

# Innovations in Policy and Practice: Engaging practitioners as authors

Trevor Hancock, MB, BS, MHSc,<sup>1</sup> Victoria Barr, MHSc,<sup>2</sup> Louise Potvin, PhD<sup>3</sup>

## **ABSTRACT**

The *Canadian Journal of Public Health* is launching a new section entitled *Innovations in Policy and Practice*, which will be a showcase for and reflection on innovative public health policy and practice in Canada. The section will focus on articles that describe the development and implementation of innovative policies and practices in Canada and/or that reflect on the experience of practitioners in implementation. The section is explicitly intended to attract practitioners as both readers and authors. This will involve a number of innovations for the Journal that will make the role of author easier for practitioners and result in published material that is attractive and useful, while retaining a scholarly approach. In addition, the review process for this section will be oriented to the reality of practice and undertaken by 'practitioner-scholars' in a collegial and non-anonymous manner.

**KEY WORDS:** Publishing; diffusion of innovation; public health practice; policy; peer review, research

## **Author Affiliations**

1. Senior Editor, CJPH; Professor and Senior Scholar, School of Public Health and Social Policy, University of Victoria, Victoria, BC
2. Public health consultant; Assistant Teaching Professor, School of Public Health and Social Policy, University of Victoria, Victoria, BC
3. Editor in Chief, CJPH; Professor, University of Montreal, Montreal, QC

Innovations in public health policy and practice are occurring all the time across Canada. Only too often, however, they are not well reported and their potential is not fully realized.

We want to change that.

In keeping with its long tradition of supporting the work of public health practitioners and decision makers, the *Canadian Journal of Public Health* has launched a new section entitled *Innovations in Policy and Practice*. The section is a showcase for and reflection on innovative public health policy and practice in Canada, and eventually abroad to the extent that they might be internationally relevant. In particular, we want to encourage practitioners to publish their innovations in ways that will make these more attractive, engaging, useful and relevant to practitioners and policy makers/shapers in Canada and internationally.

That means we will be doing some innovating ourselves, both to make the role of author easier and to result in published material that is attractive and useful, while retaining a scholarly approach.\* After a brief introduction, we present the revised mandate for the section, the approach we will take, innovative approaches we will implement, the types of practice-based articles we will publish, and the guidelines for reviewing articles.

This commentary constitutes a call for submissions. The new CJPH section is a work in progress, and as such we will be seeking the input of practitioners as we go along.

## **INNOVATIONS IN POLICY AND PRACTICE SECTION**

This section will be a showcase for and reflection on innovative public health policy and practice in Canada. We want to publish exciting articles that describe the development and implementation of

---

\* This invited commentary was greatly influenced by and is in part taken from a report commissioned by the Journal and prepared by Victoria Barr.<sup>1</sup>

innovative policies and practices in Canada that are intended to improve the health of the population and/or some segment of the population and/or to reduce inequalities in health. We also want to publish articles that reflect on the experience of practitioners in implementation.

The section will be managed with an eye to providing content in a manner that engages practitioners and policy makers/shapers in Canada and internationally as readers, and Canadian ‘practitioner-scholars’ as authors and reviewers.

At the same time, CJPH will maintain a strong scholarly standard for this section, but one that is more applicable to practice. In particular, the review process will be oriented to the reality of practice and undertaken by ‘practitioner-scholars’ in a collegial and non-anonymous manner. We are also considering whether to publish the reviewers’/editor’s comments, especially the key points of innovation, together with the article.

Over time, we hope that web-based supports for practitioner authors will be developed and strengthened, building on the supports already provided by similar journals in the field.

The *Innovations* section will collaborate with, complement and not duplicate the following key Canadian resources:

- Canadian Best Practices Portal, Public Health Agency of Canada (BPP)  
This portal is “a compilation of multiple sources of trusted and credible information [which] links to resources and solutions to plan programs for promoting health and preventing diseases for populations and communities”.
- National Collaborating Centres for Public Health (NCCs)  
The NCCs “identify knowledge gaps, foster networks and translate existing knowledge to produce and exchange relevant, accessible, and evidence-informed products with practitioners, policy makers and researchers”.
- [HealthEvidence.org](http://HealthEvidence.org)  
Their mission is to “make evidence easily accessible while developing organizational and individual capacity for evidence-informed public health decision making”.

## **Mandate**

We will publish articles that describe the development and implementation of innovative policies and practices in Canada intended to improve the health of the population and/or some segment of the population and/or to reduce inequalities in health, as well as articles that reflect on the experience of practitioners in implementation.

We also hope to trigger researchers’ interest and curiosity. Acknowledging that practice-based evidence is of paramount importance for innovation in public health,<sup>1</sup> we believe that opening our pages to promising practices will help create new partnerships between researchers and practitioners to develop innovative population health intervention research projects.

## **Approach**

We intend to find a balance between rigour and innovation. Public health practitioners practise in a way that is informed by evidence, but tailored to local circumstances. It's important to acknowledge and understand the many forces, some political, that are acting on practitioners and that therefore influence and shape their practice. But research processes don't always appreciate the political, cultural and social nuances that affect practice in the community.

Moreover, there may not necessarily be an evidence base specific to the context of a particular community or situation. As a result of these two limitations – social, cultural and political contexts and weak or absent specific, context-relevant evidence – there is a limit to the extent to which practice can be purely 'evidence-based'; instead, practice becomes, necessarily, evidence-informed. If we limit the publication of articles to only those that are strictly evidence-based, we run the risk of not reflecting the nature of public health practice as it is happening today in Canadian communities.

The format and visual appeal of a journal is important, particularly for practitioners, who have limited time to read professional resources and are not used to writing and communicating in an academic style. Most articles now are read online, rather than in print form. This online format allows us to incorporate colour, photographs, video, maps, links to websites and other embellishments that might entice practitioners to read the journal, while helping them to learn.

With respect to practitioners as authors, we recognize there are several constraints upon them. First, they are not required to publish, as are academics; it is not part of their job description and time is not usually allowed for such work. As a result, publication is often done 'off the side of the desk'. Moreover, public servants in particular may be discouraged from publishing, even forbidden to publish, if the issue is politically controversial. So while academics may perish if they don't publish, practitioners may perish if they do!

### **Innovations by public health journals to support practitioners**

In a review of practices in journals in public health and related fields that encourage and support practitioner engagement,<sup>2</sup> some common themes emerged. Those journals encouraged and supported the inclusion of public health practice-oriented articles through the following:

- **Articles are shorter** (i.e., maximum of 2000 to 3000 words) than many research-based journals. Practitioners have limited time to read articles, and are likely to appreciate articles that are clear and concise.
- **A wide variety of different types of articles are published.** Not surprisingly, the practice-based articles aimed at practitioners focus on
  - case studies showing how action is actually implemented
  - commentaries
  - policy analyses, and
  - short reports of new programs or initiatives.Evaluation of programs or policy initiatives and stories of academic-practitioner partnerships are also widely published, but these do not overshadow the more contextual reports of learnings from community-based work.
- **Efforts are made to ensure that the time from the submission of an article to its publication is short.** The political context of policy and program development in public health is continually changing. If there is a delay of several months from when an article is submitted until it is

published, there is a risk that the content of the article will be out of date. The editorial board of practice-based journals moves quickly to stay relevant.

- **Review teams are made up of public health practitioners or practitioner-researchers**, rather than full-time researchers or those working strictly in an academic setting.
- **The journal encourages practitioners to write in a style that might conflict with a traditional academic style.** For instance, the *Journal of Public Health Policy* suggests that authors write with an active, not a passive voice. That particular journal offers detailed instructions about how to do this, including examples.<sup>†</sup> *Health Policy* asks authors to write in a non-technical style that practitioners within health systems and from other disciplines will be able to easily understand. *Health & Social Care in the Community* asks for the abstracts of articles to include bullet points that give:  
“... short, clear summaries on ‘What is known about the topic’ and ‘What this paper adds’ ... in terms of outcome statements (what is known/added), not process statements (what was done).”
- **The website for the journal assists practitioners in other ways**, through linking to relevant services or information beyond the scope of the journal itself. Putting energy into the design and navigation of the journal’s website acknowledges the fact that today’s practitioners explore written resources online, rather than in print form.

## CJPH-SPECIFIC INNOVATIONS

Based on the above ideas, and in keeping with its name, therefore, we are implementing several innovations in this new CJPH section, which we expect will be revised over time as we learn from experience:

- Articles are short (i.e., maximum of 3000 words, depending on the type of submission – see Table 1).
- Abstracts will focus on the conclusions/key findings and implications for policy and practice, since that is what practitioners are most concerned with.
- Authors (or at least lead authors and/or the majority of authors) are practitioners. Academics may take the lead in writing the article, if so requested by the practitioners, but the practitioners still have to be the main contributors to the article.
- Authors are encouraged to write in an accessible style, including use of the active voice and non-technical language.
- Authors are encouraged to incorporate a variety of approaches and styles – among others, inclusion of ‘voiceover’ Power Points, Prezis, videos.
- Prior to submission of a manuscript, authors will submit through the journal’s regular online submission process a 250-word structured abstract (with headings Setting, Intervention, Outcomes, Implications).
- The Senior Editor will review each abstract and provide authors with feedback. When an abstract is deemed appropriate for the journal, the author will be invited to submit a full manuscript or other type of submission.

---

<sup>†</sup> JPHP policy: Our readers want to know and therefore, JPHP style requires that authors, throughout the article, including the abstract, tell who has made decisions or taken actions by using the active voice (“The research team decided” or “The Department of Health implemented...”), and avoiding the passive voice (“It was decided...” or “The policy was implemented...”). Be sure to state by whom any action was taken or decision made.

- Reviewers are practitioners with a scholarly track record (i.e., they are or have been involved in research, teaching and publication).
- Review criteria are geared towards important issues with respect to practice and implementation.
- Specific criteria for articles rooted in Indigenous worldviews and practice will be developed in consultation with key Indigenous researchers and practitioners.<sup>‡</sup>
- We will experiment with non-anonymous reviews and in-person (phone or Skype) reviews as ways of improving the quality of published work in a more collegial and supportive manner than tends to be the case with anonymous academic reviews.
- We are considering whether to publish the reviewers’/editor’s comments on the innovation together with the article.

At the same time, the Journal will maintain a strong scholarly standard, but one more applicable to practice, which means authors are expected to demonstrate:

- Awareness of environmental, social, cultural and political context
- Evidence of knowledge and learning from the practices and policies of others
- Presentation of factual experience, not just opinion
- Reflexivity on one’s own practice
- Recognition of limitations in the work that is presented
- Discussion of implications for others and for future policy and practice.

Over time, web-based supports for practitioner authors will be developed and strengthened. Some journals already provide a significant amount of guidance and encouragement for prospective authors. The publishers and editors of those journals note that they realize there are barriers to public health practitioners submitting papers about their work for publication in a journal.

### **Types of practice-based articles we will publish**

The CJPH section *Innovations in Policy and Practice* invites submissions in a number of different categories, as outlined in Table 1. The main focus will be on the first four categories in the table.

We are interested in articles describing innovations that have been implemented, or the process and experience of innovation, not innovative ideas or models, or proposals for innovations; the latter might be appropriate for submission to the CJPH as a regular (i.e., non-IPP) commentary.

### **GUIDELINES FOR REVIEWING ARTICLES**

In order to encourage more public health practitioners to bring forward their ideas, their experiences, and their questions in journals, we need to use a different set of criteria to rate potential articles. Those criteria need to acknowledge that the knowledge and experience of practitioners involves a different kind of ‘evidence’ than results from standard epidemiological and biomedical public health research:

*“The knowledge base needs to include shared experiences and observations about making programs work. Such relevant information needs to be based in theoretical concepts and on real-life models,*

---

<sup>‡</sup> Specific criteria to measure interventions for Indigenous communities have been developed by the PHAC Best Practices Portal through extensive consultations with the Indigenous community and these will be an important guide for this work.

*and it needs to be written so that other practitioners and community partners will be able to understand it without advanced training.”<sup>3</sup>*

Such evidence is more qualitative and is related to recent developments in the field of public health systems and services research.<sup>4,5</sup>

Criteria for both implemented interventions and the process of implementation are noted below.

### **Guidelines for reviewing articles about an intervention that has been implemented**

- Originality
  - Is the concept innovative/cutting edge?
- Is the intervention or practice described based on available evidence?
  - Clear demonstration of the use of evidence/best practice
  - Is it research-based?
- Has the intervention or practice been adapted to local context?
  - If so, how?
- What was the impact – OR what is the potential for impact – of the intervention on population health?
  - Analysis of outcomes/Evidence of change
  - Short- (within 1 year), medium- (>1 to <5 years) or long-term (>5 years) outcomes are reported, related to the primary objective(s) of the intervention
- Implications
  - Transferability/Application in other jurisdictions
  - Does the concept or practice have the potential to apply in other contexts?
- Clarity and quality of writing
  - The article is well written – and in an accessible rather than an academic style
- Overall assessment
  - Value to readers/Contribution to the field of public health

### **Guidelines for articles reporting the process of implementation of an intervention**

- **Source of the intervention:** Authoritative/credible source?
- **Context for implementation:** Any relevant social, political, cultural, environmental or economic contexts are described.
- **Key players:** The key players involved in the process are identified (not by name, unless informed consent is presented).
- **Rationale/Expected impact:** The reason for the intervention and the expected impact on population health is described.
- **Process:** Challenges and facilitating factors in the process of implementation are described.
- **Lessons learned:** The key lessons learned are described / discussed.
- **Implications:** The implications for others considering the same or a related intervention are discussed.

Practice-based articles will be judged in part on the basis of the degree of potential impact the submission could have on public health practice in Canada. Therefore, we are also considering publishing with the article the reviewers' assessment of the innovation. Assessments would include:

Stage of development

- Promising
- Proven/well established

Potential impact on policy

- Significant
- Moderate
- Small

Potential impact on practice

- Significant
- Moderate
- Small

Potential impact on population health

- Significant
- Moderate
- Small

Potential impact on health equity

- Significant
- Moderate
- Small

## **CONCLUSION**

The *Canadian Journal of Public Health* is both a scholarly journal and a journal for the public health practitioners who make up the bulk of CPHA's membership. As such, it has to be relevant to both scholars and practitioners. Through these innovations, we hope to make the Journal more attractive, engaging, useful and relevant to practitioners both as readers and as authors. We believe that this innovation is timely and has the potential to better serve the health of our fellow Canadian citizens and to strengthen the Canadian Public Health community's global leadership.

## **REFERENCES**

1. Barr V. *Set of Instructions to Authors and Guidelines for Reviewers for the Innovations in Policy and Practice Section of the Canadian Journal of Public Health*. (Unpublished report to the Editorial Board of the *Canadian Journal of Public Health*, December 2014).
2. Green LW. Public health asks of systems science: To advance our evidence-based practice, can you help us get more practice-based evidence? *Am J Public Health* 2006;96(3):406–9. PMID: 16449580.
3. Stover GN, Bassett MT. Practice is the purpose of public health. *Am J Public Health* 2003;93(11):1799–801. PMID: 14600042.
4. Mays GP, Halverson PK, Scutchfield FD. Behind the curve? What we know and need to learn from public health systems research. *J Public Health Manag Pract* 2003;9(3):179–82. PMID: 2747313. doi: 10.1097/00124784-200305000-00001.

5. Scutchfield F, Patrick K. Public health systems research: The new kid on the block. *Am J Prev Med* 2007;32(2):173–74. PMID: 17234491.

**Table 1.** Categories of articles for section on *Innovations in Policy and Practice*

<b>Category</b>	<b>Description</b>	<b>Peer reviewed?</b>	<b>Word Count</b>
Case Study / Practice Report	Highlights the work of public health practitioners. These articles offer descriptions of innovative, successful programs conducted by public health agencies (local, First Nations, provincial and federal) and community-based organizations and groups. Could include an exploration of implementation experience, challenges and solutions, as well as assessment of impacts of current programs and innovative approaches to measuring outcomes of interventions (e.g., broader social outcomes, and measures such as social return on investment).	Yes	2000–3000 words
Policy Report	Highlights the development, implementation and impact of new policies (municipal, First Nations, provincial and federal).	Yes	2000–3000 words
One-page Alert/Early Report	An early report of an innovation, inviting comment, feedback and networking.	Yes	1000 words
Commentary	Essays and policy reports that offer a critical analysis of particular policies, programs or initiatives, or that give updates about a particular policy direction in public health.	Yes	2000 words
Debate	A forum for critical debate about timely public health topics. Typically, two authors with different perspectives offer their views. Their positions need not be adversarial.	Yes	1000 words
People in Public Health	Highlights the diverse faces of the Canadian public health workforce, paid and volunteer, working at all levels. This type of article will portray a public health practitioner or advocate who is a leader in the field. To support the text, photographs, sidebars and quotes are used liberally.	No	1000 words
Career Development	Provides practical information to help practitioners at all stages (from new graduates to those contemplating retirement) to advance their career.	No	500 words
Visually Speaking	Presents the innovative work of Canadian public health teams across the country through video, photography or a presentation. Link with CPHA website, Facebook and YouTube.	No	3–5 minutes



<http://www.springer.com/journal/41997>

Canadian Journal of Public Health

A Publication of The Canadian Public Health Association

Editor-in-Chief: Potvin, L.

ISSN: 0008-4263 (print version)

ISSN: 1920-7476 (electronic version)

Journal no. 41997