not a reference for nomenclature.

Eponymous names give no information about the nature of a disease, syndrome or test, and may vary between countries, so avoid them whenever possible. Where such names are needed, the following are correct.

> Chagas disease, Down syndrome, *but* Alzheimer's disease
> Southern blot (*but* northern, eastern, western blot)

Generic names

Use generic names, not trade names, whenever possible, to avoid the implication that WHO endorses or recommends a particular manufacturer's product (medicine, pesticide, item of medical equipment) in preference to others. If you must name a specific proprietary product, give it with an initial capital letter. You may need to justify its inclusion if the context is particularly sensitive. Contact the Office of the Legal Counsel for advice.

Medicines and pesticides

For pharmaceuticals, use the International Nonproprietary Names (INN) established by WHO. To find out more about INN and apply for copies or access, go to the WHO headquarters website (http://www.who.int/medicines/services/inn/en).

For pesticides, use the common names adopted by the International Organization for Standardization (see ISO 1750:1981, and subsequent addenda and amendments). Use an approved national name when no internationally approved name exists. Again, avoid proprietary names whenever possible.

Units of measurement

WHO uses the International System of Units. See Chapter 3 for details.

2. Spelling and capitalization

Spelling

Because WHO style is intended to make WHO information products accessible by all users of English, it does not follow any single set of national practices in handling English. It therefore uses a mix of British and North American spelling, which means that, no matter where staff learned their English spelling, all must change some of their habits. Achieving a consistent and correct appearance for all WHO information products, however, makes this chore worth while.

The general rule is to follow the first spelling listed in the latest edition of the *Oxford English dictionary* (on the intranet), but there are exceptions, including when:

- a different spelling has become established usage in WHO;
- WHO must follow the recommendations of international nomenclature-setting bodies.

The original spelling in quoted materials, references and names of organizations must be reproduced exactly.

Annex 3 lists the examples and exceptions given here, as well as those in other chapters, in alphabetical order.

Spelling of medical terms

The spelling of disease names and other medical terms follows British rather than North American usage.

> anaesthesia, caesarean, centre, diarrhoea, faeces, gynaecology, haemorrhage, ischaemic, manoeuvre, oedema, oesophagus, pharmacopoeia, programme (*but* computer program)

Here are some of the exceptions used in WHO.

> amfetamine   fetal, fetus, etc.
> estrogen, estrus, etc. leukocyte, leukopenia
> etiology

See Chapter 1 for information on medical terms and the spelling and capitalization practices for eponymous names.

Running words together

One of the most important differences between WHO style and the *Oxford English dictionary* is the use of hyphens. WHO uses fewer hyphens, uses them more

consistently and runs words together when appropriate. In general, run words together when joining prefixes and suffixes to root words or making compound words; use hyphens only when this involves repeating a vowel or could cause confusion. See the examples here and in Chapter 5.

Prefixes

Table 3 gives examples of the use of many common prefixes.

Suffixes

Words ending in -ize, -ise, -yse

Note that -ize is a suffix added to convert nouns and adjectives (such as character, real and sympathy) into verbs, and the primary spelling in the *Oxford English dictionary*; -ise is an integral part of the roots of some words. Use -yse, not -yze. See Table 4 for examples.

Table 3.   Use of prefixes

Prefixes	Examples
ante-	antemortem, antenatal
anti-	antibacterial, anticoagulant, antidepressant, antiepileptic, antimalarial, antimicrobial, antioxidant, antiretroviral, antismoking (*and* anti-infective)
co-	coauthor, coenzyme, coexist(ence), cofactor, coinfection, cosponsor (*and* cooperate, coopt, coordinate)
contra-	contraindicate, contraindication
hyper-	hyperactive, hyperkalaemia, hypertension, hyperthermia, hypertonic
hypo-	hypocalcaemia, hypomagnesaemia, hypotension, hypothermia, hypothesis
inter-	intercountry, intergovernmental, interregional, interrelated, intersectoral
intra-	intracellular, intramuscular, intraocular, intraregional, intrauterine, intravenous (*and* intra-abdominal)
micro-	microbiology, microeconomics, microprocessor (*and* microorganism)
multi-	multidrug, multifaceted, multilateral, multinational, multipurpose, multisectoral
non-	noncommunicable, nonentity, nongovernmental, nonproprietary (*and* non-ionized, non-profit-making)
over-	overestimate, overproduction, overreport, overrule, oversimplify, overuse
post-	postbasic, postmortem , postnatal, postoperative, postpartum
pre-	precondition, preinvestment, prenatal, preoperative, preplanned, prepubescent, prerequisite, preventive (*and* pre-eclampsia)
re-	reform (*but* re-form), reinfect, reinsure, reopen, resect, reuse (*and* re-establish, re-examine)
sub-	subcategory, subcommittee, subcutaneous, subgroup, sublethal, subnational, suboptimal, subparagraph, subregion, subsample, subunit (*but* sub-Saharan, sub-Sahelian)
under-	underdeveloped, underestimate, underrate, underreport, underserved , underuse, underweight

Table 4. Verbs ending in -ize, -ise and -yse

Verbs ending in -ize				Verbs ending in -ise	Verbs ending in -yse
acclimatize	equalize	minimize	scrutinize	advise	analyse
alphabetize	finalize	mobilize	sensitize	comprise	catalyse
anabolize	generalize	neutralize	specialize	compromise	dialyse
antagonize	harmonize	optimize	stabilize	devise	hydrolyse
apologize	homogenize	organize	standardize	exercise	lyse
authorize	hospitalize	oxidize	sterilize	franchise	paralyse
capitalize	hypothesize	pasteurize	stigmatize	improvise	
categorize	immunize	prioritize	summarize	practise	
centralize	ionize	publicize	synthesize	premise	
criticize	jeopardize	randomize	tranquillize	promise	
decentralize	localize	rationalize	utilize	revise	
desensitize	maximize	realize	vaporize	supervise	
emphasize	metabolize	recognize	visualize	surprise	

Here are examples with two other suffixes: -borne and -wide.

> airborne, bloodborne, foodborne, waterborne, *but* louse-borne, tick-borne,
> vector-borne
> countrywide, nationwide, worldwide, *but* World Wide Web

Be careful to spell nouns ending in -our correctly.

> behaviour, colour, harbour, honour, neighbour

Doubling consonants with suffixes

For words of a single syllable, or ending in a stressed syllable consisting of a single vowel and a consonant, double the final consonant on adding -ed or -ing.

> allot -**t**ed -**t**ing   format -**t**ed -**t**ing   refer -**r**ed -**r**ing
> commit -**t**ed -**t**ing   occur -**r**ed -**r**ing   stop -**p**ed -**p**ing

For similar words that are not stressed on the last syllable, do not double the last consonant on adding -ed or -ing.

> benefit -ed -ing   budget -ed -ing   market -ed -ing
> bias -ed -ing   combat -ed -ing   parallel -ed -ing
> bracket -ed -ing   focus -ed -ing   target -ed -ing

Except for "parallel" (above), double the final consonant of words ending in -l, no matter whether they are stressed on the last syllable.

> counsel -**l**ed -**l**ing   label -**l**ed -**l**ing   repel -**l**ed -**l**ing
> enrol -**l**ed -**l**ing   level -**l**ed -**l**ing   signal -**l**ed -**l**ing
> fulfil -**l**ed -**l**ing   model -**l**ed -**l**ing   travel -**l**ed -**l**ing
> instil -**l**ed -**l**ing   panel -**l**ed -**l**ing   tunnel -**l**ed -**l**ing

Compound words

In general, do not use hyphens in compound words, as shown by these examples.

> breastfeeding, cardiovascular, cerebrospinal, email (but e-health, e-learning), gastroenteritis, genitourinary, homepage, immunocompromised, nephrotoxic, neurobehavioural, osteoarthritis, pharmacogenetics, psychosocial, radioimmunoassay, socioeconomic, socioenvironmental, videoconference, webpage, website

Setting the spellchecker tool on your computer

Use the WHO spelling dictionary to increase the correctness of your information products. WHO-recommended spellings are incorporated into the default spellchecker dictionary for Microsoft Word 2010. To activate this function in Word:

- on the Review tab, click on "Set Language", then "Set Proofing Language"
- select "English (United Kingdom)" and ensure that the box labelled "Do not check spelling or grammar" is empty (no check or green square).

Choose "English (United Kingdom)" as the language for all documents that you create, if it is not the default language. In documents prepared by others, however, the language may be set at some other version of English, a different language or a variety of languages. In such cases, reset the language or copy the content into a new document of your own.

Careful checking of your documents remains as important as ever. The spellchecker is not perfect. It merely suggests WHO spellings, along with those proposed by the Microsoft dictionary. Similarly, if you misspell a word, but the misspelling is a real word in its own right (such as "heath" instead of "health"), the spellchecker does not highlight it as an error. Further, it does not address questions about the use of capitals and italics; in such cases, see below, Chapter 7 and Annex 3.

Capitalization

The modern tendency is to use fewer initial capitals (capitalizing the first letter of each word), so use capital letters sparingly and consistently within the same work. Some words, of course, require initial capitals simply because of their position in the text: for example, the first word in a sentence, heading or subheading (see also Chapter 7). When in doubt, do not capitalize. See Chapter 6 for examples of the use of capital letters in book, journal and website titles.

> *World report on violence and health* (book), *Lancet* (journal)

Always use initial capitals for proper nouns: the full, formal, exact names of people, institutions and organizations (and the titles of their staff), recognized geographical names (but not more general geographical descriptions), historical events and trade names. General terms or descriptive names (such as public health, human resources, health-system reform) do not take capitals. In addition, note that most proper nouns are specific and therefore singular (such as the WHO Regional Office for Europe), while the plural versions are general descriptions and thus do not take capitals (such as WHO regional offices). See further examples below and in Chapter 1.

When you have introduced a name in initial capitals, use the capitals consistently afterwards.

> WHO European Ministerial Conference on Counteracting Obesity, *so* Conference agenda, Conference documentation, Conference participants

When giving people's names in lists and in text for the first time, include both given names and surnames if possible. This helps to indicate whether people are male or female, which not only helps writers avoid sexist language (see Chapter 8) but also is useful to translators.

Use initial capitals for people's formal titles (such as "President", "Vice-President", "Director", etc.) when they appear immediately before the names, and do not separate a title from a name with a comma.

> WHO Director-General Margaret Chan

Nevertheless, when listing a group of people, present them consistently. For example, give courtesy titles for all or none.

> Professor B. Burgher, Mr J. Greaney, Dr J. Nicholson, Ms R. Okey

Institutions, organizations and job titles

> Léon Bernard Medal (or Prize)
> President of the Royal College of Physicians, the Royal College of Physicians
> Regional Adviser for Mental Health, WHO Regional Office for Europe
> United Nations (UN), its Charter, and the Charter's Chapters and Articles
> United Nations Economic and Social Council (ECOSOC)
> Universal Declaration of Human Rights

Geographical names

> Asia, *but* central Asian countries
> Commonwealth of Independent States (CIS), *but* newly independent states (NIS) (see also Chapter 3)
> Mediterranean Sea, *but* Mediterranean countries
> north(ern), south(ern), east(ern), west(ern), north-east(ern), south-west(ern) (directions)
> the Sahara, *but* sub-Saharan countries

Historical events

> First World War, not World War I
> Second World War, not World War II
> *but*
> century, such as 20th, 21st
> decade, such as the 1980s (see also Chapter 4)

Specific titles

Again, use initial capitals for specific titles or events (proper nouns).

> act *but* Medicines Act
> assembly *but* Second World Assembly on Ageing
> chairperson *but* Chairman of the World Health Assembly

classification *but* International Statistical Classification of Diseases and Related Health Problems, tenth revision
code *but* International Code of Marketing of Breast-Milk Substitutes
conference *but* Conference on Women and Health
convention *but* WHO Framework Convention on Tobacco Control
decade *but* United Nations Decade of Action for Road Safety 2011–2020
director *but* WHO Regional Director for the Western Pacific
goal *but* Millennium Development Goal(s)
government *but* Government of South Africa
health minister *but* Minister of Health of Belarus
health ministry *but* Ministry of Health, Welfare and Sport of the Netherlands
law *but* Law No. 263 on …
meeting *but* Meeting on Viral Hepatitis in Europe
memorandum *but* Memorandum of Agreement
plan *but* Mediterranean Action Plan
rapporteur *but* Rapporteur of the Meeting on AIDS Containment
staff rules *but* Staff Rules of WHO
state *but* the Federal State of Schleswig-Holstein
working group *but* Working Group on Air Quality Guidelines
workshop *but* Workshop on Health Promotion

When using plurals, drop the initial capital(s) on proper nouns. (See Chapter 1 for more information on capitalization of names in WHO.)

Government of France *but* European governments
the WHO Collaborating Centre for Nursing Development *but* WHO collaborating centres

Here is the most important exception to this rule.

WHO Member State(s)

Give parts of a document or a book in lower case, unless they are numbered.

the first five chapters, the annexes, the figure(s), *but* Chapters 1–5, Annex 2, Fig. 1–3

Exceptions

Exceptions in WHO usage to the rule of capitalizing specific things include the following.

agenda, agenda item
Regional Committee resolution EUR/RC62/R3, World Health Assembly resolution WHA65.2, Executive Board resolution EB131.R1
programme (of a meeting), programme on vaccine-preventable diseases and immunization
report on a WHO meeting
section 6 (in a publication)
Sixty-fifth session of the United Nations General Assembly

Generic and trade names

Use generic names, rather than trade names, if possible. If trade names are included, give them with initial capitals (such as Vaseline). See also Chapter 1.

3. Abbreviations and symbols

Abbreviations

An abbreviation is a shortened form of a word or phrase (such as "etc."); an acronym is an abbreviation formed from the initial letters of other words (such as "WHO"). Authors use abbreviations to save space in figures and tables and to avoid repeating the same word or phrase many times in a text. Use them sparingly in ordinary texts and avoid them if they lead to confusion or obscurity.

A few abbreviations for technical terms – such as HIV, AIDS, DNA, RNA – are so widely used that definitions are unnecessary. Further, some acronyms related to communications and technology are used without explanations, particularly in web texts.

> ALT (text), CD, DVD, HTML, PDF, SMS, URL, XML

Introduce all other abbreviations, however, by giving the term in full, followed by the abbreviation in parentheses.

> The spokesperson for the United Nations Children's Fund (UNICEF) said …
> The purpose of primary health care (PHC) …
> Diseases such as tuberculosis (TB) and poliomyelitis (polio) …

Afterwards, use the abbreviation only, even in headings and illustrations. On websites, however, introduce the abbreviation on each page on which it is used. In addition, for the sake of brevity, you can use an unexplained abbreviation in web headlines, as long as you introduce it properly in the following text.

The use of capitals in an abbreviation, such as PHC, does not require their use in the full term (see Chapter 2). If a text includes many abbreviations, provide a list of them, with a definition for each, in the preliminary pages (see Chapter 7), in addition to introducing them in text. Maintain correct capitalization of parent terms in the list (see examples on the following pages).

In formal texts, say "that is" rather than "i.e.", and "such as" or "for example", rather than "e.g.".

Apart from the specific cases outlined below, use a full point to end an abbreviation (which shortens the parent word or phrase or uses selected letters from it), but not for a contraction (an abbreviation that ends with the last letter of the parent word). Do not abbreviate Professor.

> *abbreviations*: Co., cont., ed., e.g., etc., Fig., i.e., spp.
> *contractions*: contd, Dr, Ltd, Mr, Mrs, Ms, St

Many abbreviations are used in references and bibliographies (see below and Chapter 6).

et al.   no., No.   p., pp.   rev.   Vol.

Spell out the names of the months in full when they appear in text.

The study was conducted in January 2012.

Medical abbreviations

The following acronyms and abbreviations are in common use in the medical sciences and in WHO information products. More extensive lists are available in the following publications.

- Fuller Delong M. Medical acronyms, eponyms & abbreviations, 4th edition. Los Angeles (CA): Health Information Press; 2002.

- Ritter RM, Stevenson A, Brown L, editors. New Oxford dictionary for writers and editors: the essential A–Z guide to the written word. Oxford: Oxford University Press; 2005.

Ab	antibody
Ag	antigen
ARI	acute respiratory infection
BCG	bacille Calmette–Guérin (vaccine)
BMI	body mass index
BMR	basal metabolic rate
BOD	biochemical oxygen demand
BP	blood pressure
BSE	bovine spongiform encephalopathy
CAT	computerized axial tomography
CHD	coronary heart disease
CJD	Creutzfeldt–Jakob disease
CNS	central nervous system
CSF	cerebrospinal fluid
CVD	cardiovascular diseases
DALE	disability-adjusted life expectancy
DALY	disability-adjusted life-year
DOTS	the basic package that underpins the Stop TB Strategy
DTH	delayed-type hypersensitivity
DTP vaccine	diphtheria–tetanus–pertussis vaccine
ECG	electrocardiogram, electrocardiography
ECT	electroconvulsive therapy
ED_{50}	median effective dose
EEG	electroencephalogram, electroencephalography
ELISA	enzyme-linked immunosorbent assay

ESR	erythrocyte sedimentation rate
F_1	first filial generation
GABA	gamma-aminobutyric acid
GFR	glomerular filtration rate
GLC	gas–liquid chromatography
Hb	haemoglobin
HBsAg	hepatitis B surface antigen
HBV	hepatitis B virus (*not* hepatitis B vaccine, which should be spelled out)
HDL	high-density lipoprotein (cholesterol)
HPLC	high-performance liquid chromatography
HPV	human papillomavirus
HRT	hormone replacement therapy
HTLV	human T-cell lymphotropic virus
Ig	immunoglobulin (IgA, IgD, IgE, IgG, IgM)
IL	interleukin
IR	infrared
IUD	intrauterine device
LD_{50}	median lethal dose
LDL	low-density lipoprotein (cholesterol)
MAb	monoclonal antibody
MHC	major histocompatibility complex
MRI	magnetic resonance imaging
NCDs	noncommunicable diseases
NMR	nuclear magnetic resonance
NSAID	non-steroidal anti-inflammatory drug
PCR	polymerase chain reaction
PCV	packed cell volume
polio	poliomyelitis
QALY	quality-adjusted life-year
SARS	severe acute respiratory syndrome
SDS-PAGE	sodium dodecyl sulfate–polyacrylamide gel electrophoresis
sp., spp.	species (singular and plural)
STI	sexually transmitted infection
TB	tuberculosis
TLC	thin-layer chromatography
TNF	tumour necrosis factor
TSE	transmissible spongiform encephalopathy
UV	ultraviolet
YLD	years lived with a disability

Names of organizations

WHO information products often include the following abbreviations of the names of international and other organizations.

ACC	Administrative Committee on Coordination
ACHR	Advisory Committee on Health Research
AGFUND	Arab Gulf Programme for Development
ASEAN	Association of South-East Asian Nations
AU	African Union
CDC	Centers for Disease Control and Prevention
CIDA	Canadian International Development Agency
CIOMS	Council for International Organizations of Medical Sciences
DANIDA	Danish International Development Agency
EC	European Commission, European Community
ECA	Economic Commission for Africa
ECDC	European Centre for Disease Prevention and Control
ECLAC	Economic Commission for Latin America and the Caribbean
EEC	European Economic Community
ESCAP	Economic and Social Commission for Asia and the Pacific
ESCWA	Economic and Social Commission for Western Asia
EU	European Union
FAO	Food and Agriculture Organization of the United Nations
FINNIDA	Finnish International Development Agency
GATT	General Agreement on Tariffs and Trade
IAEA	International Atomic Energy Agency
IARC	International Agency for Research on Cancer
IBRD	International Bank for Reconstruction and Development (World Bank Group)
ICAO	International Civil Aviation Organization
ICDO	International Civil Defence Organisation
ICMMP	International Committee of Military Medicine and Pharmacy
ICRC	International Committee of the Red Cross
IDA	International Development Association (World Bank Group)
IFAD	International Fund for Agricultural Development
ILO	International Labour Organization (Office)
IMF	International Monetary Fund
IMO	International Maritime Organization
IOM	International Organization for Migration
ITO	International Trade Organization
ITU	International Telecommunication Union

Norad	Norwegian Agency for Development Cooperation
OAS	Organization of American States
OECD	Organisation for Economic Co-operation and Development
OIE	World Organisation for Animal Health
OPCW	Organisation for the Prohibition of Chemical Weapons
Sida	Swedish International Development Cooperation Agency
UICC	International Union against Cancer
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNCTAD	United Nations Conference on Trade and Development
UNDCP	United Nations International Drug Control Programme
UNDP	United Nations Development Programme
UNDRO	Office of the United Nations Disaster Relief Coordinator
UNECE	United Nations Economic Commission for Europe
UNEP	United Nations Environment Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFDAC	United Nations Fund for Drug Abuse Control
UNFPA	United Nations Population Fund
UNHCR	Office of the United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNIDO	United Nations Industrial Development Organization
UNITAR	United Nations Institute for Training and Research
UNODC	United Nations Office on Drugs and Crime
UNRISD	United Nations Research Institute for Social Development
UNRWA	United Nations Relief and Works Agency for Palestine Refugees in the Near East
UNSCEAR	United Nations Scientific Committee on the Effects of Atomic Radiation
UPU	Universal Postal Union
USAID	United States Agency for International Development
WCC	World Council of Churches
WFP	World Food Programme
WFUNA	World Federation of United Nations Associations
WIPO	World Intellectual Property Organization
WMO	World Meteorological Organization
WTO	World Trade Organization

Symbols

Symbols, which can be alphabetic, alphanumeric or graphic in form (such as ©
for copyright), are used to represent quantities, units, substances, chromosomes
and mathematical operations. They are often abbreviations.

When showing amounts with unit symbols and abbreviations, separate the figures
from the unit symbols with non-breaking spaces. To avoid ambiguity, do not use
more than one forward slash to divide units. See Chapter 4 for further examples.
Superscript and subscript letters and numbers can be used in publications, but
not on webpages.

> 7 kg not seven kg
> m/s^2 (or $m \cdot s^{-2}$) not m/s/s.

For complex mathematical formulations, refer to *Scientific style and format: the
CSE manual for authors, editors, and publishers, 7th edition* (Reston (VA): Council
of Science Editors in cooperation with Rockefeller University Press; 2006). See
also the section on mathematics and statistics in Chapter 4.

Figures and tables often have footnotes showing levels of statistical significance,
using a single asterisk (*) for the lowest level of significance, two (**) for the next
level and so on. See Chapter 7 for an example.

Units of measurement

In 1977, World Health Assembly resolution WHA30.39 recommended the
adoption of the International System of Units (SI) by the entire scientific
community, and particularly the medical community, throughout the world.
WHO information products should therefore always use SI units. Full details of
the SI are available on the Internet (http://www.bipm.org/en/si).

Exceptionally, values for blood pressure may still be given in millimetres of
mercury with the equivalent in kilopascals in parentheses.

> 120 mmHg (16 kPa)

Here is a list of the most commonly used symbols, including those used for the SI
base units. Use them only after a quantity expressed in figures, and in tables and
graphs; see Chapter 4 for examples.

ampere	A	microgram	µg
becquerel	Bq	milligram	mg
centimetre	cm	millimetre	mm
degree (angular)	°	minute (of time)	min
degree Celsius	°C	mole	mol
gram	g	newton	N
hour	h	second (of time)	s
kilogram	kg	sievert	Sv
kilometre	km	tonne	t
litre	L	volt	V
metre	m	watt	W

In addition to the symbol L, you can still use the word "litre", but do not abbreviate it as "l", which readers may confuse with the numeral 1.

A compound abbreviation may sometimes be used to indicate a relationship between two different units of measurement.

mg/kg, km/h

The SI incorporates the following prefixes to form multiples of SI units (Table 5).

Table 5.   SI units

Factor	Prefix	Symbol	Factor	Prefix	Symbol
10^{-1}	deci	d	10^1	deca	da
10^{-2}	centi	c	10^2	hecto	h
10^{-3}	milli	m	10^3	kilo	k
10^{-6}	micro	µ	10^6	mega	M
10^{-9}	nano	n	10^9	giga	G
10^{-12}	pico	p	10^{12}	tera	T
10^{-15}	femto	f	10^{15}	peta	P
10^{-18}	atto	a	10^{18}	exa	E

To avoid using more than one forward slash to divide units, use "per" in place of the second solidus or use an exponent, if appropriate.

g/kg per day, m/s^2

P values

Give the probability symbol as an italicized capital *P*.

$P > 0.05$

Percentages

Use figures and the percentage symbol to express percentages, not "per cent", except when starting a sentence with a percentage. Leave no space between the figure and the symbol.

The incidence rate increased by 20% between 1994 and 1997.
Vaccination coverage ranged between 80% and 90%; the target was 95–100%.

4. Numbers

On webpages, give all numbers in figures.

In publications, use figures for numbers in groups, figures and tables, and ranges, and with units of measurement. In running text, give numbers zero to nine in words and 10 and higher in figures. Write out a number starting a sentence, if you cannot rephrase the sentence to avoid it.

> The physician saw nine patients on Tuesday and 10 on Wednesday.
> In the past few years, 127 institutional lists of essential drugs have been updated.
> Of the 75 samples tested, 15 were positive.
> Twenty-four per cent of sentinel specimens tested positive for influenza.

Where a number consists of **more than four digits**, do not insert a comma. Insert a non-breaking space (Control + Shift + Spacebar) before every set of three digits, counting from the right or left of the decimal point.

> 275 000 inhabitants, per 100 000 population, 0.234 56, *but* page 1743

In tables, apply this rule to figures consisting of **more than three digits**. For large figures, combine numerals and words.

> 3 million, *not* 3 000 000
> 3.5 million, *not* 3 500 000, *but* 3 574 987

In specific numerical contexts, such as with unit symbols and abbreviations (see Chapter 3), use a non-breaking space to separate the figure from the unit.

> The health clinic was 3 km from the village.
> The budget for the programme was US$ 3 million.
> For further information, see Chapter 5.

Write non-decimal fractions in words, not figures, and do not hyphenate them.

> Two thirds of the patients showed symptoms of the disease.
> Four fifths of the participants were female.

Currency

Give an amount of money before the currency name when the name is written in full, but after the abbreviation or symbol when that is used. Where an abbreviation is a letter or letters, or a combination of letter(s) and symbol, give a non-breaking space between the abbreviation and the amount. Where a symbol is used to represent the monetary unit, give no space between the symbol and the amount.

> 10 000 manats, US$ 6000, €200, £19.95.

Do not use WHO's three-letter currency codes (EUR, GBP, USD, etc.) in information products; they are for internal use only. When discussing a currency without a particular amount, give the name in full and lower case.

> millions of euros, the strength of the rouble

When two or more countries use the same name for their currencies, distinguish between them by using the appropriate adjective at the first mention, or throughout the text if confusion is possible.

> 100 Australian dollars, 100 Canadian dollars, 100 US dollars
> 100 Egyptian pounds, 100 pounds sterling

Some commonly used currency units and the appropriate abbreviations are listed in Table 6; for further information, see UNTERM (http://unterm.un.org, accessed 5 August 2013).

Table 6.   Commonly used currency units and abbreviations

Country or area	Currency unit	
	Name	**Abbreviation**
Canada	Canadian dollars	Can$
China	yuan	¥
Congo	CFA francs	CFAF
Denmark	Danish kroner	DKr
Egypt	Egyptian pounds	LE
EURO zone	Euros	€
India	Rupees	₹
Japan	yen	¥
Philippines	pesos	₱
Russian Federation	roubles	Rub
Switzerland	Swiss francs	Sw.fr.
United Kingdom	Pounds sterling	£
United States of America	US dollars	US$

Examples

Always use figures for ages, dates, decades, units of measurement, times of the clock, temperature, scales and page references.

> children aged under 5 years, 6 months old, the group aged 18–29 years
> a 27-year-old, a woman aged 27 years, *but* a woman in her twenties
> 1:500 000 (*map scale*), p. 12, pp. 15–29

Write dates in the following order, with no commas: day, month (spell out in full), year. Avoid beginning a sentence with a year.

> 17 May 2011, a meeting held on 12–15 September 2011, a meeting held on
> 31 October–3 November 2011

For decades, do not give an apostrophe before the "s".

> 1840s, the mid-1980s, 1990s

For the time of day, use the 24-hour clock.

> 06:00, 12:00, 16:30

Give temperature in degrees Celsius. The degree sign is part of the unit; place it next to the C.

> 7 °C, 20–25 °C

Give percentages and quantities that can be measured by an instrument or apparatus in Arabic numerals and the accompanying units as abbreviations (see Chapter 3 for more on units).

> 77%, 2 L, 12 km, 3 g

Ranges

Presentation

Express a range **either** in words (usually using "from" and "to" or "and") **or** with an en rule. (See Chapter 5 for more information on en rules.) Here are two correct ways to give the same information.

> The meeting took place *from* 16 *to* 18 October. The consultation lasted *from* three *to* four hours and the participants discussed *from* nine *to* 13 cases. The consultant spent *between* three *and* four days on the project and reviewed *between* nine *and* 13 cases.

> The meeting took place *on* 16–18 October. The consultation lasted 3–4 hours and the participants discussed 9–13 cases. The consultant spent 3–4 days on the project and reviewed 9–13 cases.

Do not mix words and en rules in giving ranges. The following examples are wrong, because they combine "from" with en rules, rather than using "to" or "and".

> The meeting took place *from* 16–18 October. The consultation lasted *from* 3–4 hours and the participants discussed *from* 9–13 cases. The consultant spent *between* 3–4 days on the project and reviewed *between* 9–13 cases.

When giving a range with negative numbers, such as minus degrees in cold-chain instructions, use words, not an en rule, to avoid confusion.

> *from* –30 °C *to* –10 °C

The numbers in a range should be homogeneous.

> 60 00 000–70 000 000 *or* 60–70 million, *not* 60–70 000 000
> 1989–1995, *not* 1989–95

Units of measurement

When a quantity is expressed by two numbers covering a range and the name of the unit is written in full, give the name once only, after the second number.

> The rate ranges from about 28 to 49 live births per 1000 population.

When using an abbreviation or symbol for the name of the quantity and introducing the range with a preposition, repeat it in the range.

> The case fatality rate declined from 8% to 4% between 1974 and 1977.
> Vaccination teams travelled between 15 km and 18 km a day.

When using an en rule, not a preposition, however, give the abbreviation or symbol once only, after the second number. See also Chapter 3.

> Weigh out 0.15–0.20 g of dried extract.
> In 80–90% of children …

Mathematics and statistics

Mathematical matter and equations

Use italics for mathematical variables and certain physical constants, but Roman type for operators (such as +, =, division and multiplication and integral signs), abbreviations (such as log, sin and exp) and representations of pure numbers (such as e and i).

Make the spatial representation of terms clear. When several types of bracket (see Chapter 5) have to be used in a mathematical expression, the sequence should be $\{\,[\,(\,\dots\,)\,]\,\}$.

Write mathematical formulae in a way that takes up as little space as possible except when this could impede understanding or cause confusion. For examples, see the following references.

- The Chicago manual of style online [website]. Chicago (IL): University of Chicago; 2010 (http://www.chicagomanualofstyle.org/home.html, accessed 22 April 2013 [subscription required]).

- The Chicago manual of style: the essential guide for writers, editors, and publishers, 16th edition. Chicago (IL): University of Chicago Press; 2010.

- Scientific style and format: the CSE manual for authors, editors and publishers, 7th edition. Reston (VA): Council of Science Editors in cooperation with Rockefeller University Press; 2006.

Mark thin spaces before and after mathematical operators, except when + or – is used to indicate a positive or negative number (such as –6) and around a medial multiplication point or forward slash.

Equations for display should be clearly marked, and guidance provided on where to break those that are too long to fit on one line (preferably before an operational sign and not in the middle of a term). The second line may be set flush right, a standard indentation from the right margin or aligned on operational signs. Equations (whether in line or displayed) that form parts of sentences may need punctuation depending on their context.

Statistics

Table 7 lists symbols recommended by the International Organization for Standardization.

Table 7.   Symbols

Term	Symbol
Variable in a population	$X, Y, \ldots$
Particular or observed value	$x, y, \ldots$
Population or lot size	N
Sample size	n
Range of a sample	w, R
Arithmetic mean of a population	$\overline{X}$
Arithmetic mean of a sample	$\overline{x}$
Variance of a random variable or of a population	σ^2
Variance of a sample	s^2
Standard deviation of a random variable or of a population	σ
Standard deviation of a sample	s
Coefficient of correlation between 2 random variables in a population	ρ
Coefficient of correlation in a sample	r
Number of degrees of freedom	v
Standard normal variable	U, Z
Particular value of the standard normal variable	u, z
Chi-squared distribution	χ^2
t-distribution (Student)	t
F-distribution	F
Level of significance of a test, type I risk/error	α
Type II risk/error	β
Probability of an event E	$P(\text{E})$

Several abbreviations are used in running text after being introduced (see Chapter 3).

CI	confidence interval	PPV	positive predictive value
df	degrees of freedom	ROC	receiver operating characteristic
IQR	interquartile range	RR	relative risk, risk ratio
NPV	negative predictive value	SD	standard deviation
OR	odds ratio	SE	standard error

In statistical analyses, the mean should be supported by statistics such as the number of observations, the standard deviation (a measure of the variability of a set of data) or the standard error (a measure of the precision of an estimate, commonly the mean). The correct form is SE = 1.3; avoid presenting variability in the form SE = ±1.3, which wrongly implies that SE can be negative.

Probability values (P values) are usually quoted in the form "$P < 0.0001$".

When a 95% confidence interval (CI) is given for a value that has units, the units need not be repeated after the interval.

(mean age: 37 years; 95% CI: 28–39)

5. Punctuation

Punctuation eases reading and clarifies meaning. Well written text requires the minimum of punctuation. If a text requires a great deal of punctuation to be clear, rewrite it.

Formatting

Give punctuation marks in the same style and type font as the rest of the text.

Give one space after every punctuation mark. The exception is in people's names; give one space between the full stop after the last initial and the following surname.

   Dr P.M. Charlton, Professor C.H. Hansen

In English, set the colon, semicolon, question mark and exclamation point (: ; ? !) close up to the preceding word, with no separating space. Similarly, give no spaces around forward slashes (/) or the en rule (–) in numerical ranges (see also Chapter 4).

Full point (.)

Use a full point, or period, at the end of every sentence, after the initials of people's given names and with certain abbreviations (see Chapter 3). If a sentence ends with an abbreviation, use only one full point.

Do not use full points in phrases used as labels: headings in text (including chapter titles), captions on illustrations, legends in figures, column headings in tables or running headlines in publications.

Rather than a full point, use a question mark at the end of a direct question.

Comma (,)

The main purposes of commas are to prevent ambiguity and to indicate parenthetical expressions (see example in the section on brackets). Correct usage of commas is often a question of judgement, but using a lot of them is old fashioned.

You can use a comma when a conjunction connects two clauses in a sentence. Also use them when using "however" or "moreover" in the middle of a sentence.

   A poll was taken, and the members agreed to support the initiative.
   A poll was taken, however, and the members agreed to support the initiative.

In a list of three or more items, use a comma before the final "and" only when it is needed for clarity.

> Patients were prescribed a combination of drug treatment, light exercise and a special diet.

> The plan should include such elements as: reforming existing legislation and policy, building capacity for research, strengthening services for victims, and developing and evaluating preventive interventions.

Use a comma to introduce a quotation (see also Chapter 7).

> At the press conference, the chief researcher said, "The results of the study are encouraging, but more work is needed in the area."

Semicolon (;)

Use a semicolon (or full point, but not a comma) to separate main clauses that have different subjects and are not connected by a conjunction.

> A poll was taken; the members agreed to support the initiative.

Also use it to divide list items in a sentence, if the items already include commas or are very long (see also the section on lists in Chapter 7).

> The institute performed the following tasks: data verification; data presentation in maps, figures and tables; and report compilation and editing.

Colon (:)

The colon has three main uses:

- to mark the contrast between two statements more sharply than a semicolon
- to introduce a list or series (never followed by a dash)
- to indicate that a second statement explains or amplifies the first.

> Rich countries could afford to implement the intervention: poor countries could not. The participants came from three countries: Denmark, the Netherlands and Ukraine. The situation in some countries is disturbing: life expectancy at birth is actually falling.

Colons are also used to indicate ratios; give a non-breaking space on either side of the colon.

> The physician–patient ratio is 1 : 170 in Cuba.

Brackets ([ ], ( ), { })

The word "brackets" usually signifies square brackets. Parentheses are round brackets, and curly brackets (used in mathematical expressions and to group items in a table) are called braces.

Square brackets:

- indicate words interpolated in quotations (their contents do not affect the punctuation of the quotation; see Chapter 7);

- enclose explanations in text made by someone other than the author; and
- in reference lists, enclose English translations of items that are in other languages and indicate some kinds of electronic information product.

> Henkilöliikennetutkimus 1992 [Nationwide passenger transport survey 1992]. Helsinki: Finnish National Road Administration; 1993 (Finra Reports, No. 58) (in Finnish).

> European Health for All database [online database]. Copenhagen: WHO Regional Office for Europe; 2011 (http://www.euro.who.int/en/what-we-do/data-and-evidence/databases/european-health-for-all-database-hfa-db2, accessed 15 April 2013).

Parentheses are used in text and references (see Chapter 6). Use parentheses sparingly, since they tend to break up sentence structure and can disturb the logical flow of ideas.

Mark off a parenthetical phrase or clause in text by parentheses or a pair of commas (see above) or en rules (see below), depending on its length and the closeness of its relationship to the sentence.

> The study (which was difficult to carry out) gave valuable results.
> The study, which was difficult to carry out, gave valuable results.
> The study – which was difficult to carry out – gave valuable results.

Dashes

WHO uses two dashes: the hyphen and the en rule.

Hyphen (-)

A hyphen promotes clarity by connecting words that are more closely linked to each other than to the surrounding words. There are no strict rules for its use, but using it only where clarity demands is preferable in general. Some compound words remain hyphenated irrespective of their grammatical use.

> well-being, end-point, side-effect, Director-General, capacity-building, decision-maker/making, policy-maker/making, priority-setting

Overall, people tend to use hyphens less often than in the past. Follow the general rules below.

Prefixes

Use a hyphen after a prefix:

- to prevent a word being mistaken for another
- to avoid doubling a vowel or a consonant
- to link the prefix to a word beginning with a capital letter.

> co-op, re-cover, re-treat, un-ionized (*to prevent their being mistaken for* coop, recover, retreat, unionized, *respectively*)
> anti-inflammatory, meta-analysis, re-emerging, *but* cooperate
> anti-Darwinian

See also Chapter 3.

Compound adjectives

Use a hyphen when:

- a compound adjective is followed by a noun
- a noun is used as an adjective
- an adverb might be mistaken for an adjective.

> up-to-date information, *but* information that is up to date; long-term solution, *but*
> solution for the long term; high-quality care, *but* care of high quality
> breast-milk substitutes
> little-used car *but* little used car

In general, do not use a hyphen if the first word of a compound adjective is an adverb. (Adverbs usually end in "-ly" but also include such words as "very" and "well".)

> recently available information, newly infected patients, well designed study

If a compound adjective requires three or more hyphens or mixes hyphens and en rules, it is too long. Such adjectives look ugly and can confuse readers, so rewrite them to show the relationships between the words.

> fetal-growth–weight-peak-velocity point *becomes* the point at which the fetus grows
> and gains weight most quickly
> anti-drink–driving measures *becomes* measures against drink–driving

Word breaks

Use hyphens to break words at the ends of lines only in justified text (aligned along both the left and right margins). The 11th edition of *Merriam-Webster's collegiate dictionary* (Springfield (MA): Merriam-Webster; 2003 (updated 2009)) gives syllable breaks and appropriate hyphenation points.

Do not break words in ragged-right text alignment (aligned along only the left margin).

En rule (–)

The en rule is a little longer than a hyphen – about the width of an N – hence its name. While the easiest way to make an en rule in Microsoft Word is to press CTRL + minus sign on the numeric keypad, this does not work in all media; pressing ALT + 0150 on the numeric keypad does.

Use en rules:

- to set off parenthetical expressions (see example above);
- to indicate ranges of numbers (see Chapter 4);
- to indicate a close relationship between two nouns (when the en rule can be thought of as standing for "and" or "to"); and
- to show periods of two or more complete years.

> cause–effect relationship, cost–benefit analysis, cost–effectiveness, drink–driving,
> nurse–physician ratio, the 2012–2013 biennium

Give en rules **without** a space on either side, except in parenthetical expressions.

> children aged 1–5 years, 15–20%, 21–25 January, 31 October–3 November 2012

Quotation marks (" ")

Use double quotation marks for brief direct quotes, and single quotation marks (' ') only for direct quotes within brief direct quotes (see Chapter 7 for examples). Never use emphasis or scare quotes; they can confuse the reader. To cast doubt on the accuracy of a term, use "so-called".

> so-called soft data, *not* "soft" data *or* 'soft' data

In web texts, use quotation marks, rather than italics, for the titles of books and journals.

Forward slash (/)

Use a forward slash (also called a solidus) to denote time periods, such as academic and fiscal years, that encompass parts of two consecutive calendar years, and to link two words that can be used interchangeably.

> 2011/2012, and/or

Apostrophe (')

Apostrophes usually show possession. Do not use them to make contractions of verbs. Add an apostrophe, followed by an "s", to singular nouns, even if they end in "s", and to plural forms of nouns that do not end in "s". Add an apostrophe to plural forms of nouns that end in "s".

> the doctor's patients, James's research project, the children's mother, women's health
> the participants' contact details

To show joint possession, add an apostrophe followed by the letter "s" to the last noun.

> Strunk & White's book on style

Do not use apostrophes with possessive pronouns, as these already show possession.

> The patients completed their full course of treatment.
> The Executive Board made its decision.

Ellipsis (…)

Use an ellipsis to mark an omission in a quotation (see Chapter 7).

6. References and bibliographies

WHO information products must fulfil the ethical and legal requirements to acknowledge the sources of the information and opinions they give, and should provide readers with accurate and consistent links to additional, reputable and formally published information on a topic. (This excludes drafts, presentations and abstracts.) This acknowledgement can take two forms: references or a bibliography.

References comprise only the works cited in the text as sources of data or other information. A **bibliography** is a list of works relevant to the subject matter of the information product and recommended for further reading. If an information product has both, their contents must not overlap.

Authors are responsible for ensuring the accuracy, completeness and correct presentation of all references and bibliography items. The easiest way to do this is systematically to record complete information about the source materials during the writing process, not afterwards.

If the text has a large number of references, combine them in a list. If references are few, give them as footnotes. See the section on list style below for more detail.

In both references and a bibliography, each item must include enough information to enable the reader to identify and obtain it, so do not list anything that is not available to the public. The section below on formatting shows how to present this information for all forms of published material. For items that a publisher has accepted and is producing, give "(in press)", rather than the year of publication. Cite items that have been submitted to a publisher but not yet accepted as unpublished information. Do not list drafts, as readers cannot obtain them.

Citing unpublished information

Give unpublished findings in the text, not a reference list, in the following way.

([name of the authority cited], [name of institution], unpublished data *or* unpublished observations *or* personal communication, [date]).

Numerical and Harvard referencing systems

Use either a numerical or the Harvard system; do not combine them in the same product. (Numerical referencing is obligatory for the WHO Technical Report Series, and the preferred system for WHO publications.) Each has advantages and disadvantages.

With the numerical system, the references are numbered consecutively as they occur in the text and listed in the same order. The numerical system maintains the flow of the text, and the list is easy to compile. Unless sources are described in the text, however, the reader must turn to the reference list at the end to identify them. Also, revision usually requires the renumbering of citations in the text and the reference list, which is time consuming and open to error. Using reference-management software, however, solves this problem.

The Harvard system shows the author and date in the body of the text, and lists references alphabetically by the name of the first author (and year, if necessary). Its main advantage is that a reader familiar with the literature in the field may be able to identify the work cited without having to turn to the reference list. In addition, the date indicates how recent the work is. If many references are cited, however, long lists of authors may break up the text and make the argument hard to follow. In addition, discrepancies between the sources cited in the text and those given in the list often appear during the writing process, which must be settled during the production process, and the necessity of listing an author requires repeating the publisher's name for corporate publications.

Citing references in text

Numerical system

In the text, indicate references by numbers in parentheses (starting with 1). Give both numbers and parentheses in italics. Authors' names may or may not be mentioned.

> Hobbs & Wynn *(12)* have reported …
> A recent study in India *(3)* showed …

Harvard system

References may be given in two ways.

> Ballance, Smith & Jones (1998), Allsopp (2005) and WHO (2010b) reported …
> It was reported (Ballance, Smith & Jones, 1998; Allsopp, 2005; WHO, 2010b) that …

Formatting

The format for presenting items in a reference list or bibliography in WHO information products is based on the standards summarized in the International Committee of Medical Journal Editors (ICJME) *Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals: sample references* (Bethesda (MD): United States National Library of Medicine; 2013 (http://www.nlm.nih.gov/bsd/uniform_requirements.html, accessed 27 August 2013)) and detailed in Patrias K, Wendling DL (editor). *Citing medicine: the NLM style guide for authors, editors, and publishers, 2nd edition* (Bethesda (MD): United States National Library of Medicine; 2007 (http://www.ncbi.nlm.nih.gov/books/NBK7262/, accessed 27 August 2013)).

Authors must check references and bibliography entries against the original documents to ensure correctness. Give items in the language of their publication, complete with:

- surname(s) and initial(s) of author(s) or editor(s), listing all authors/editors when there are six or fewer, but giving only the first six authors' or editors' names and adding "et al." when there are seven or more, or the name(s) of the corporate author(s) (if none is named, the publisher is assumed to be the author);

- full title of item in Roman type (not italics), using initial capital letters:
  — for the first word and proper nouns only in book titles, such as "Guidelines for drinking-water quality"; and
  — for all major words in journal titles, such as Am J Public Health;

- complete publishing information, as appropriate for the type of each item and the medium in which it was published:
  — for books, edition (if necessary), city of publication and name of publisher; and for journals, volume number in Arabic numerals and, if possible, issue number (in parentheses);
  — year of publication; and
  — page number(s).

As so many information products are available online, give URLs, with access dates, for as many items as possible, particularly WHO products.

Exception: webpages

Webpages usually give links, rather than references. If you give references, however, do not give access dates.

Examples

Almost all the examples given below show the format used with the numerical system. Modify the format slightly if you are using the Harvard system, as shown here.

Numerical   Maher D, Ford N. Action on noncommunicable diseases: balancing priorities for prevention and care. Bull World Health Organ. 2011;89:547A (http://www.who.int/entity/bulletin/volumes/89/8/11-091967.pdf, accessed 3 August 2011).

Harvard   Maher D, Ford N (2011). Action on noncommunicable diseases: balancing priorities for prevention and care. Bull World Health Organ.89:547A (http://www.who.int/entity/bulletin/volumes/89/8/11-091967.pdf, accessed 3 August 2011).

Article in a journal

Use abbreviated journal titles according to the style used in the list of journals indexed for MEDLINE (http://www.ncbi.nlm.nih.gov/nlmcatalog?Db=journals&Cmd=DetailsSearch&Term=currentlyindexed%5BAll%5D) by the United States National Library of Medicine.

Garrett L, Chowdhury AMR, Pablos-Méndez A. All for universal health coverage. Lancet. 2009;374:1294–9. doi:10.1016/S0140-6736(09)61503-8.

Book

> Blas E, Sommerfeld J, Sivasankara Kurup A, editors. Social determinants approaches to public health: from concept to practice. Geneva: World Health Organization; 2011 (http://whqlibdoc.who.int/publications/2011/9789241564137_eng.pdf, accessed 4 October 2012).

> Wilkinson R, Marmot M, editors. Social determinants of health. The solid facts, second edition. Copenhagen, WHO Regional Office for Europe, 2003 (http://www.euro.who.int/en/what-we-publish/abstracts/social-determinants-of-health.-the-solid-facts, accessed 2 June 2012).

Chapter in a book or annex in a monograph

> Smith PC. Provision of a public benefit package alongside private voluntary health insurance. In: Preker AS, Scheffer RM, Bassett MC, editors. Private voluntary health insurance in development: friend or foe? Washington (DC): World Bank; 2007:147–67.

> WHO good manufacturing practices: water for pharmaceutical use. In: WHO Expert Committee on Specifications for Pharmaceutical Preparations: forty-sixth report. Geneva: World Health Organization; 2012: Annex 2 (WHO Technical Report Series, No. 970; http://apps.who.int/iris/handle/10665/75168, accessed 2 August 2013).

CD-ROMs, DVDs, podcasts and web videos

> Challenges still remain after the floods in Pakistan. Geneva: World Health Organization; 24 September 2010 [podcast]. Geneva: World Health Organization; 2010 (http://www.who.int/mediacentre/multimedia/podcasts/2010/pakistan_floods_20100923/en/, accessed 4 October 2012).

> The European health report 2009. Health and health systems [CD-ROM]. Copenhagen: WHO Regional Office for Europe; 2009.

> Johnstone M. I had a black dog, his name was depression [video]. Geneva: World Health Organization; 2012 (http://www.youtube.com/watch?v=XiCrniLQGYc, accessed 25 October 2012).

> VIHdeo America: an anthology of 10 years of HIV TV spots in the Americas [DVD]. Washington (DC): Pan American Health Organization; 2006.

Corporate author

Give corporate authors when their identity is different from that of the publisher. This situation arises more often now that WHO produces so many publications in partnership.

> European Centre for Disease Prevention and Control, WHO Regional Office for Europe. HIV/AIDS surveillance in Europe 2010. Stockholm: European Centre for Disease Prevention and Control; 2010 (http://www.euro.who.int/en/what-we-do/health-topics/communicable-diseases/hivaids/publications/2011/hivaids-surveillance-in-europe-2010, accessed 15 April 2013).

In the numerical system, if the corporate author is also the publisher, mention it as the publisher only.

> The world health report. Health systems financing: the path to universal coverage. Geneva: World Health Organization; 2010 (http://apps.who.int/iris/handle/10665/44371, accessed 2 August 2013).

Databases, electronic publications and websites

Give full references to these products in the references list; do not merely include URLs in the text in parentheses. In general, format these items as you would a print publication, with some additional information to indicate what they are and where and when you accessed them. Do not use italics for the names of databases or websites.

> Derry S, Moore RA. Topical capsaicin (low concentration) for chronic neuropathic pain in adults. Cochrane Database Syst. Rev. 2012;(9):CD010111.

> European health for all database [online database]. Copenhagen: WHO Regional Office for Europe; 2012 (http://www.euro.who.int/hfadb, accessed 3 August 2012).

> HBSC: Health Behaviour in School-aged Children: World Health Organization cross-national study [website]. St Andrews: Child & Adolescent Health Research Unit, University of St Andrews; 2012 (http://www.hbsc.org, accessed 11 October 2012).

> International travel and health 2012 [e-book]. Geneva: World Health Organization; 2012.

Section of a website

> Towards a new European public health action plan. In: WHO/Europe public health forum [website]. Copenhagen: WHO Regional Office for Europe; 2012 (http://discussion.euro.who.int/forum/topics/towards-a-new-european-public-health-action-plan, accessed 21 June 2012).

Dissertation or thesis

> Arnardóttir HE. Diet and body composition of 9- and 15-year-old children in Iceland [thesis]. Reykjavik: University of Iceland; 2005.

Document (numbered)

> Health 2020: a European policy framework supporting action across government and society for health and well-being. Copenhagen: WHO Regional Office for Europe; 2012 (EUR/RC62/9; http://www.euro.who.int/en/who-we-are/governance/regional-committee-for-europe/sixty-second-session/working-documents/eurrc629-health-2020-a-european-policy-framework-supporting-action-across-government-and-society-for-health-and-well-being, accessed 11 October 2012).

> Towards universal access to diagnosis and treatment of multidrug-resistant and extensively drug-resistant tuberculosis by 2015: WHO progress report 2011. Geneva: World Health Organization; 2011 (WHO/HTM/TB/2011.3; http://apps.who.int/iris/handle/10665/44557, accessed 4 October 2012).

Legal and government documents

Legal systems vary between countries, and the conventions for referring to legislation and judgements vary accordingly. The same is true for systems of government and the resolutions of parliaments.

When citing a court case in the body of a text the following style is suggested.

> Sidaway v. Bethlehem Royal Hospital Governors [1985].

When providing more comprehensive information in the reference list, the exact format will vary according to the conventions of the legal system in question, but may resemble the following style.

> Australian Federation of Consumer Organisations v. Tobacco Institute of Australia, 6.2 TPLR 2. Federal Court of Australia, 1991.

Legislation should be described according to local conventions.

> In Brazil, Order No. 490 of 25 August 1988 permits …
> Australia (Tobacco Plain Packaging Act 2011) and Spain (Royal Decree No. 1079/2002 of 18 October 2002 …

The information given in the citation may be sufficient to guide the reader to the source document. Alternatively, you can give more detail in a reference.

> Commission Decision of 5 July 2012 on setting up a multisectoral and independent expert panel to provide advice on effective ways of investing in health (2012/C 198/06). O. J. E. U. 2012, C 198:7–9 (http://eur-lex.europa.eu/LexUriServ/LexUriServ. do?uri=OJ:C:2012:198:0007:0011:EN:PDF, accessed 11 October 2012).

Meeting reports and decisions

You can refer to a statement recorded in a summary record of a meeting or to resolutions of the Executive Board, World Health Assembly and regional committees. Citing the year and number of a resolution in the body of the text is sufficient to allow the reader to look up the resolution.

> … as endorsed by the Sixty-fourth World Health Assembly in resolution WHA64.27 in 2011.
> … WHO Regional Committee for Europe resolution EUR/RC62/R6 on a strategy and action plan on healthy ageing in Europe, 2012–2020.

If you wish to include more comprehensive information in the reference list.

> Resolution WHA64.2. WHO reform. In: Sixty-fourth World Health Assembly, Geneva, 16–24 May 2011. Resolutions and decisions, annexes. Geneva: World Health Organization; 2011:2 (WHA64/2011/REC/1; http://apps.who.int/gb/ebwha/pdf_files/ WHA64-REC1/A64_REC1-en.pdf#page=21, accessed 4 October 2012).

> WHO Regional Committee for Europe resolution EUR/RC62/R6 on a strategy and action plan on healthy ageing in Europe, 2012–2020. Copenhagen: WHO Regional Office for Europe; 2012 (http://www.euro.who.int/en/who-we-are/governance/ regional-committee-for-europe/sixty-second-session/resolutions-and-decisions/ eurrc62r6-strategy-and-action-plan-on-healthy-ageing-in-europe,-20122020, accessed 11 October 2012).

Monograph in a series

> Currie C, Zanotti C, Morgan A, Currie D, de Looze M, Roberts C et al., editors. Social determinants of health and well-being among young people. Health Behaviour in School-aged Children (HBSC) study: international report from the 2009/2010 survey. Copenhagen: WHO Regional Office for Europe; 2012 (Health Policy for Children and Adolescents, No. 6; http://www.euro.who.int/en/what-we-publish/abstracts/social- determinants-of-health-and-well-being-among-young-people.-health-behaviour-in- school-aged-children-hbsc-study, accessed 16 April 2013).

WHO Expert Committee on Specifications for Pharmaceutical Preparations: forty-sixth report. Geneva: World Health Organization; 2012 (WHO Technical Report Series, No. 970; http://apps.who.int/iris/handle/10665/75168, accessed 2 August 2013).

Newspapers and television

Scientific information in WHO information products must refer to reliable, authoritative sources, so newspaper and magazine articles, or radio or television programmes, are unlikely to be the best references available. Nevertheless, you may need to cite them as sources of information on popular opinion or public statements.

The reference should provide sufficient information to guide the reader to the source. For printed articles, and radio and television programmes, it is essential to identify the day, month and year of publication or broadcast. It may also be helpful to provide information such as the section designator, the page number and possibly the column number for a newspaper, or the time of a broadcast. If the name of the country or city is not included in the title, add it in parentheses, if you know it.

Cite the names of writers of newspaper articles if they are given.

Dinsdale P. The GPs who are cutting hospital admissions. The Guardian. 19 March 2013 (http://www.guardian.co.uk/society/2013/mar/19/doctors-cutting-hospital-admissions; accessed 20 March 2013).

Sillig L. Les trois strategies de vaccination contre la malaria [The three strategies for vaccination against malaria]. Le Temps (Switzerland). 20 April 2013; Sciences & Environnement:12.

Transcript of virtual press conference with Dr Margaret Chan, Director-General and Dr Keiji Fukuda, Special Adviser to the Director-General on Pandemic Influenza. Geneva: World Health Organization; 10 August 2010 (http://www.who.int/entity/mediacentre/vpc_transcript_joint_2010_08_10.pdf, accessed 5 October 2012).

Published proceedings paper

Veen J. Tuberculosis control through harm reduction. In: Proceedings. International Conference on Prison and Health, De Leeuwenhorst, the Netherlands, 21 October 2004. Copenhagen: WHO Regional Office for Europe; 2005:20–3 (http://www.euro.who.int/__data/assets/pdf_file/0009/98982/De_Leeuwenhorst.pdf, accessed 2 August 2013).

References in languages other than English

Henkilöliikennetutkimus 1992 [Nationwide passenger transport survey 1992]. Helsinki: Finnish National Road Administration; 1993 (in Finnish).

List style
References

List references at the end of the full text or each chapter, as appropriate, and before any annexes. List references in annexes separately, at the end of the annex concerned. As mentioned, list items in numerical order in the numerical system,

or in alphabetical order, according to the first authors' surnames, in the Harvard system.

The Harvard system requires that each reference has a named author or be listed under Anonymous. List WHO information products without named authors under WHO or the name of the relevant regional office, such as WHO Regional Office for the Eastern Mediterranean. Cite authors' names in exactly the same spelling and form in both text and reference list.

List all the works attributed to one person together in chronological order by year of publication, starting with the earliest. A single-author entry comes before a multiauthor entry beginning with the same name.

> Bloggs PQ (1997)
> Bloggs PQ, Castro AF (2010)
> Bloggs PQ, Okey R (2003)
> Bloggs PQ, Okey R, Healy E, Castro AF, Smith J, Jones B et al. (2000)

Distinguish two or more works by the same author and published in the same year by letters after the date.

> Healy E (2011a) …
> Healy E (2011b) …

Bibliography

Give a bibliography at the end of a publication, before the index (if any). List the items alphabetically, according to the names of authors, as shown above. In a bibliography subdivided into sections by subject, give the items alphabetically within each section.

7. Formatting and illustrations

This chapter touches on a range of issues that need to be settled before WHO can print and/or post a publication. For fuller information, see the other information sources mentioned and those in Annex 4.

Preliminary pages

The preliminary pages must include the following: title page, title page verso (or title copyright page, with bibliographic data, copyright statement and disclaimer) and contents list. Then you can also give a foreword and/or preface, acknowledgements, list of contributors, list of abbreviations and executive summary, in that order. What to include depends on the nature of the publication and the needs of the reader.

Preliminary pages should have lower-case Roman page numbers, which begin with the title page, but do not become visible until the contents page.

Authorship

Do not list named authors for material that represents official WHO views and that meets specified criteria, including consistency with the Organization's policies. Issue such material under corporate authorship only. Mention people who have made a substantial intellectual contribution to the development of the text, however, in a preface or the acknowledgements (see below).

For material that WHO decides to publish, but that reflects the views of others, such as individuals or groups, and not necessarily the views of WHO, clearly identify on the cover and title page the name of the group whose views it represents (such as the Commission on Social Determinants of Health). Alternatively, indicate that the publication contains the views of multiple authors, attributing responsibility to the group or authors/editors in the disclaimer. In a publication with contributions by multiple authors, show clearly whose views are being expressed, identifying authors as appropriate (for example, on individual chapters).

When listing an author or other contributor, give not only his or her full name but also position, institution, city and country. Be consistent; if you give honorifics (such as Ms, Dr, Professor) to some authors in a list, supply them for all. For further information, see Chapter 1 and the WHO eManual, section VIII.2.1.

Copyright and disclaimers

Ensure that all printed, electronic and audiovisual materials issued by WHO bear a copyright notice, including the standard copyright line.

© World Health Organization [year]

The copyright notice also appears on the WHO website, accessible from the home page. This notice is not strictly necessary in all countries, but it is always useful in establishing copyright and avoiding infringement. WHO also has standard copyright notices and disclaimers for inclusion in printed and electronic materials, which are available on the intranets of WHO headquarters and the Regional Office for Europe.

For further information on copyright (including the policy on protecting WHO's copyright, joint copyright, transferring copyright and using copyright material owned by someone else), see the WHO headquarters intranet and the WHO eManual, section VIII.6.

Acknowledgements

If an acknowledgements section is necessary, acknowledge everyone who made a substantial intellectual contribution to the development of the publication, specifying the nature of the contribution. List the main contributors (external experts and WHO staff) first, in order of their respective technical contributions, followed by the individuals and/or groups or partners involved in reviewing and revising the text, in alphabetical order. This includes collaboration with partners, external and internal, and participants in relevant consultative meetings. List any WHO staff who are not the main contributors, but have nevertheless provided a substantial technical contribution, together and after any external contributors, in alphabetical order.

For reasons of transparency, note all financial contributions to the development of the publication and/or publishing costs in the acknowledgements, including those from commercial enterprises (if appropriate). Acknowledge financial contributions separately from technical contributions, but do not enlarge or highlight such acknowledgements to publicize donors' names, or give their names or logos on the covers of WHO publications.

Do not acknowledge WHO staff who support the publishing process in the normal course of their work. This includes editorial, design, graphics, administrative and secretarial staff.

For material with WHO corporate authorship, word the acknowledgements as coming from WHO. For material with named authors or editors, word the acknowledgements as coming from them.

For each person acknowledged, give his or her full name, position held (if appropriate), name of the institution, city and country, but no personal contact information. In preparing a manuscript, you must obtain permission of everyone proposed for acknowledgement. For further information, see the WHO eManual, sections VIII.2.1 and VIII.8.

WHO logo

The WHO emblem comprises the United Nations symbol surmounted by the Aesculapian staff; the logo comprises the emblem plus the name of the Organization or regional or other offices. Every WHO publication must carry the logo in the appropriate language, always given in at least the same size as any accompanying logos of partner organizations.

There are strict rules on WHO's use of its logo and those of its partners. For more information on WHO policies on its logo, see the WHO eManual, section VIII.8.1, which includes links to the WHO visual identity guidelines and related forms on the WHO headquarters intranet, and information and forms on the WHO Regional Office for Europe intranet.

Headings

Headings ensure consistency and provide clarity in information products, and particularly webpages, by indicating the hierarchy and structure of ideas in the text. When preparing a text for publication, use paragraph styles to mark each level of heading to ensure that the structure is accurately depicted on the page and formatting is consistent, and to make an accurate contents list in Microsoft Word.

Try to limit the number of heading levels to three.

Numbered headings are obligatory in the WHO Technical Report Series and may be used in other publications if warranted (for example, where there is extensive cross-referencing to the various sections). Be consistent; if you number one level of subheading, number them all.

3.   Specific food additives

3.1   Safety evaluations

3.1.1   Emulsifiers

Use initial capital letters for the first word of a heading and for any of the exceptions noted in Chapter 2, such as proper nouns.

Chapter 1. A human rights approach to tuberculosis

Definition of human rights by the United Nations

Headings are usually phrases, in contrast to text, which consists of complete sentences only. Do not use a full point or colon to end a heading or chapter title, and avoid headings asking rhetorical questions or ending with exclamation marks.

Added emphasis: italics, bold and underlining

Strong text does not need added visual emphasis. Avoid adding italics, bold and underlining in text, as they are easily overused.

Use italics in the texts of WHO publications for:

- the titles of books, journals and documents;
- foreign words and expressions not in common use (including Latin genera and species – see Chapter 1 for examples);
- variables in mathematical expressions (see Chapter 4); and
- certain letters, prefixes and terms in scientific use.

Do not use italics on webpages, as they are hard to read; use quotation marks for publication titles (see Chapter 5). Do not use italics for foreign words and expressions that are in common use.

ad hoc	ex officio	modus operandi	sine qua non
aide-memoire	fait accompli	modus vivendi	status quo
a priori	in camera	per capita	versus (*abbr.* vs)
avant-garde	in situ	per se	via
bona fide	inter alia	précis	vice versa
coup d'état	intifada	prima facie	viva voce
de facto	in vitro	pro rata	
et al.	in vivo	raison d'être	
etc.	laissez-faire	sensu stricto	

If you must use bold for emphasis, confine it to single words and phrases, not whole paragraphs.

Do not use underlining in text or headings; readers think it indicates web links.

Lists

Lists draw the reader's eye to particularly important text, sequences and hierarchies, and increase the scannability of webpages. Use them sparingly, however, or they lose impact.

To increase clarity and add emphasis, set items in a list apart by bullets or other symbols. Use numbers if the list has a large number of items or shows sequential steps or hierarchy, or if it is necessary to refer to a particular item. Try to limit the number of levels in a list to two, particularly on webpages. See an example of a two-level list in Chapter 6.

The formatting of a list (capitalization and punctuation) depends on the nature of the items; this determines whether the list comprises a single large sentence or a whole paragraph. See the examples below.

One large sentence

If each item is less than a complete sentence, the list actually comprises a single large sentence. In this case, use a colon to start the list, begin each item with a lower-case letter, and place a full point at the end of the last.

The various components of the microscope can be classified into four systems:

- the support system
- the magnification system
- the illumination system
- the adjustment system.

If some of the items are longer than one line, end each with a semicolon and place a full point at the end of the last.

> To develop services for preventing disability among the elderly, research is required in the following areas:
>
> - innovations in providing services and the use of technology, with special reference to systems analysis, operational research and consequence analysis (including cost–effectiveness);
> - ways of developing communication and links among primary health care institutions and other major elements in the service system (including self-help groups), particularly to allow competent and non-stressful transference of elderly patients between levels of care; and
> - organizational development in relation to the elderly person's access to all needed services and facilities.

Paragraph

If the items in the list comprise one or more complete sentences, the list is a paragraph. Begin each sentence with a capital letter, and end it with a full point.

> Fuerstein has written a seminal work on participatory evaluation, and suggests that a participatory evaluation in the development context include certain steps.
>
> - All those involved in a programme decide jointly to use a participatory approach. They decide exactly what the objectives of the evaluation are. This can turn out to be far harder than originally thought.
> - When agreement is reached, a small group of coordinators is elected to plan and organize the details.
> - The best methods for attaining the objectives are chosen. The capabilities of the people involved and the available time and other resources will influence this choice.

Figures, tables, boxes and photographs

Use illustrations – such as figures, tables and photographs – when they give information better or more economically than text. You can highlight particular points or explain the overall meaning of the data in the text, but do not merely repeat the data from illustrations.

On webpages, place illustrations, including infographics, near the related text.

In publications, number figures and tables separately and consecutively (e.g. Fig. 1, Fig. 2, Fig. 3; Table 1, Table 2, Table 3, etc.). Mention them in the text before they appear and then place them as close as possible to where they were first mentioned. For illustrations in annexes, restart the numbering in each annex (e.g. Fig. A1.1, Fig. A1.2; Table A1.1, etc.). If necessary, you can number illustrations in chapters the same way (e.g. Fig. 1.1, Fig. 1.2; Table 1.1, etc.). The same principles apply to boxes.

Keep figures, tables, boxes and their titles as short, simple and clear as possible. Giving too much information confuses, rather than clarifies. Ensure that the information in illustrations agrees with that in the text. Titles should include place and date if relevant.

The key to professional-looking presentation is to handle each figure, table, box and photograph the same way every time: captions, data, legends, colours, notes and source information. Use the same font and heading style for all.

If a figure or table needs explanation, give it in the text, but give additional details in footnotes, which are usually indicated by superscript letters placed in the appropriate order in the illustration: from left to right and top to bottom. You can use the same mark on two or more elements if the corresponding note applies. For an illustration consisting only of words or letters, you can use superscript numbers for footnotes. Place footnotes immediately below the illustration.

There are three kinds of footnotes, which should appear in the following order:

- explanations of abbreviations used and notes on levels of statistical significance, using a single asterisk for the lowest level of significance, two for the next level and so on;
- notes on specific parts of the content; and
- source information.

If you take the data for or the whole of an illustration from another source, mention the source and the permission given to use the material (see below), in a note introduced by the word "Source(s):" in italics. (See the section on tables on page 50.)

Permission to use published material

To reproduce or adapt a figure, table, photograph or other illustration from material already published by another publisher, you must obtain permission from the copyright holder. Cite this permission, in the form of words requested by the copyright holder, in the source note or credit for the illustration. Information and the forms to use are available on the intranets of WHO headquarters and the Regional Office for Europe. See the WHO eManual, section VIII.6.4.

Figures, including maps

Use the abbreviation "Fig." in the title. Use it in text to refer to specific figures, but not generic figures.

> Fig. 3. Design of a case–control study, Fig. 15–19
> Fig. 1 illustrates this trend.
> The figures are based on the latest data.

Clearly label the axes of graphs, giving the relevant units of measurement in parentheses. If figures are reduced for layout, ensure that any text and labels are legible in the final version.

Clear maps with the Office of the Legal Counsel unless they have been prepared by Graphic Design and Layout (GRA) at headquarters, or are based entirely on either the template map of the world prepared by the Geographical Information Systems (GIS) work group or maps downloaded from the website of the United Nations Cartographic Section (http://www.un.org/Depts/Cartographic/english/htmain.htm), without any modification. For further information, see the WHO eManual, section VIII.2.9.

Tables

Keep the titles and column headings of tables as simple and brief as possible. When relevant, include the places and dates covered in the title. Use the minimum of dividing lines in the table, unless it is particularly complex. Use straddle rules over column headings to clarify hierarchical arrangements, but avoid using vertical lines.

Give units of measurement or multiplication factors in column headings, rather than repeating them in the data columns, and ensure that there is no possibility of misinterpretation. Every column should have a heading, and no column should contain any blanks. Use en rules or abbreviations where data are missing (such as NA for "not applicable" or "not available", or ND for "not determined").

In text, give an initial capital to the word "table" when referring to a specific table, but use lower case when referring to generic tables.

> Table 1, Tables 15–19
> Table 1 shows the mortality rate.
> The tables are based on the latest data.

The example below illustrates some of these points; the precise format for the title and use of bold and italics will depend on the style adopted for the information product in question. See also other tables given in this guide.

Table [Arabic numeral]. Concise descriptive title[a]

Column heading[c]	Main column heading[b]	
	Extremely long subheading (unit)[d]	Subheading (unit)
Row heading	–	–
indented on second	10.3 ± 1.1	ND
and subsequent lines	–	–
Second row heading	9.1 ± 3.2	ND
Subheading	2.3 ± 0.2*	362[e]
Subheading	6.8 ± 2.5	ND
Third row heading	3.0 ± 0.9	490
Fourth row heading	17.6 ± 4.4**	51

ND: not determined; *: $P < 0.05$; **: $P < 0.01$ (with appropriate details of the statistical test).
[a] Explanatory note, for example concerning experimental design and method, or source of data.
[b] Column headings may be set left or centred over the columns as appropriate (usually centred when the columns contain figures).
[c] The first column heading is normally set left and aligned with the bottom line of column headings.
[d] Explanatory note, for example, concerning presentation of data (mean ± standard deviation (SD), etc.).
[e] Align columns of figures on the decimal point.
Source: reproduced by permission of the publisher from Bloggs & Grundy (*16*).

Boxes

Use boxes to give content that illustrates your main points but is not essential to understanding. As boxes are separate from the main text, never try to use them to highlight main points of the argument; separating them from the rest of the discussion reduces understanding.

Boxes are inserted into the text like illustrations, so treat them similarly:

- number them separately and consecutively;
- ensure each includes the box number and a short caption;
- mention the boxes in the text before they appear;
- place them in the text as close as possible to where they were first mentioned; and
- restart the numbering of any boxes in an annex.

Photographs

Give a credit for each photograph used in an information product, usually including the copyright holder and the photographer's name.

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In publications, unless photographs are purely decorative, mention them in the text and number them among the figures.

Using photographs and drawings of people raises ethical issues, including discrimination on the basis of sex, minority status and racial grouping, and privacy. Do not issue photographic or video material depicting identifiable human subjects as a main focus without obtaining written consent from the individual(s) portrayed, or their parent(s) or guardian(s). See the WHO eManual, section VIII.2.10 for further information and release forms.

Mathematical and chemical formulae

See Chapter 4.

Quotations

All quotations from printed material should exactly match the originals in wording, spelling, punctuation, use of capital letters, etc.

Punctuation

If a question mark or an exclamation mark is part of the sentence quoted, put the punctuation mark within the quotation marks. If the punctuation mark is part of a longer sentence within which the quotation stands, put the punctuation mark outside the quotation marks. If the quotation and the sentence containing it end together, place a single full stop outside the closing quotation mark. Do not put a full stop at the end of the sentence when the question or exclamation mark is merely inside the quotation mark.

> I asked him, "Are you feeling better?"
> Why did you ask him, "Are you feeling better"?
> She said, "I asked him whether he was feeling better".

If the quotation is part of a dialogue and is a sentence, put the full stop inside the closing quotation mark.

> "I suppose," she said, "that he admires your work."

When giving only a partial quotation or citing expressions as examples, put the full stop outside.

> Use hyphens in "easy-to-understand directions" but not in "the directions are easy to understand".

For more on punctuation, see Chapter 5.

Long quotations

Enclose short quotations in double quotation marks (" ") and place them in the body of the text. For quotations in publications that are longer than three typed lines, insert a line break, and give the quotation indented and in smaller type; do not use quotation marks. Do the same for long quotations on webpages, but without special formatting.

Omitting and adding words

When omitting text after a complete sentence, follow the full stop by a space, then an ellipsis (see Chapter 5) and another space:

> "From the strictly political point of view, I feel he was right in his judgement. … Independence should be achieved."

Where one or more complete paragraphs have been omitted in a quotation, use a line of points, spaced, to show the omission.

> 1. All documents shall be published in English and French.
> 2. The working languages of the committee shall be English and French.
> . . . .
> 8. The work of the committee will be publicized as funds allow.

If you add words to a quotation for clarity, enclose them in square brackets.

> She said, "I go to my favourite country [Italy] every year on holiday".

Quotations from another language

Give English translations of quotations from other languages, with the words "translation from [the original language]" inserted at the end of the quotation. If a quotation contains only a few foreign words, leave them in the original language.

Footnotes

Use footnotes to provide additional details, such as references or explanations of unfamiliar terms, that would disrupt continuity if included in the body of the text. Keep them to a minimum in length and number. As a general rule, give very short notes (such as cross-references to other sections or pages in the same work) in parentheses in the text. See also the discussion above on footnotes to tables.

Place footnotes at the bottom of the page on which the footnote reference appears.

Use superscript Arabic numerals to identify footnotes. When this may cause confusion, such as in scientific text containing mathematical exponents, use lower-case letters instead.

Number footnotes to the text consecutively, beginning with 1, throughout each page of a book or journal article. If the same footnote applies to two or more passages appearing on the same page, give it only once and then repeat the reference mark in the text.

Place the reference mark after any punctuation that immediately follows the word, part of a sentence, or sentence to which the footnote refers. The reference mark should be placed after the closing parenthesis if it refers to the text within the parentheses; otherwise, it should be placed immediately after the word or phrase to which it refers.

> ICD-10 provides a diagnosis of diseases, disorders or other health conditions, and this information is enriched by the additional information given by ICF on functioning.[1]

> ICD-10 and ICF are therefore complementary,[2] and users are encouraged to utilize these two members of the WHO family of international classifications together.

> ICD-10 (which is enriched by the additional information given by ICF on functioning)[1] provides a diagnosis of diseases, disorders, or other health conditions.

> Researchers stated that "ICD-10 and ICF are therefore complementary, and users are encouraged to utilize these two members of the WHO family of international classifications together"[1].

Clear print: maximizing accessibility

All WHO products should be accessible by the widest possible group of users, including people with disabilities. WHO created the Task Force on Disability (http://www.who.int/disabilities/media/news/taskforce/en/index.html) to ensure that its buildings, information products, employment opportunities and technical programmes address the needs of people with disabilities, in compliance with the United Nations Convention on the Rights of Persons with Disabilities (http://www.un.org/disabilities/).

WHO guidance for ensuring the clear design and layout of printed information products covers accessibility, and includes: a *Design and print it right checklist*, with tips for selecting an appropriate typeface, font size, colour combinations, alignment, etc.; and *Guidance on accessible publishing at WHO*. Use the checklist when planning the design and layout of an information product.

The electronic version of any publication should include ALT text (alternative text) embedded in all images and figures. ALT text is a written description of an illustration that can be read by screen readers, thereby ensuring that people with visual impairments can access the information provided.

Your designer can add other features to the PDF to make it more accessible, including bookmarks and hyperlinks, and should tag the reading order of paragraphs to ensure that screen readers will follow the document in the correct order. Another means of enhancing accessibility is to provide a choice of formats, such as large print, Braille, accessible PDF and many eBook formats.

8. Non-discriminatory language

WHO is committed to working towards equality between all people, so its information products must reflect and pursue that commitment. WHO must address all people equally and fairly; it must not discriminate against, stereotype or demean people on the basis of their age, physical or intellectual impairments, ethnicity, sex or sexual orientation. Stereotypes, for example, are broad generalizations that are applied to a person or group of people, and detract from their individuality. In addition, WHO's main aim in publishing is to inform and persuade; both tasks are easier if WHO information products address users courteously and fairly.

When discussing levels of development, do not use terms that should have a geographical meaning only, such as "north", "south", "east" or "west" (see also Chapter 2). Avoid terms such as "the western world", which are vague and imply that everything is viewed from the standpoint of western Europe and countries of European colonial origin in the Americas and Oceania.

> developing countries, developed or industrialized countries, *not* underdeveloped countries, Third World, First World

In general, age, disability status, racial or cultural background, sex and sexual orientation are characteristics, not identities. Refer to them only when directly relevant to the subject, preferably by using adjectives rather than nouns. WHO's work is about people, so WHO writers should use the word as often as possible.

The following guidelines should help to ensure that language is free from bias and avoids causing offence.[1]

Age

Avoid stereotyping older people as frail, incapable of independence, a burden on society or no longer active or productive. Similarly, avoid stereotyping young people as inexperienced, rebellious, immature or always vibrant. Referring to someone's age may contribute to discrimination.

Except for infants and children, for whom age is a defining characteristic, use adjectives, rather than nouns, to refer to age groups.

> older people, elderly patients, young people, *not* geriatrics, the elderly, youth

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[1] For further information, see Publication manual of the American Psychological Association, 6th edition. Washington (DC): American Psychological Association; 2010 and Supplemental material to the Publication manual of the American Psychological Association, sixth edition. Chapter 3: Writing clearly and concisely. Guidelines for unbiased language. Washington (DC): American Psychological Association; 2013 (http://supp.apa.org/style/pubman-ch03.00.pdf, accessed 29 May 2013).

Disability

Avoid depersonalizing people with disabilities. Collective terms (such as "the disabled", "the handicapped", "the blind and the deaf") equate people with their disabilities. Do not hide, ignore or downgrade the relevance of disability, but avoid making it the focus of description except when it is the topic. Place people first and their disabilities second in the description.

> people with physical disabilities, people with epilepsy,
> *not* the physically handicapped, epileptics

Do not call a person with an illness or disability a victim or sufferer. These terms are dehumanizing and emphasize powerlessness. People involved in instances of poisoning or natural disasters, however, can be called victims.

Avoid terms that define disability as a limitation. A person in a wheelchair uses a wheelchair or is a wheelchair user, not confined to a wheelchair or wheelchair bound.

Ethnicity

Refer to the racial or cultural background of a person or group only when the subject demands it. Racial and cultural stereotypes are offensive; avoid them.

Acknowledge the diversity within racial and ethnic groups. For example, some authors lump the various Asian ethnicities together under the single term "Asian", despite their many differences.

Gender

Use non-sexist language – sometimes called sex-neutral, inclusive or gender-neutral language – which treats women and men equally.

WHO defines "sex" as "the biological and physiological characteristics that define men and women" and "gender" as "the socially constructed roles, behaviours, activities, and attributes that a given society considers appropriate for men and women".[1] Be careful to use these words appropriately.

Titles of address, rank, occupation and status

Where titles are appropriate, use parallel titles. For example, "Mr" does not denote a man's marital status, so a woman's title should not indicate her marital status unless she requests it. Use "Ms", not "Miss" or "Mrs", to parallel "Mr", but respect individual wishes. In addition, use titles consistently; give them for everyone mentioned or nobody (see also Chapters 2 and 7).

> Ms J. Smith, Mr J. Smith, Ms Smith and Mr Jones

---

[1]   What do we mean by "sex" and "gender"? Geneva: World Health Organization; 2011 (http://www.who.int/gender/whatisgender/en, accessed 12 October 2012). See this webpage for examples of the distinction.

If the name and/or sex of a correspondent is unknown, do not assume that the person is male. Include both sexes in the salutation, or use a gender-neutral term.

> Dear Sir or Madam, Dear Madam or Sir, Dear Manager, Dear Director, Dear colleague

When listing names, use alphabetical order except where order by seniority or some other characteristic is required.

Avoid patronizing or demeaning terms or expressions. Use "ladies" to parallel "gentlemen" and "women" to parallel "men".

Avoid sexist assumptions and be careful not to include hidden stereotypes.

> The client teaches part-time, *not* The client's husband lets her teach part-time
> Parents or other caregivers were asked to bring their children to the clinic,
> *not* Mothers were asked to bring their children to the clinic

Personal pronouns

Masculine nouns and pronouns do not include women, and cannot be used to refer to both males and females. Use "he", "his", "him" or "himself" only when referring specifically to a male person. Using "he or she", "she and he" and "she/he" to refer to people of both sexes is clumsy. Avoid this by rewriting the sentence:

- in the plural
- without pronouns
- in the passive (as a last resort) (Table 8).

Table 8. Rewriting for inclusive language

Original	Revised
Each researcher is responsible for writing his own report.	Researchers are responsible for writing their own reports.
The client is usually the best judge of the value of his counselling.	The client is usually the best judge of the value of counselling.
He must conduct the tests first thing in the morning.	The tests must be conducted first thing in the morning.

Sex-specific descriptions and illustrations

Specify sex only if necessary to the sense. Including a reference to sex can imply that women or men are oddities in certain situations or occupations.

> A doctor was running the research programme, *not* A woman doctor was running the research programme
> A nurse conducted the examination, *not* A male nurse conducted the examination

When referring to a position, quality or action that might apply to either sex, use a non-sexist term.

> supervisor *not* foreman, fire-fighter *not* fireman, police officer *not* policeman

Avoid the unnecessary use of "man" or composite words that use "-man", which imply that the term refers only to males.

> the average person, people in general, *not* the average man, the man in the street
> staff, personnel or human resources, *not* manpower
> humankind, *not* mankind, man

Sexual orientation[1]

Refer to the sexual orientation of a person or group only when the subject demands it. Be careful not to make assumptions about people's personal circumstances. WHO uses the following terms.

> men who have sex with men, women who have sex with women

These terms describe people who have sex with others of the same sex, regardless of whether they have intercourse with the opposite sex or have a personal or social identity as gay or bisexual. These concepts are useful because they also include people who self-identify as heterosexual.

Use adjectives such as "bisexual", "gay", "homosexual" and "lesbian" only for people who use these terms to identify themselves.

For transgender people, use pronouns describing them according to their gender identity: the gender that they present, not their sex at birth.

Avoid using language based on the belief that heterosexuality is the only normal, valid or moral basis for partnerships. Use "partner" (so as to not discriminate between married, unmarried or same-sex partners), rather than "husband", "wife", "spouse", and "girlfriend" or "boyfriend".

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[1] This section draws on the Guide to effective communication – non-discriminatory language. 2nd edition, September 2006 (BMA Equal Opportunities Committee. London: British Medical Association; 2006 (http://bmaopac.hosted.exlibrisgroup.com/exlibris/aleph/a21_1/apache_media/5L45P33RMTMN7AI6U1S5AYKB9LX8DT.pdf, accessed 3 April 2013)) and the *UNAIDS terminology guidelines* (Geneva: Joint United Nations Programme on HIV/AIDS; 2011 (http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2011/JC2118_terminology-guidelines_en.pdf, accessed 3 April 2013)).

ANNEX 1
Member States and Associate Members of WHO

Using the correct names of Member States and Associate Members is perhaps the most important part of WHO style, discussed in detail in Chapter 1. Annex 1 presents the names in table format, which differs slightly from their handling in text. For example, Table A1.1 omits "the", which is used with nearly all full names and with many short names in text. In contrast, here is some sample text showing the correct use of articles with countries' short and full names.

> While WHO texts usually use countries' short names (such as Afghanistan, Jordan, the Netherlands, Nicaragua, the Philippines and Uganda), circumstances sometimes require the use of their full names (such as the Islamic Republic of Afghanistan, the Hashemite Kingdom of Jordan, the Kingdom of the Netherlands, the Republic of Nicaragua, the Republic of the Philippines and the Republic of Uganda).

Table A1.1 Member States and Associate Members of WHO,[1] valid as of 20 June 2013

Short name	Full name	Adjective/People	Capital city
Afghanistan	Islamic Republic of Afghanistan	Afghan	Kabul
Albania	Republic of Albania	Albanian	Tirana
Algeria	People's Democratic Republic of Algeria	Algerian	Algiers
Andorra	Principality of Andorra	Andorran	Andorra La Vella
Angola	Republic of Angola	Angolan	Luanda
Antigua and Barbuda	Antigua and Barbuda	of Antigua and Barbuda	St John's
Argentina	Argentine Republic	Argentine	Buenos Aires
Armenia	Republic of Armenia	Armenian	Yerevan
Australia	Australia	Australian	Canberra
Austria	Republic of Austria	Austrian	Vienna
Azerbaijan	Republic of Azerbaijan	Azerbaijani	Baku
Bahamas	Commonwealth of the Bahamas	Bahamian	Nassau
Bahrain	Kingdom of Bahrain	Bahraini	Manama

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[1] Consult the Office of the Legal Counsel at headquarters for information on changes and additions since 20 June 2013. The listing of capital cities is provided for information, but is not authoritative. The United Nations, the source of information for this list, does not maintain an official list of capital cities.

Short name	Full name	Adjective/People	Capital city
Bangladesh	People's Republic of Bangladesh	of Bangladesh, a Bangladeshi	Dhaka
Barbados	Barbados	Barbadian	Bridgetown
Belarus	Republic of Belarus	Belarusian	Minsk
Belgium	Kingdom of Belgium	Belgian	Brussels
Belize	Belize	Belizean	Belmopan
Benin	Republic of Benin	Beninese	Porto-Novo[1]
Bhutan	Kingdom of Bhutan	Bhutanese	Thimphu
Bolivia (Plurinational State of)[2]	Plurinational State of Bolivia	Bolivian	Sucre[3]
Bosnia and Herzegovina	Bosnia and Herzegovina	of Bosnia and Herzegovina	Sarajevo
Botswana	Republic of Botswana	of Botswana	Gaborone
Brazil	Federative Republic of Brazil	Brazilian	Brasília
Brunei Darussalam	Brunei Darussalam	of Brunei Darussalam	Bandar Seri Begawan
Bulgaria	Republic of Bulgaria	Bulgarian	Sofia
Burkina Faso	Burkina Faso	of Burkina Faso	Ouagadougou
Burma: see Myanmar			
Burundi	Republic of Burundi	of Burundi, Burundian	Bujumbura
Cambodia	Kingdom of Cambodia	Cambodian	Phnom Penh
Cameroon	Republic of Cameroon	Cameroonian	Yaoundé
Canada	Canada	Canadian	Ottawa
Cape Verde	Republic of Cape Verde	Cape Verdean	Praia
Central African Republic	Central African Republic	of the Central African Republic, Central African	Bangui
Chad	Republic of Chad	Chadian	N'Djamena
Chile	Republic of Chile	Chilean	Santiago
China	People's Republic of China	Chinese	Beijing
Colombia	Republic of Colombia	Colombian	Bogotá
Comoros	Union of the Comoros	Comorian	Moroni
Congo	Republic of the Congo	Congolese	Brazzaville
Cook Islands	Cook Islands	of the Cook Islands	Avarua
Costa Rica	Republic of Costa Rica	Costa Rican	San José
Côte d'Ivoire	Republic of Côte d'Ivoire	Ivorian	Yamoussoukro[4]
Croatia	Republic of Croatia	Croatian	Zagreb
Cuba	Republic of Cuba	Cuban	Havana
Cyprus	Republic of Cyprus	Cypriot	Nicosia

[1] Seat of Government: Cotonou.
[2] Use this form in alphabetical lists, tables and name-plates. For other purposes, use "the Plurinational State of Bolivia".
[3] Seat of Government: La Paz.
[4] Seat of Government: Abidjan.

Short name	Full name	Adjective/People	Capital city
Czech Republic	Czech Republic	Czech	Prague
Democratic People's Republic of Korea	Democratic People's Republic of Korea	of the Democratic People's Republic of Korea	Pyongyang
Democratic Republic of the Congo	Democratic Republic of the Congo	of the Democratic Republic of the Congo	Kinshasa
Denmark	Kingdom of Denmark	Danish, of Denmark, a Dane	Copenhagen
Djibouti	Republic of Djibouti	of Djibouti, a Djiboutian	Djibouti
Dominica	Commonwealth of Dominica	of Dominica	Roseau
Dominican Republic	Dominican Republic	Dominican	Santo Domingo
Ecuador	Republic of Ecuador	Ecuadorian	Quito
Egypt	Arab Republic of Egypt	Egyptian	Cairo
El Salvador	Republic of El Salvador	Salvadorian, Salvadoran	San Salvador
Equatorial Guinea	Republic of Equatorial Guinea	of Equatorial Guinea	Malabo
Eritrea	Eritrea	Eritrean	Asmara
Estonia	Republic of Estonia	Estonian	Tallinn
Ethiopia	Federal Democratic Republic of Ethiopia	Ethiopian	Addis Ababa
Fiji	Republic of Fiji	of Fiji, Fiji Islanders	Suva
Finland	Republic of Finland	Finnish, a Finn	Helsinki
France	French Republic	French, a Frenchman, a Frenchwoman	Paris
Gabon	Gabonese Republic	Gabonese	Libreville
Gambia	Republic of the Gambia	Gambian	Banjul
Georgia	Georgia	Georgian	Tbilisi
Germany	Federal Republic of Germany	German	Berlin
Ghana	Republic of Ghana	Ghanaian	Accra
Greece	Hellenic Republic	Greek	Athens
Grenada	Grenada	Grenadian	St George's
Guatemala	Republic of Guatemala	Guatemalan	Guatemala City
Guinea	Republic of Guinea	Guinean	Conakry
Guinea-Bissau	Republic of Guinea-Bissau	of Guinea-Bissau	Bissau
Guyana	Republic of Guyana	Guyanese	Georgetown
Haiti	Republic of Haiti	Haitian	Port-au-Prince
Honduras	Republic of Honduras	Honduran	Tegucigalpa
Hungary	Hungary	Hungarian	Budapest
Iceland	Republic of Iceland	Icelandic, an Icelander	Reykjavik
India	Republic of India	Indian	New Delhi

Short name	Full name	Adjective/People	Capital city
Indonesia	Republic of Indonesia	Indonesian	Jakarta
Iran (Islamic Republic of)[1]	Islamic Republic of Iran	Iranian	Tehran
Iraq	Republic of Iraq	Iraqi	Baghdad
Ireland	Ireland	Irish, the Irish, an Irishman, an Irishwoman	Dublin
Israel	State of Israel	Israeli	—[2]
Italy	Republic of Italy	Italian	Rome
Ivory Coast: see Côte d'Ivoire			
Jamaica	Jamaica	Jamaican	Kingston
Japan	Japan	Japanese	Tokyo
Jordan	Hashemite Kingdom of Jordan	Jordanian	Amman
Kazakhstan	Republic of Kazakhstan	Kazakh	Astana
Kenya	Republic of Kenya	Kenyan	Nairobi
Kiribati	Republic of Kiribati	of Kiribati	Bairiki, Tarawa
Korea: see Democratic People's Republic of Korea, and Republic of Korea			
Kuwait	State of Kuwait	Kuwaiti	Kuwait City
Kyrgyzstan	Kyrgyz Republic	Kyrgyz	Bishkek
Lao People's Democratic Republic	Lao People's Democratic Republic	Lao, a Lao, the Lao[3]	Vientiane
Latvia	Republic of Latvia	Latvian	Riga
Lebanon	Lebanese Republic	Lebanese	Beirut
Lesotho	Kingdom of Lesotho	of Lesotho	Maseru
Liberia	Republic of Liberia	Liberian	Monrovia
Libya	Libya	Libyan	Tripoli
Lithuania	Republic of Lithuania	Lithuanian	Vilnius
Luxembourg	Grand Duchy of Luxembourg	of Luxembourg	Luxembourg
Macedonia: see the former Yugoslav Republic of Macedonia			
Madagascar	Republic of Madagascar	Malagasy	Antananarivo
Malawi	Republic of Malawi	Malawian	Lilongwe
Malaysia	Malaysia	Malaysian	Kuala Lumpur
Maldives	Republic of Maldives	Maldivian	Male'
Mali	Republic of Mali	Malian	Bamako
Malta	Republic of Malta	Maltese	Valletta
Marshall Islands	Republic of the Marshall Islands	of the Marshall Islands, Marshallese	Majuro
Mauritania	Islamic Republic of Mauritania	Mauritanian	Nouakchott
Mauritius	Republic of Mauritius	Mauritian	Port Louis

[1]   Use this form in alphabetical lists, tables and name-plates. For other purposes, use "the Islamic Republic of Iran".

[2]   WHO follows United Nations practice and omits references to the capital of Israel or leaves a blank space. See also Chapter 1.

[3]   "Lao" is invariable, both as an adjective and as a noun, in English, French and Spanish.

Short name	Full name	Adjective/People	Capital city
Mexico	United Mexican States	Mexican	Mexico City
Micronesia (Federated States of)[1]	Federated States of Micronesia	of the Federated States of Micronesia	Palikir
Moldova: see Republic of Moldova			
Monaco	Principality of Monaco	Monegasque	Monaco
Mongolia	Mongolia	Mongolian	Ulaanbaatar
Montenegro	Montenegro	Montenegrin	Podgorica
Morocco	Kingdom of Morocco	Moroccan	Rabat
Mozambique	Republic of Mozambique	Mozambican	Maputo
Myanmar	Republic of the Union of Myanmar	of Myanmar	Nay Pyi Taw
Namibia	Republic of Namibia	Namibian	Windhoek
Nauru	Republic of Nauru	Nauruan	Yaren
Nepal	Federal Democratic Republic of Nepal	Nepalese	Kathmandu
Netherlands	Kingdom of the Netherlands	of the Netherlands, a Netherlander	Amsterdam[2]
New Zealand	New Zealand	of New Zealand, a New Zealander	Wellington
Nicaragua	Republic of Nicaragua	Nicaraguan	Managua
Niger	Republic of the Niger	of the Niger	Niamey
Nigeria	Federal Republic of Nigeria	Nigerian	Abuja
Niue	Republic of Niue	of Niue	Alofi
Norway	Kingdom of Norway	Norwegian	Oslo
Oman	Sultanate of Oman	Omani	Muscat
Pakistan	Islamic Republic of Pakistan	of Pakistan, a Pakistani	Islamabad
Palau	Republic of Palau	of Palau	Melekeok
Panama	Republic of Panama	Panamanian	Panama City
Papua New Guinea	Independent State of Papua New Guinea	of Papua New Guinea, a Papua New Guinean	Port Moresby
Paraguay	Republic of Paraguay	Paraguayan	Asunción
Peru	Republic of Peru	Peruvian	Lima
Philippines	Republic of the Philippines	Philippine, a Filipino	Manila
Poland	Republic of Poland	Polish, a Pole	Warsaw
Portugal	Portuguese Republic	Portuguese	Lisbon
Puerto Rico[3]	Puerto Rico	Puerto Rican	San Juan
Qatar	State of Qatar	of Qatar, Qatari	Doha
Republic of Korea	Republic of Korea	of the Republic of Korea	Seoul

[1]   Use this form in alphabetical lists, tables and name-plates. For other purposes, use "the Federated States of Micronesia".
[2]   Seat of Government: The Hague.
[3]   Associate Member.

Short name	Full name	Adjective/People	Capital city
Republic of Moldova	Republic of Moldova	Moldovan	Chisinau
Romania	Romania	Romanian	Bucharest
Russian Federation	Russian Federation	of the Russian Federation, Russian	Moscow
Rwanda	Republic of Rwanda	Rwandan	Kigali
Saint Kitts and Nevis	Saint Kitts and Nevis	of Saint Kitts and Nevis	Basseterre
Saint Lucia	Saint Lucia	Saint Lucian	Castries
Saint Vincent and the Grenadines	Saint Vincent and the Grenadines	of Saint Vincent and the Grenadines	Kingstown
Samoa	Independent State of Samoa	Samoan	Apia
San Marino	Republic of San Marino	of San Marino, San Marinese	San Marino
Sao Tome and Principe	Democratic Republic of Sao Tome and Principe	of Sao Tome and Principe	Sao Tome
Saudi Arabia	Kingdom of Saudi Arabia	Saudi Arabian	Riyadh
Senegal	Republic of Senegal	Senegalese	Dakar
Serbia	Republic of Serbia	Serbian, a Serb	Belgrade
Seychelles	Republic of Seychelles	of Seychelles, a Seychellois	Victoria
Sierra Leone	Republic of Sierra Leone	Sierra Leonean	Freetown
Singapore	Republic of Singapore	Singaporean	Singapore
Slovakia	Slovak Republic	Slovak	Bratislava
Slovenia	Republic of Slovenia	Slovene	Ljubljana
Solomon Islands	Solomon Islands	of Solomon Islands, a Solomon Islander	Honiara
Somalia	Federal Republic of Somalia	Somali	Mogadishu
South Africa	Republic of South Africa	South African	Pretoria
South Sudan	Republic of South Sudan	South Sudanese	Juba
Spain	Kingdom of Spain	Spanish, a Spaniard, the Spanish	Madrid
Sri Lanka	Democratic Socialist Republic of Sri Lanka	of Sri Lanka, Sri Lankan	Colombo[1]
Sudan	Republic of the Sudan	Sudanese	Khartoum
Suriname	Republic of Suriname	Surinamese	Paramaribo
Swaziland	Kingdom of Swaziland	Swazi	Mbabane
Sweden	Kingdom of Sweden	Swedish, a Swede	Stockholm
Switzerland	Swiss Confederation	Swiss	Bern
Syrian Arab Republic	Syrian Arab Republic	Syrian	Damascus
Tajikistan	Republic of Tajikistan	Tajik	Dushanbe

Tanzania: see United Republic of Tanzania

[1]   Seat of Government: Sri Jayawardenepura Kotte.

Short name	Full name	Adjective/People	Capital city
Thailand	Kingdom of Thailand	Thai	Bangkok
The former Yugoslav Republic of Macedonia	The former Yugoslav Republic of Macedonia	of the former Yugoslav Republic of Macedonia	Skopje
Timor-Leste	Democratic Republic of Timor-Leste	of Timor-Leste, Timorese	Dili
Togo	Togolese Republic	Togolese	Lomé
Tokelau[1]	Tokelau	of Tokelau	
Tonga	Kingdom of Tonga	Tongan	Nuku'alofa
Trinidad and Tobago	Republic of Trinidad and Tobago	of Trinidad and Tobago	Port of Spain
Tunisia	Republic of Tunisia	Tunisian	Tunis
Turkey	Republic of Turkey	Turkish, a Turk	Ankara
Turkmenistan	Turkmenistan	Turkmen	Ashgabat
Tuvalu	Tuvalu	Tuvaluan	Fongafale
Uganda	Republic of Uganda	Ugandan	Kampala
Ukraine	Ukraine	Ukrainian	Kyiv
United Arab Emirates	United Arab Emirates	of the United Arab Emirates	Abu Dhabi
United Kingdom of Great Britain and Northern Ireland[2]	United Kingdom of Great Britain and Northern Ireland	of the United Kingdom, British	London
United Republic of Tanzania	United Republic of Tanzania	Tanzanian	Dodoma
United States of America[3]	United States of America	of the United States (of America), American	Washington, DC
Uruguay	Eastern Republic of Uruguay	Uruguayan	Montevideo
Uzbekistan	Republic of Uzbekistan	Uzbek	Tashkent
Vanuatu	Republic of Vanuatu	of Vanuatu, Vanuatuan	Port Vila
Venezuela (Bolivarian Republic of)[4]	Bolivarian Republic of Venezuela	Venezuelan	Caracas
Viet Nam	Socialist Republic of Viet Nam	Vietnamese	Hanoi
Yemen	Republic of Yemen	Yemeni, a Yemenite	Sana'a

Zaire: see Democratic Republic of the Congo

Zambia	Republic of Zambia	Zambian	Lusaka
Zimbabwe	Republic of Zimbabwe	Zimbabwean	Harare

[1] Associate Member.
[2] Use this form on title pages, in signatures and in recording nominations, elections and votes. After the full name has been mentioned or where space is limited (as in a table), you can use "the United Kingdom".
[3] After the full name has been mentioned or where space is limited (as in a table), you can use "the United States" or "the USA".
[4] Use this form in alphabetical lists, tables and name-plates. For other purposes, use "the Bolivarian Republic of Venezuela".

ANNEX 2
Place names

Table A2.1 is a list of cities, alphabetized by their English/approved names. For country names, see Annex 1. The place names given here are those most often found in WHO information products. The list is not intended to be comprehensive.

Table A2.1   English/Approved names of cities[1]

English/approved name	Local/other name	English/approved name	Local/other name
Abu Dhabi	AbūZabī, AbūZaby	Chisinau	Chişinău
Addis Ababa	Addis Abeba	Cologne	Köln
Alexandria	Al-Iskandarīyah	Conakry	Konakri
Almaty	Alma-Ata	Copenhagen	København
Andorra La Vella	Andorra	Corsica	Corse
Antananarivo	Tananarivo	Cracow	Krakow, Kraków
Antwerp	Antwerpen, Anvers	Damascus	Ash Shām, Damas, Dimashq
Ashgabat	Ashkhabad		
Asmara	Asmera	Dar es Salaam	Daressalam
Asuncíon	Nuestra Señora de la Asuncíon	Dhaka	Dacca
		Dili	Dilli
Athens	Athínai	Djibouti	Jibuti
		Doha	Ad-Dawhah, Bida
Baghdad	Bagdad		
Bangkok	Krung Thep	Florence	Firenze
Bangui	Bangi		
Basel	Bâle, Basle	Gdansk	Dantzig, Danzig
Beijing	Peking	Geneva	Genève, Genf, Ginevra
Beirut	Bayrūt, Beyrouth		
Belgrade	Beograd	Genoa	Genova
Bern	Berne	Ghent	Gand, Gent
Bishkek	Pishpek	Gothenburg	Göteborg
Bruges	Brugge	Guangzhou	Canton, Kuang-chou
Brunswick	Braunschweig	Hague (The)	Den Haag, 's Gravenhage
Brussels	Brussel, Bruxelles		
Bucharest	Bucureşti	Haifa	Kaiffa, Khaifa
		Hanoi	Hanoï
Cairo	Al-Qāhirah, El Qâhira	Hanover	Hannover
Chennai	Madras	Havana	Habana (La)

English/approved name	Local/other name
Helsinki	Helsingfors
Jaffa	Yafa, Yafo
Jakarta	Djakarta
Kathmandu	Katmandu, Khatmandu
Khartoum	Khartum
Kyiv	Kiev, Kiyev, Kiyiv
Leghorn	Livorno
Liège	Liége, Luik
Lisbon	Lisboa
Ljubljana	Lyublyana
Louvain	Leuven
Luanda	Loanda
Lucerne	Luzern
Luxor	Al-Aqsur, Al-Qusur, Al-Uqsor
Lvov	L'viv, Lviv, L'vov, Lwów
Lyons	Lyon
Male'	Male
Manama	Al-Manamah
Manaus	Manáos
Mantua	Mantova
Marrakesh	Marakesh, Marrakech
Marseilles	Marseille
Mecca	Makkah, Mekka
Mexico City	Ciudad de México, Mexico
Milan	Milano
Mogadishu	Mogadiscio, Mogadisho
Moscow	Moskva
Mumbai	Bombay
Munich	München
Muscat	Maskat, Masqat
Naples	Napoli
N'Djamena	Fort-Lamy
Nuremberg	Nürnberg
Ostend	Oostende, Ostende
Ouagadougou	Wagadugu
Padua	Padova
Phnom Penh	Pnompenh
Podgorica	Podgoritsa

English/approved name	Local/other name
Port Said	Būr Sa'īd
Prague	Praha
Pyongyang	P'yŏngyang
Reykjavik	Reikjavik, Reykjavík
Riga	Rīga
Riyadh	Er Riad, Riad
Rome	Roma
Salonica	Salonika, Saloniki, Thessaloníki
Samarkand	Samarqand
Sana'a	Sana, San'a, Sanaa
Sao Tome	Sao Tomé
Saragossa	Zaragoza
Sarajevo	Serajevo
Sardinia	Sardegna
Seoul	Kyongsong
Seville	Sevilla
Skopje	Skoplje
Sofia	Sofiya, Sophia
Szczecin	Stettin
Tallinn	Talin
Tbilisi	Tiflis
Tehran	Teheran
Thimphu	Tashi Chho Dzong, Thimbu
Tirana	Tiranë
Tokyo	Tokio
Turin	Torino
Ulaanbaatar	Ulan Bator
Valletta	Valetta
Venice	Venezia
Vienna	Wien
Vientiane	Viang-chan, Vieng Chan
Vilnius	Vilna, Vilno, Wilna, Wilno
Warsaw	Warszawa
Yangon	Rangoon, Yangôn
Yaoundé	Yaunde
Yerevan	Erevan, Erivan
Zagreb	Zágráb
Zurich	Zürich

ANNEX 3
WHO spelling list

This list[1] includes most of the examples given in the style guide, but excludes the lists of abbreviations in Chapter 3. For the spelling of other terms, use the *Oxford English dictionary*.

A

acclimatize
ad hoc
advise
aide-memoire
airborne
alphabetize
aluminium
Alzheimer's disease
amfetamine
ampere (A)
anabolize
anaesthesia
analyse
antagonize
antemortem
antenatal
antibacterial
anticoagulant
anti-Darwinian
antidepressant
antiepileptic
anti-infective
anti-inflammatory
antimalarial
antimicrobial
antioxidant
antiretroviral
antismoking
apologize

a priori
Asia (*but* central Asian countries)
authorize
avant-garde

B

becquerel (Bq)
behaviour
bloodborne
bona fide
breastfeeding

C

caesarean
caesium
capacity-building
capitalize
cardiovascular
catalyse
categorize
centimetre (cm)
centralize
centre
cerebrospinal
Chagas disease
coauthor
coenzyme
coexist
cofactor
coinfection
colour

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[1] These spellings have been incorporated into the default spellchecker dictionary for users of Microsoft Word 2010. For further information, see Chapter 2 (on spelling and capitalization).

Commonwealth of Independent
    States (CIS) (*but* newly
    independent states (NIS))
comprise
compromise
contraindicate, contraindication
co-op (*but* coop)
cooperate
coopt
coordinate
cosponsor
cost–benefit analysis
cost–effectiveness
countrywide
coup d'état
cowpox virus
criticize

D

decentralize
decision-making
de facto
degree (angular) (°)
degree Celsius (°C)
desensitize
devise
dialyse
diarrhoea
directions: north(ern), south(ern),
    east(ern), west(ern), north-
    east(ern), south-west(ern)
Down syndrome
drink–driving

E

email (*but* e-health, e-learning)
emphasize
end-point
equalize
estrogen
estrus
et al.
etc.
etiology
exercise
ex officio

F

faeces
fait accompli
fetal, fetus
finalize
First World War (*not* World War I)
foodborne
franchise

G

gastroenteritis
generalize
genitourinary
gram (g)
gynaecology

H

haemorrhage
harbour
harmonize
herpesvirus
high quality (*but* high-quality care)
homepage
homogenize
honour
hospitalize
hour (h)
hydrolyse
hyperactive
hyperkalaemia
hypertension
hyperthermia
hypertonic
hypocalcaemia
hypomagnesaemia
hypotension
hypothermia
hypothesis
hypothesize

I

immunize
immunocompromised
improvise
in camera
influenza virus (*including* A(H1N1)
    pdm09)

in situ
inter alia
intercountry
intergovernmental
interregional
interrelated
intersectoral
intifada
intra-abdominal
intracellular
intramuscular
intraocular
intraregional
intrauterine
intravenous
in vitro
in vivo
ionize
ischaemic

J
jeopardize

K
kilogram (kg)
kilometre (km)

L
laissez-faire
leukocyte
leukopenia
litre (L)
localize
long term (*but* long-term solution)
louse-borne
lyse

M
manoeuvre
maximize
Mediterranean Sea (*but*
    Mediterranean countries)
meta-analysis
metabolize
metre (m)
microbiology
microeconomics
microgram (μg)

microorganism
microprocessor
milligram (mg)
millimetre (mm)
minimize
minute (of time) (min)
mobilize
modus operandi
modus vivendi
mole (mol)
multidrug
multifaceted
multilateral
multinational
multipurpose
multisectoral
mumps virus

N
nationwide
neighbour
nephrotoxic
neurobehavioural
neutralize
newton (N)
noncommunicable
nonentity
nongovernmental
non-ionized
non-profit-making
nonproprietary
nurse–physician ratio

O
oedema
oesophagus
optimize
organize
osteoarthritis
overestimate
overproduction
overreport
overrule
oversimplify
overuse
oxidize

P

papillomavirus
paralyse
pasteurize
per capita
per se
pharmacogenetics
pharmacopoeia
policy-maker
poliovirus
postbasic
postmortem
postnatal
postoperative
postpartum
practise
précis
precondition
pre-eclampsia
preinvestment
premise
prenatal
preoperative
preplanned
prepubescent
prerequisite
preventive
prima facie
prioritize
priority-setting
programme (*but* computer program)
promise
pro rata
psychosocial
publicize

QR

radioimmunoassay
raison d'être
randomize
rationalize
realize
recognize
re-cover (*but* recover)
re-emerging
re-establish

re-examine
reform (*but* re-form)
reinfect
reinsure
reopen
resect
re-treat (*but* retreat)
retrovirus
reuse
revise
rubella virus

S

scrutinize
second (of time) (s)
Second World War (*not* World War II)
sensitize
sensu stricto
side-effect
sievert (Sv)
sine qua non
socioeconomic
socioenvironmental
Southern blot (*but* northern, eastern,
    western blot)
specialize
stabilize
standardize
status quo
sterilize
stigmatize
subcategory
subcommittee
subcutaneous
subgroup
sublethal
subnational
suboptimal
subparagraph
subregion
sub-Saharan
sub-Sahelian
subsample
subunit
sulfur
summarize

supervise
surprise
synthesize

T
tick-borne
tonne (t)
tranquillize

U
underdeveloped
underestimate
underrate
underreport
underserved
underuse
underweight
un-ionized (*but* unionized)
United Nations (UN)
United Nations Economic and Social
    Council (ECOSOC)
Universal Declaration of Human
    Rights
up to date (*but* up-to-date
    information)
utilize

V
vaporize
vector-borne
versus (*abbr.* vs)
via
vice versa
videoconference
visualize
viva voce
volt (V)

W
waterborne
watt (W)
webpage, website (*but* World Wide
    Web)
well-being

WHO regional committees: WHO
    Regional Committee for Africa,
    WHO Regional Committee
    for the Americas (*also* Pan
    American Sanitary Conference
    and Directing Council of the Pan
    American Health Organization),
    WHO Regional Committee for
    South-East Asia, WHO Regional
    Committee for Europe, WHO
    Regional Committee for the
    Eastern Mediterranean, WHO
    Regional Committee for the
    Western Pacific
WHO regional offices: WHO
    Regional Office for Africa, WHO
    Regional Office for the Americas
    (*also* Pan American Sanitary
    Bureau), WHO Regional Office
    for South-East Asia, WHO
    Regional Office for Europe, WHO
    Regional Office for the Eastern
    Mediterranean, WHO Regional
    Office for the Western Pacific
WHO regions: WHO African Region,
    WHO Region of the Americas,
    WHO South-East Asia Region,
    WHO European Region, WHO
    Eastern Mediterranean Region,
    WHO Western Pacific Region
WHO Secretariat
World Health Assembly
World Health Day
World Health Organization (WHO)
worldwide (*but* World Wide Web)

XYZ
X-ray

ANNEX 4
Selected further reading

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