

## Guidelines for Authors

Version 1, July 2014

**This document is intended to give an overview of the scientific publication process, the concept behind *Strengthening Health Systems*, and guidance for potential authors on how to compile their submissions. Given that the journal is targeting a diverse authorship which includes – in addition to academics – policy makers, development partners and implementing organisations, who may not have previous experience of academic publishing, the suggestions are intentionally comprehensive to give as much information as possible to new authors. Key sections for all authors to take particular note of include: article types, declaration of interest policy, requirements for permission for use of data and ethical approvals, and the checklist for submissions. Pre-submission enquiries are encouraged for all potential authors.**

### An introduction to the scientific publishing process

#### Why publish?

Publishing in an academic journal is a routine part of the generation and sharing of new knowledge. It is an essential component of an academic career, and can also be a valuable source of credibility and professional development for practitioners. Beyond all other forms of reporting and communication, journal publication is desirable because it is the only route through which new data, ideas, analyses, and interpretations become part of the scientific record. Sharing of findings and observations through the scientific record is the most reliable way to ensure that they are accessed and debated by other community members, facilitating the interrogation of findings, approaches, and interpretations that helps build new knowledge.

The function of journals is not only as a purveyors of knowledge but also as guardians of the integrity of the scientific record. By selecting papers for publication, undertaking peer review, and ensuring that published reports adhere to certain community-derived standards, journals help ensure the verity, quality and reliability of published works. By undertaking to publish in the scientific record, authors also take on certain responsibilities: to communicate their work honestly, transparently and with sufficient detail that it can be understood, replicated, verified and contested by their peers, and to participate in the scientific debate that results from publication.

### Strengthening Health Systems

#### Why choose SHS?

SHS is an innovative journal because it intends to capture the totality of knowledge about health systems reform

and intervention, regardless of whether the authors are academics, policy makers, development partners or implementers. It also intends to be a pioneer in the development of community standards for reporting and analysis of experiential knowledge in health and development. This approach means the journal will be a unique forum for inter-disciplinary knowledge exchange and will publish papers that contain information not available in any other publication.

As a result of start-up funding by the United States Government through the President's Emergency Plan for AIDS Relief (PEPFAR), the journal is able to offer a free publication service to authors with no fees for submission or costs for subscriptions. The editorial team intends to provide extensive support for authors, particularly those with little previous experience of scientific publishing, in the development of initial submissions and throughout the peer review and revision process. SHS's goal is to support the documentation and dissemination of valuable knowledge, so we will make every effort to help motivated authors achieve their publication goals.

SHS is committed to addressing the 95/5 publications gap, a term coined by the World Health Organization to describe the imbalance between the proportions of publications from developed and developing nations, and so actively seek papers from developing country-based authors.

### Scope and article types

*Strengthening Health Systems* invites submissions that:

- Promote greater understanding of health systems in all contexts
- Highlight interventions that work and those that do

Enquiries to:  
[shs@hmpg.co.za](mailto:shs@hmpg.co.za)

Online submission at:  
[www.shsjournal.org](http://www.shsjournal.org)



not

- Identify lessons that future policy makers and programme designers can learn from, and
- Highlight knowledge gaps that will refine the health system research agenda.

The core content of the journal is original scientific reports and discussion papers on successes and failures in health system strengthening interventions worldwide, with a focus on identifying lessons that future programme designers and policy makers can learn from, and knowledge gaps to be filled through academic study. In recognition of the fact that success or failure depends on many external factors that may be unrelated to the technical aspects of project design, SHS will publish analyses of the political, social, cultural and economic environment of health systems interventions to further understanding of what works and what does not in specific contexts. Shorter comment articles on issues of controversy or debate in any area of health systems science or intervention are also welcome. Educational articles focusing on, for example, issues related to the use of programmatic and operational data, trends in impact analysis and evaluations, and appropriate indicators of health system strengthening, will be commissioned by the editorial team with guidance from the International Advisory Board.

### **Comment**

Comment articles are editorial-style pieces that present an argument or discuss a topical development in the field. They should be concise and tightly written articles with a clear point. Links to current events, publications, conferences, or announcements are encouraged. Comment articles can be a maximum of 1200 words with 10 references and one image or table. Pre-submission enquiry is strongly advised. These articles will be reviewed internally but only sent for external peer review if the editor deems it necessary.

### **Original reports/research**

The main criterion for submission of an article in the original reports section is that it analyses primary or secondary data and reports findings in a traditional

scientific format. They may be either quantitative or qualitative. The articles should be clearly structured with introduction, methods, findings and discussion sections, and must use appropriate descriptive statistics and tests for any data and calculations. The study or analyses can be either retrospective or prospective, but must have a clear research question, study design and appropriate analyses and interpretation. The introduction should include a thorough literature review, summarising existing studies and articles on the same topic or context. There should be a clear rationale for why the study was done, supported by the literature review. The methods section should clearly describe the selection of the study population, the choice of study design and analyses, how the study was done (in sufficient detail to enable others to replicate it), and any differences between what was planned and what actually happened. Findings should first report the characteristics of the study population, followed by the data collected and results of any analyses. The discussion should interpret the findings, refer back to published literature, and draw conclusions about the meaning of the results for the context in which the study was done and more generally. Where appropriate, always include suggestions for further research questions.

Original reports should include a structured abstract (Background, Methods, Results, Conclusions) of no more than 300 words. The main text should be up to 5000 words long with 75 references. Every statement of fact must be supported by a reference. Please include as many relevant images or figures as necessary. See guidelines for image submission for more details. Peer reviewed.

### **Review and discussion papers**

These are intended to be large and comprehensive articles that review published literature on a particular topic of importance in health systems or take a systematic approach to describing a current or past programme or reform and identifying gaps for research. Preferred topics are those with frequent new developments, issues of controversy or debate, or ideas that bring a new perspective to some aspects of health systems by drawing on knowledge or techniques from different disciplines. This section is also intended to include discursive papers about the political, social, cultural and economic environments of health systems interventions in various contexts, and detailed retrospective reviews of health reforms (national, regional or local) with some analysis of the factors influencing success or failure.

There is no set structure for these papers, but the chosen format should be appropriate to the content and all must include a literature review to set the topic in context. Use of theoretical frameworks to analyse and interpret information is encouraged where appropriate,

### **Panel: Why publish in SHS?**

- Innovative
- International
- Influential
- Peer reviewed
- Open access
- Free for author submissions
- Wide reaching
- Essential reading



along with a rationale for the choice of framework. Papers about health reforms or specific country contexts should cite appropriate source material and may include information from qualitative interviews. All papers in this section should attempt to draw our learning points or lessons learnt for future programme designers or policy makers that could improve the effectiveness of future interventions. Suggested areas for research are also encouraged. Reviews can be up to 5000 words long with 100 references and at least four figures. Every statement of fact must be supported by a reference. Peer reviewed.

## Education

This section is intended to provide educational information for non-academic authors on topics such as research design, statistical analysis, publishing ethics, etc and also to define new consensus standards in the field for widely used techniques including impact analysis, costing, cost-effectiveness calculations, measurements of health system 'strength' or sustainability, etc. Most of these articles will be commissioned by the editorial team, but proposals are also welcome from groups or individuals with particular insight into a topic of general interest. The emphasis of this section is on topics that are relevant for a wide variety of health systems specialists and those that cover new ground. As with other article types, education papers should include a full literature review to summarise publishing evidence in the introductory section. Article structure will depend on the content. Descriptions of techniques and tools must be as detailed as possible to enable readers to use the content in their work without substantial extra reading. Papers should include of how readers can use the content and a discussion of gaps where more research is needed. These papers should be up to 5000 words with 75 references. Figures and tables should be included as appropriate, and efforts should be made to pictorially represent complicated concepts in addition to describing them in the text. Peer reviewed.

## Experience

These are case-study type articles with the aim of communicating observations that have a high interest value to a general readership. The experience, observation or outcome reported should either be: novel and surprising; should demonstrate an innovation with wide applicability; describe a failure that is a useful learning point; or reveal something of significant operational importance about the context of a particular country or region. Supporting data should be included wherever possible. The structure should be a simple narrative with appropriate sub-headings but the context from which the experience is drawn should be clearly described at the beginning of the piece (ie, high/middle/

Article type	Requirements
Comment	1000 words, 10 references, one figure or table. Pre-submission enquiry strongly advised.
Original reports/research	5000 words, 75 references, as many figures and tables as necessary.
Review and discussion papers	5000 words, 100 references, at least four figures or tables.
Education	5000 words, 75 references, at least four images, figures or tables. Usually commissioned Pre-submission enquires welcome for spontaneous submission.
Experience	2500 words, 20 references, at least one image. Pre-submission enquiry preferred.

low income country, health system organisation, public-private mix, type of programme or intervention, etc). Where appropriate, the conclusions should include recommendations for further research and suggestions for how the reported observation/finding can be used to improve program design or implementation. From the Field articles should be up to 2500 words with 20 references and at least three figures. Every statement of fact should be supported by a reference. Pre-submission enquiries with a 200-word summary of the main point of the proposed article are strongly advised to avoid wasted time. Peer reviewed.

## Submission requirements

All submissions should be done through the online submission system at [www.shsjournal.org](http://www.shsjournal.org). Instructions for use of this portal are available on the site itself.

Pre-submission enquiries should be sent to SHS@hmpg.co.za or hannah.kikaya@hmpg.co.za. You should receive a response within 48 hours.

SHS has a set of general submission requirements that apply to all articles, regardless of the intended section of publication. The following elements must be included for all submissions unless otherwise specified:

**Context panel:** Health systems interventions are highly context specific so it is important to indicate clearly to readers the environment in which the programme, project, policy or reform under discussion is being implemented. All papers except Comment articles should therefore include a panel with the following information: country and region; type of health system; project/programme/policy/reform description; brief implementation arrangements; keywords.

**Search strategy and selection criteria:** All article types require a literature search and it is important that a rational search strategy is used in order to locate relevant articles and described in the resulting paper. The search strategy should include all bibliographic databases searched plus other sources of literature (eg, World Bank library), the key words used and

any exclusions applied (eg, only studies published in English, only original reports, etc) and the dates the search was done.

**Funding source and approval process:** Please include a section at the end of every paper before the references that details the source of funding for the work described in the submission, including employment of co-authors, and whether the content of the paper has been approved or endorsed by donors, partners or the ministry of health in the country concerned. Eg, "This study was made possible by USAID funding through PEPFAR. The contents of the paper have been reviewed and approved by the Mission Director in South Africa and the Director of Communicable Diseases at the National Department of Health."

**Declaration of interests:** Please include a declaration of interests for all authors that describes affiliations, relationships, financial arrangements, or beliefs that may be perceived to affect how the author will view the intervention/policy/programme design/technique or tool under discussion. Examples of interests that should be declared are: employment, organizational policy or restrictions, consultancies, specific cultural or religious beliefs with direct relevance to the work.

**Acknowledgements:** Authors are welcome to acknowledge the contributions of colleagues, the inputs of reviewers, and the support of employers/partners/donors. However, please ensure that individuals being acknowledged agree that their names be included.

### *Journal policies and permissions*

**Images:** Authors are encouraged to include high-quality images, figures and tables where appropriate. For images to be printed in the journal, they must be high resolution – at least 300 dpi when viewed at the size they are intended to be printed at. If identifiable individuals are pictured, consent for publication should be obtained from the subject. Copyright should be held by the paper's authors; if not, please obtain permission from the copyright holder for publication. All images that are not the property of the authors should include a credit to the photographer/copyright owner. Figures will be redrawn by the SHS design team.

**Permission for use of data:** Authors must demonstrate that they have obtained permission for use of any data gathered through routine surveillance or monitoring of national health systems or facility operations, or any information they have access to for the purposes of programme implementation that has not specifically been approved for publication. If individual patient data is collected, patients must give informed consent for being involved in the study. For more information on informed consent, please contact

the Editor. Permission is not required for use of secondary data in published reports.

**Ethical approval:** All research studies, whether on primary or secondary data, should obtain approval from an Institutional Review Board, preferably in the country concerned. SHS will publish a full publication ethics policy later this year.

**Criteria for authorship:** SHS uses the criteria for authorship developed by the International Committee of Medical Journal Editors ([www.icmje.org](http://www.icmje.org)). Every listed author must comply with all of the four following requirements: 1) Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; 2) Drafting the work or revising it critically for important intellectual content; 3) Final approval of the version to be published; and 4) Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. Individuals who have contributed but do not meet all these criteria should be listed in the acknowledgements.

**Support from a writer or editor:** Obtaining writing or editing support from a professional writer or editor is acceptable, but it should be disclosed in the form of an acknowledgement.

**Plagiarism:** Plagiarism is defined as the use of another's work, words or ideas without attribution or permission, and representation of them as one's own original work. Plagiarism may take many forms, ranging from major plagiarism (the copy-and-paste of large amounts of text), to minor plagiarism without dishonest intent (e.g. when an author uses parts of an introduction from an earlier paper) and even self-plagiarism (the reuse of significant, identical or near-identical portions of one's own work without citing the original version).

The journal subscribes to CrossCheck, an initiative to prevent scholarly and professional plagiarism. All manuscripts submitted to the journal are automatically scanned against the CrossCheck database to verify originality.

Manuscripts containing plagiarism will not be considered for publication in the journal. If plagiarism is brought to light after a manuscript has been published, the journal will proceed to conduct a preliminary investigation. Suspected misconduct will be reported to the institutes and funding agencies of the authors concerned. The journal reserves the right to formally retract such manuscripts and publish statements to reference material as plagiarism.

**Checklist for submission:** Please download the checklist for submissions from [www.shsjournal.org](http://www.shsjournal.org) to help compile your complete article.