

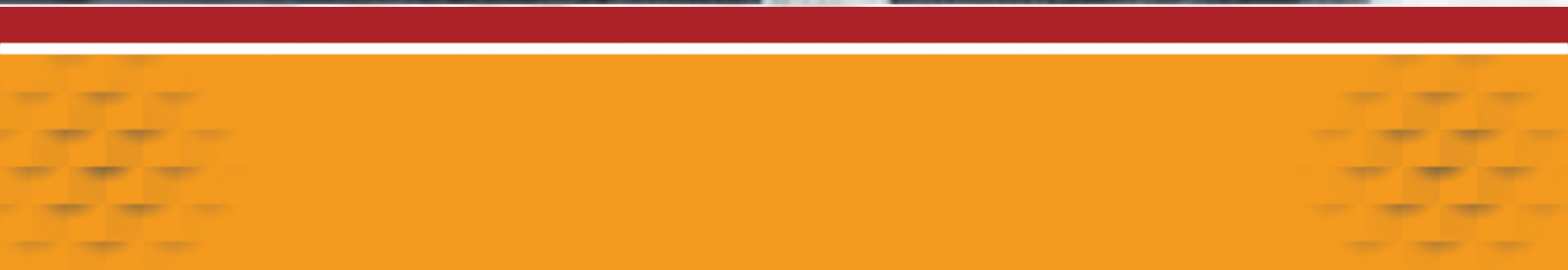
THE SOUTH AFRICAN HEALTH REVIEW 2018

Emerging Public Health Practitioner Award (EPHPA)



Submission Guidelines

10 May 2018



2018 South African Health Review (SAHR)

Reputation and conceptual approach

Over its 20-year history, the South African Health Review (SAHR), has become one of the Health Systems Trust's premier publications.

Offering a South African perspective on prevailing local and international public health issues, the Review, as it is also known, is widely read and quoted as an authoritative reference work in South Africa and abroad, and has been accredited by the Department of Higher Education as a peer-reviewed journal since January 2014.

The SAHR combines detailed data on health status and care with in-depth analysis of policies and practices affecting the provision of health services, infused with insights as to degrees of achievement in policy implementation and barriers thereto.

Aims of the South African Health Review

- Monitoring trends within the health system and in a variety of health and related indicators
- Providing a detailed historical record of the challenges and successes in transforming South Africa's health system
- Highlighting possible policy implications of topical and relevant research findings
- Identifying good practices in policy implementation as well as any hindrances

Target audiences

- Healthcare professionals at all levels and in all sectors of the health system
- Policy and decision-makers
- Public health specialists
- Academics and students
- Donors
- Media
- Local and international health and development non-governmental organisations

Focus

The SAHR's content is largely constructed to address and intersect general health system issues, specific perspectives on health reform, and health and related indicators. Within this terrain, there is scope for focused positioning of material that undertakes retrospective and prospective analysis, probes current examples of innovation, and opens exploratory discourse.

General note for all chapters:

- Chapters should seek to build upon findings presented in earlier editions of the SAHR, and to reflect progress (or the lack thereof) in relation to chapters in previous Reviews, found here: <http://www.hst.org.za/publications/Pages/HSTSouthAfricanHealthReview.aspx>
- Manuscripts will be measured for fulfilment of the following aspects:
 - o Relevance of the topic to the local and international public health community and the current policy environment in South Africa
 - o Scientific rigour and intellectual clarity
 - o Degree of innovation and originality
 - o Identification of good practices and hindrances to policy
 - o Implementation
 - o Possible implications for policy reform
 - o Conclusion with recommendations for next steps

Timelines and Submission Requirements

Chapter Submission Deadline:

Friday, 3 August 2018

A complete EPHA entry form along with a copy of the author's ID should accompany the submission of the chapter.

All submissions and any related enquiries should be submitted to sahr@hst.org.za.

NB: The Editorial Advisory Committee reserves the right to reject chapters that are received after the stipulated deadline.

Review process

Entries will be assessed by a panel of public health experts. Authors may be requested to modify their chapters in line with comments from this panel.

NB: The Editorial Advisory Committee reserves the right to reject chapters that do not conform to the established standards of the SAHR, and/or that deviate significantly from the initial chapter brief.

Length of manuscript

Chapters should be a **MAXIMUM of 5 000 words in length (including ALL references, figures, graphs, tables, appendices AND the 300 word abstract)**, written in an accessible style that is suitable for both academic and lay audiences.

Submissions must include the following:

- EPHPA entry form (supplied) detailing chapter title, author, affiliations and declaration
- A brief abstract (300 words maximum)
- A short introduction which sets the scene, including: terms of reference and the objective of the chapter, and a brief overview of the methodology used in data collection, if relevant
- Key findings with an emphasis on the implications of the findings
- Conclusions arising from the main ideas presented in the chapter
- Recommendations should be as specific as possible
- References must be incorporated in Vancouver style

File format

- Chapter manuscripts should be produced in MS Word.
- Submitted files must be saved using the following **naming convention**:
Name Surname (of author)_Chapter Title (or sensible abbreviated version thereof)_EPH-PA_Entry_Date
EG: John Smith_Analysing the Health Systems of A_EPHPA_Entry_4Jun2018

Font and line spacing

Manuscripts must be presented in ARIAL size 12 with double-line spacing.

Spelling

UK English should be used as the set language for the document.

Referencing

- Authors must use the **VANCOUVER referencing style** for consistency across all chapters.
- In Vancouver style, references are numbered in the order in which they appear in the text (not alphabetised), with the citation numbers super-scripted in the text and the full list of complete references presented in a correspondingly numbered list at the end of the chapter.
- The original number assigned to a source is re-used every time it is cited in the text, regardless of its previous position in the text.
- References should not be inserted as footnotes.
- All tables, figures, boxes and graphics must be referenced directly underneath the visual, e.g. Source: WHO, 2000.²⁸ with related reference information in the reference list.
- Authors are required to verify the cited references against the original sources before submitting their manuscripts, and to provide reference information in full.
- Authors are requested to use, as far as possible, relevant South African journals as sources and to refer to South African research pertaining to the chapter content.
- Journal titles are abbreviated (to decipher abbreviations see PubMed Journals Database <<http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=journals>>)
- If there are more than six authors, list the first three; thereafter add 'et al.'. Book and journal titles are not italicised or placed in quotation marks.

Examples of Vancouver-style referencing are provided in the following table.

Table 1: Referencing examples

Type of Publication	In-text example	Reference list example
Books		
Single author	A conflict with the duty of care owed to the singular patient is suggested by Shildrick ¹ ...	1. Shildrick M. Leaky bodies and boundaries: Feminism, postmodernism and (bio)ethics. London: Routledge; 1997.
2–6 authors	... whether to adopt the rapid-test method for patient surveillance. ¹⁷ or Murray and colleagues caution that '...' ¹⁷	17. Murray PR, Rosenthal KS, Kobayashi GS, Pfaller MA. Medical microbiology. 4th edition. St. Louis: Mosby; 2002.
Article or chapter in a book	As discussed by Blaxter ³⁴ ...	3. Blaxter M. Social class and health inequalities. In: Carter C, Peel J, editors. Equalities and inequalities in health. London: Academic Press, 1976; p.369–80.
Print journals		
Article	As mentioned by Wharton ⁴ ...	4. Wharton N. Health and safety in outdoor activity centres. J Adventure Ed Outdoor Lead. 1996;12(4): 8–9.
Internet		
Document on the Internet	Statistics from the South African Nursing Council (SANC) illustrate that '...' ⁸	8. South African Nursing Council. SANC registration and enrolment figures. Pretoria: SANC; 2014. [Internet]. [cited 16 September 2015]. URL: http://www.sanc.co.za/stats_an.htm
Government publications		
Acts of Parliament	... the stipulated amounts of a range of vitamins and minerals. ⁹⁴	94. Medicines Control Council. Medicines and Related Substances Act 101 of 1965. Vested powers: Registration of medicines in Category A. Government Notice No. R.837, Government Gazette No. 38133, 28 October 2014. URL: http://www.gov.za/sites/www.gov.za/files/38133_rg10300_gon837.pdf
Government reports, policies and guidelines	... governing every element of the provision of emergency medical services... ¹³ ... a professional nurse shortage of 44 780 in the public health sector. ¹⁰	13. Minister of Health. Emergency Medical Service Regulations. Government Notice No. R.413, Government Gazette No. 38775, 8 May 2015. URL: http://www.gov.za/sites/www.gov.za/files/38775_rg10427_gon413.pdf 10. South African National Department of Health. Human Resources for Health South Africa: HRH Strategy for the Health Sector: 2012/13–2016/17. Pretoria: National Department of Health; 2011.
Other sources		
Personal communication, e-mail, discussion lists (no web archive)	This was later confirmed (Savieri S 1999, personal communication, 24 April) that an outbreak occurred in London at this time.	Not included in reference list as the correspondence cannot be traced by the reader. Please add as a footnote: Personal communication: S. Savieri, 24 April 1999

Example of a reference for content published in the South African Health Review:

- Gray A, Gengiah T, Govender M, Singh J. Health legislation. In: Ijumba P, Barron P, editors. South African Health Review 2005. Durban: Health Systems Trust; 2005. URL: http://www.hst.org.za/uploads/files/sahr05_chapter2.pdf

Table, Figures, Boxes and Graphics

- Tables, figures, boxes and graphics should be numbered and captioned (Table 1, Table 2, Figure 1, Figure 2, Box 1, Box 2, etc.) with the description in sentence case above the visual. Font size 10.5.
- Indicate the source of the data below each table, figure or box with corresponding authors, the year and reference number. Font size 9.5.
- Font size of text contained within a table should be set at 8.5.
- Reference in the text to tables, figures or boxes should be given as:
 - “As can be seen” or “shown in Figure 3”
 - “The number was higher in Gauteng (Table 2) than in the Free State (Table 3).”
- Please provide high-resolution images for all graphics. Where graphics are included, the source data (Table/Excel spreadsheet) should also be provided to allow re-graphing as required.

Please refer to the following examples for guidance:

Box 1: What is stewardship?

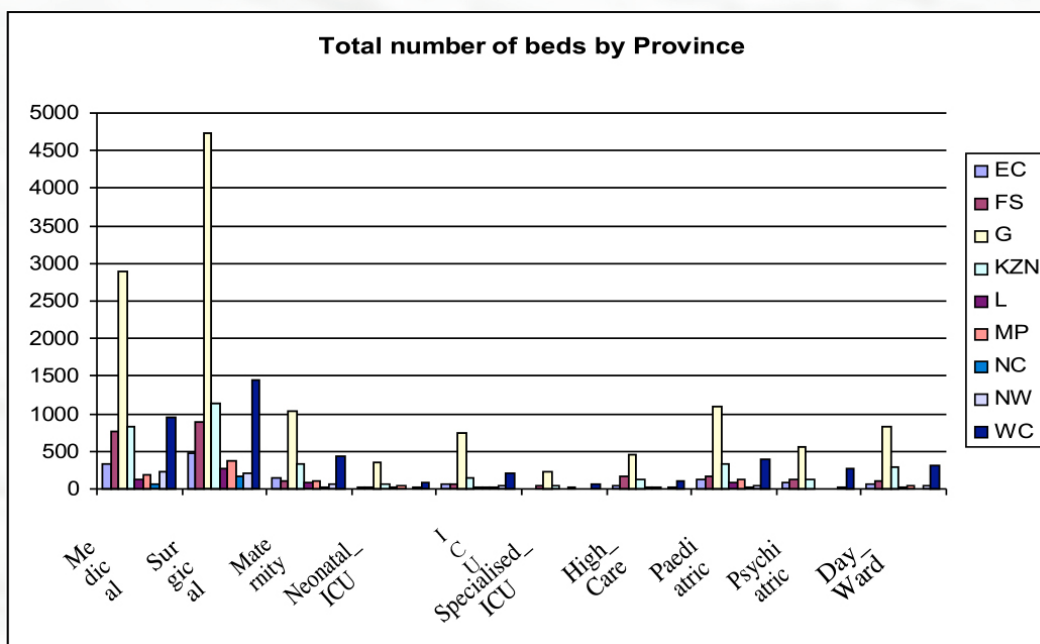
Stewardship in health is the very essence of good government, i.e.

- Careful and responsible management of the wellbeing of the population
- Establishing the best and fairest health system possible
- Concern about the trust and legitimacy with which its activities are viewed by the citizenry
- Maintaining and improving national resources for the benefit of the population

Table 1: Levels of Education of Medicinal Plant Consumers in Durban

Education level	% of respondents surveyed at healers' practices (n = 99)
No schooling	7.8%
Up to Grade 7	31%
Up to Grade 10	26%
Up to Grade 12	26%
Tertiary qualification	8.7%

Figure 1: Private hospital beds by province, 2006



Writing style

Heading styles

- Where possible, consistent formatting styles should be used – i.e. heading styles should be used to distinguish each heading level (Heading 1, Heading 2, etc.)
- Headings should not be followed by punctuation.
- All other text should be defined as “Normal”.

Quotations

- Use “double quotations” for a direct quote, and insert the reference.
- Use ‘single quotation’ to emphasise a point, denote a common meaning or expression, or to highlight an issue.

Footnotes

These should be inserted using the footnote feature built into MS Word, with continuous superscript letters (a, b, c,) so that they do not become confused with the numerical references.

Numbers

- Numbers should have one space between thousands (not commas)
1 000 or 10 000 or 100 000
- Where decimals are used; a full-stop is used to indicate the decimal place
10.56 or 1 000.56 or 10 000.56
- Please use the en-dash (–) between digits (values, dates, etc.) to indicate range, e.g.:
Strategy 2015–2017 15–24-year age group

Provinces: order and abbreviations

Where data are given by provincial breakdown, list provinces in this order and with these designations/spellings:

Province	Abbreviation
Eastern Cape	EC
Free State	FS
Gauteng	GP
KwaZulu-Natal	KZN
Limpopo	LP
Mpumalanga	MP
Northern Cape	NC
North West	NW
Western Cape	WC
South Africa/Total/Average – as applicable	SA

Racial groups

- In tables, figures, boxes and graphics, racial groups should be designated: Black, Coloured, Indian, and White (abbreviated as B, C, I, W where required) and should be given in this order.
- Where these terms are used to specify racial groups in sentences, the first letter should be capitalised, for example:
 - ... the number of White doctors
 - ... printed on white paper

For more information, please contact sahr@hst.org.za

2018 South African Health Review (SAHR) 2018
-EPHPA Checklist-

Deadline for submission: Friday, 3 August 2018

Before submitting your manuscript, please refer to the following checklist and ensure that all the required specifications have been met:

EPHPA entry form completed and submitted	<input type="checkbox"/>
Copy of ID attached	<input type="checkbox"/>
File name (see file naming convention, pg. 4)	<input type="checkbox"/>
300 word abstract	<input type="checkbox"/>
5 000 word maximum length (including all references, figures, tables, graphs, abstract, etc.)	<input type="checkbox"/>
Vancouver style referencing	<input type="checkbox"/>
MS Word format	<input type="checkbox"/>
Arial font, size 12	<input type="checkbox"/>
UK English as set language	<input type="checkbox"/>
Double-line spacing	<input type="checkbox"/>