Call for Papers for a Journal Supplement on:

Advancing knowledge and practice for using systems thinking for equitable health systems strengthening in LMICs

Launched in association with:

"Systems thinking for health systems strengthening",

the Alliance HPSR 2009 Flagship Report

Issued: March 12th, 2012

Deadline for Submission of Abstracts: April 22nd, 2012 (23:59 GMT)
1. Introduction

This Call for Papers is jointly issued by the Alliance for Health Policy and Systems Research at WHO, and the Governance for Equity in Health Systems (GEHS) program at the International Development Research Centre (IDRC).

The Alliance for Health Policy and Systems Research (HPSR), thereafter called the Alliance, is an international collaboration, based in WHO Geneva, that aims to promote the generation and use of health policy and systems research as a means to improve the health systems in LMICs. For more information please visit: www.who.int/alliance-hpsr.

The Governance for Equity in Health Systems (GEHS) Program at IDRC supports research that examines issues of governance and equity in strengthening health systems in low and middle income countries (LMICs). The goal is to bring to the forefront institutions, researchers, and decision-makers equipped with sound evidence needed to improve access to health and health services.

The Alliance launched its third flagship report, entitled ‘Systems thinking for health systems strengthening’ on 17 November 2009. The full report is available for download from our website (www.who.int/alliance-hpsr).

In this Report, the Alliance discusses systems thinking – a powerful approach for guiding investments in health systems. Health systems are complex. Failing to take this complexity into account will continue to hinder efforts to achieve better and more equitable health outcomes. To be able to do so requires a better understanding of the complex interrelationships and dynamics between the different health system components as well as the views, interests and power of its different actors and stakeholders. Systems thinking re-orient our thinking about health systems by expanding our understanding of the characteristics of complex adaptive systems and how to incorporate this learning in thinking about system problems and potential solutions. Long used in other disciplines, systems thinking has great yet untapped potential for health systems, e.g., in strengthening the design, implementation and evaluation of health systems interventions, policies and strategies.

This Report and other recent publications on the topic generated an increasing interest and demand for moving this kind of “thinking” forward. This expression of interest was supported by debates and discussions at a two-day Expert Consultation held by the Alliance on shaping the emerging systems thinking agenda in October 2010. The Alliance sought further inputs during a dedicated session at the First Global Symposium on Health Systems Research in November 2010. The main recommendation derived from these two consultations was to support the development of practical guidance to make the shift from abstract concepts and theories to actual applications and experiences of how systems thinking can be used to strengthen health systems, particularly in LMIC. This is stemming from the perceived predominance of mostly theoretical, northern driven, experiences using systems thinking principles and the lack of a wider application of these
concepts in health systems and in LMICs.

In response, in 2011, the Alliance coordinated the development of a selection of manuscripts to better understand current practices in applying ST for health systems in LMICs, to be published in a peer-reviewed journal supplement in November 2012.

In order to continue responding to this demand, and to ensure that these efforts have country-level impact, the Alliance and IDRC are jointly supporting a new supplement, with a specific focus on advancing methodologies, knowledge and practice for using systems thinking for equitable health systems strengthening in LMICs.

Note that two peer-reviewed supplements with a focus on systems thinking have been published in 2006 and 2007. The first supplement was published in the American Journal of Community Psychology\(^1\) and the second supplement was published in the American Journal of Public Health.\(^2\)

2. Goal and Objectives of this Call

The overall goal of this Call is the publication of a selection of papers to contribute to a new peer-reviewed journal supplement on “systems thinking”. With such a supplement we aim to provide readers with a suite of approaches/strategies, tools, experiences, examples and applications to draw from when developing future designs, implementation plans and evaluations of new interventions to strengthen health systems efficiently and equitably. This new supplement casts the net wider, pushing the frontier of translating systems thinking principles in health from theory into practice, particularly in LMICs. It opens itself to a wide range of perspectives and disciplines relevant to strengthening equitable health systems through a systems thinking framework.

Systems thinking is interpreted to encompass 1) a ‘health systems’ perspective (as opposed to the more prevalent programmatic or disease-specific focus of health debates) and/or 2) a “complex systems” perspective, based on the notion that a health system is a complex adaptive system and drawing from the non-health work in this field.

The Alliance will take the responsibility in negotiating with the relevant Journals for the publication of this supplement. It will communicate this information to successful applicants in due course. The supplement is expected to be published during 2014.

3. Focus of the Supplement (and this Call)

Please note that we do not encourage proposals for manuscripts that simply seek to argue for the importance of systems thinking or make the case for why it matters - the Call (and the related supplement) is strongly focused on enriching the

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1 American Journal of Community Psychology. Volume 39(3-4); June 2007.
knowledge base with practical guidance on relevant methods, tools and approaches to apply systems thinking for health systems in research and practice.

**Geographic focus:**
The supplement will focus entirely on experiences in, or relevant to, LMICs.

**Disciplinary focus:**
The focus is on health systems from a range of disciplinary perspectives. It can address: 1) health systems as a whole (as opposed to programmatic or intervention-specific focus) and/or 2) applying the principles of systems thinking (such as complex adaptive systems, soft systems methodology, reflective practice etc.) to health systems.

**Interventions focus:**
The supplement will focus on interventions or policies with system-wide effects. This may include system-level interventions (e.g., those addressing one or more of the health systems building blocks or functions of the health system, ³ and considering health systems actors and stakeholders and their values, interests and power ⁴), or those involving scale-up (hence with system repercussions) of complex interventions targeting a disease or programme. Complex biological interventions that do not have significant system-wide effects will not be considered for this Call.

**Topic focus:**
Methodological developments, approaches, tools or explorations to support applications and teaching of systems thinking principles, as well as approaches to incorporate the associated learning in the policy making process. This could be a reflection of existing experiences as well as exploration of new ideas, including those used successfully in high-income countries or other disciplines.

Some examples include:

- Detailed approaches/strategies, tools or methods for a comprehensive design and/or evaluation of interventions with system-wide effects, using a systems thinking lens. These should draw from real rather than theoretical examples and can include analytical reflections on retrospective work or prospective research. This may include but is not limited to:
  - conceptual frameworks for identifying and evaluating anticipated and unanticipated effects, based on empirical work;
  - stakeholders analysis, coordination and management relevant to designing and implementing new interventions or policies in LMICs;

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o how to take into account interactions and feedback between the intervention, systems actors and systems components or building blocks;
o how to address and take into account non-linearity of effects in evaluations;
o how to take into account other characteristics of complex adaptive systems;
o how a systems approach helps to understand problems and identify and adapt solutions going forward to strengthen health systems.

- Applications of system dynamics modelling techniques to evaluate the impact of system-level interventions (not-disease specific) in LMICs. Qualitative approaches to system dynamic modelling are particularly encouraged (e.g., influence diagrams, causal loop diagrams or others--see for example: http://jayfor.site.aplus.net/qualsd/index.html).

- Strategies to demonstrate how a systems thinking approach enables improved management and leadership practice and institutional learning, demonstrating its impact at the decision making and implementation levels. They may also explore how does systems thinking inform the integration of explicit and tacit knowledge in institutions and of individuals in a continuous feedback, exchange and learning processes.

- Conceptual papers or reviews of empirical work that discuss or clarify the different schools of thoughts in this field (e.g., hard versus soft systems methodologies) and presenting them in an accessible way to general readers.

The examples above are just to provide some ideas of what would be considered relevant for this Call. The Alliance and IDRC encourages applicants to consider a broad range of relevant methodologies, tools and approaches, as well as drawing on knowledge and experiences in sectors other than health.

4. Technical and Financial Support

The Alliance and IDRC are particularly concerned about the added value of work conducted through its grants programmes. We will, therefore, work closely with the selected authors to support their work, promote opportunities for learning and collaboration through workshops (see below) and online fora, and if appropriate, identify technical support to assist the research teams in their efforts.

If required, authors can request basic financial support for the writing of the manuscript. Typically grant size will range between US$1000-2000 to cover translation or editing support. Higher amounts may be exceptionally considered, if appropriately justified. Please note that financial support for this Call is not intended to cover salaries, international travel or purchasing of equipment and supplies.

Successful applicants will be invited to attend the Second Health Systems Research Symposium to be held in Beijing in November 2012. This will provide an opportunity for exchanging experiences, networking, participating in the launch of the upcoming
Alliance-supported supplement on Systems thinking, and discussing the development of their respective papers. Funding will be only available to support participation of applicants from LMICs.

There will be a second opportunity to meet and share experiences in developing this supplement and its implications on future work in this area. This is expected to be during 2014, as part of an organized event to launch this new supplement. All applicants whose papers were accepted for publication will be invited, and financially supported, to participate in this event, including applicants from HICs.

5. Eligibility to Apply

We aim to have 80% of articles with the first author from LMICs. The remaining 20% can be led by authors from high income countries. Participation of emerging researchers, local stakeholders and decision makers involved in the day to day management of the interventions and policies in question is encouraged.

6. Submission Format

Submission of abstracts must be sent in English. Please see Annex 1 for the application format and for guidance on what information should be included.

7. Evaluation Process, Criteria and Timelines

Please direct all questions concerning this Call, by email, to the Alliance for Health Policy and Systems Research (alliancehpsr@who.int). In the header of the email please put "Question: Call for Papers on systems thinking".

Abstracts will be evaluated according to the following criteria:

- Innovation of the proposed topic and research questions, and the value added to existing literature (30%).
- Quality of the abstract, rigour of the proposed research strategies and clarity of arguments and questions being addressed (45%)
- Publication experience of the lead author and writing team (25%).

Where technical criteria are of equal merit, the final decision will be made by taking into account the diversity of topics, settings and interventions. We will also ensure that 80% of the selected papers are by first authors from LMICs.

All proposals must be submitted to the Alliance for Health Policy and Systems Research, by email (alliancehpsr@who.int), and must be received by 22nd April, 2012 (23:59 GMT). Proposals should be submitted using the format provided in Annex 1. In the
header of the email please put "Application: Call for Papers on systems thinking". The Alliance will notify all applicants of receipt of their application. Please contact the Alliance if you have not received a notification within a week of your submission.

Proposals will be independently reviewed by two technical experts using the criteria described above. A small committee composed of members of the Alliance’s Scientific and Technical Advisory Committee and a technical expert representing IDRC will make the final selection.

Successful (and unsuccessful) applicants will be notified towards the end of July 2012. Development of the manuscripts will be expected to start in September 2012. Final submission of manuscripts to the peer-review Journal is expected around September 2013 (tentatively). The supplement is expected to be published during the second half of 2014.
Annex 1 - Application Template

THIS FORM SHOULD BE SUBMITTED BY E-MAIL TO: alliancehpsr@who.int

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1.6 Do you need financial support for writing this manuscript?

If yes, please provide the approximate amount requested and briefly indicate what it will be spent on. Please present this in USD.

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There is no specific format for the abstract section, but the word count should not exceed 1000 words. This section is critical to the selection process so please focus on information that clarifies the research question/s you intend to explore in this manuscript, and how you intend to address them. As relevant, briefly outline the overarching research approach, what methods or tools will be used to address your research questions, the anticipated outcome and new knowledge provided through this manuscript. As relevant, please provide information on the study setting. If the study involves a particular intervention or health policy, briefly describe the nature of the intervention. You can also use this space to briefly explain why the research is relevant to future research or policy making.