



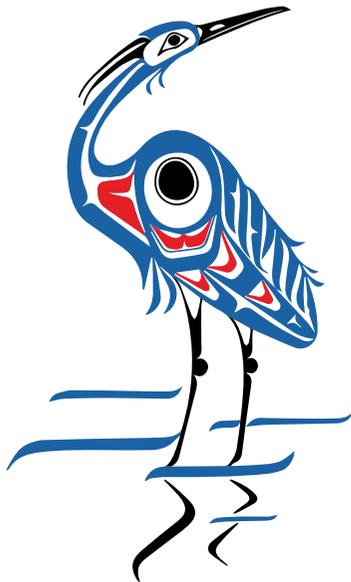
Submission guidelines

Proposals for organized sessions and individual abstracts

FOURTH GLOBAL SYMPOSIUM ON HEALTH SYSTEMS RESEARCH

VANCOUVER, 14–18 NOVEMBER 2016

"Among the First Nations people of British Columbia (B.C.), Canada, the Heron is considered to be a very good omen representing grace, purity, patience and long life. First Nations people took notice of the Heron's inquisitiveness, determination and excellent judgment skills and recognize the Heron as an expert fisher and hunter. Native people believe that sighting a Heron before a hunt was an indication that the hunt would be a victorious one. This particular drawing of the Heron is from B.C. artist Glen Rabena."



Contents

Symposium theme	1
Symposium core principles	2
Programme overview	3
Symposium languages	7
Submitting your abstract	7
Organized sessions	7
<i>Participatory sessions</i>	7
<i>Panel presentations</i>	7
Individual abstracts	8
Restriction on number of presentations per person	9
Timelines	10
Travel support	11
Registration	11



Symposium theme

Resilient and responsive health systems for a changing world

Like the societies of which they are a part, health systems face constant new challenges. They must maintain a focus on health improvement even as they absorb unexpected shocks, respond to emerging needs and take advantage of new opportunities.

At HSR2016 in Vancouver, we will push the boundaries of health system research in addressing the challenges of our changing world. We will interrogate evidence and share experiences of health system resilience and responsiveness as we explore innovative ideas for health system development and intersectoral action for health. By building on the past HSR symposia that were focused on universal health coverage and people-centred health systems, and through dialogue and debate drawing on the various relevant forms of knowledge, we aim to deepen understanding of the multiple 'real worlds' within which health systems are embedded. We will explore ways of protecting and extending health equity, rights and access in the face of complex challenges such as economic crises, climate change, mass migration, and the combination of unfinished (e.g. maternal health) and emerging (e.g. noncommunicable diseases and rapidly globalizing epidemics) health agendas.





Symposium core principles

Symposium organizers aim to develop a programme that:

- Is of the highest **technical quality**.
- Encourages **active debate** through **effective engagement**. Organized sessions will be selected not only on technical merit, but also on their innovative organisational arrangements, considering the planned roles for contributors and the potential for active engagement by session participants.
- Is **diverse and inclusive**. Symposium organizers encourage all of the sessions to be organized in ways that are attractive to a diverse range of participants:
 - Researchers, policy-makers, health system and programme managers, and civil society participants.
 - Regular conference attendees and those attending for the first time.
 - Residents of different geographic regions.
 - Those from different disciplinary backgrounds, including other sectors and fields relevant to the symposium theme.

We encourage session organizers to keep audience diversity and inclusiveness in mind as they plan who they might directly involve as contributors to their sessions, and who they aim to attract as session participants.

In addition, we will encourage **skills-building** activities to be implemented as part of the pre-Symposium satellite programme. Skills-building workshops can range from participatory teaching around a particular research methodology or software for analysis, to innovative means of communicating results, working with the media, or having decision-makers and researchers work collaboratively. In this Fourth Symposium, half-day, full day or longer skills-building workshops and sessions are invited as off-site satellite sessions; please check the Satellite Session information page on the website.



Programme overview

The draft programme structure is available on the Symposium web site (<http://healthsystemsresearch.org/hsr2016>). There are over one hundred 90-minute concurrent sessions planned within the programme. Approximately half of these concurrent sessions will be allocated to 'organized sessions' and the other half will be based on 'individual abstracts'.

Field-building dimensions and thematic areas

The Symposium seeks to build the field of health systems research, as well as to address an important thematic area. Abstracts in every sub-theme may address any of the Symposium's traditional **HSR field-building dimensions, that is:**

- Cutting-edge empirical and synthesis research;
- Innovative research approaches and measures;
- Novel strategies for developing capacity;
- Learning communities and knowledge translation; and
- Innovative practice in health systems development.

On each day of the Symposium, and in each concurrent session time slot, sessions will include a blend of the sub-theme areas and field-building dimensions.

Within the overarching Symposium theme, we welcome abstracts linked to the following six sub-themes.

1. Enhancing health system resilience: absorbing shocks and sustaining gains in every setting

This sub-theme incorporates research and experience from different settings, including fragile and post-conflict states, that explore the nature of, and strategies for building resilience to unexpected shocks and in the face of the



ongoing daily demands of every health system (such as funding, human resources and data for decision-making needs). Submissions under this sub-theme can address areas of ongoing concern (e.g. the spectrum from MNCH to NCDs and ageing) and/or emerging and as-yet unidentified future needs (e.g. climate change, urbanization, mass migration, unforeseen outbreaks), as well as efforts to improve health care access and intersectoral action on the social determinants of health related to unfinished and emerging needs, sustaining gains and absorbing (or averting) shocks. They may also present innovative research approaches around these issues or relevant experience of learning communities, for example.

2. Equity, rights, gender and ethics: maintaining responsiveness through values-based health systems

This sub-theme emphasizes the responsiveness of health systems and health systems research to the priorities and realities of populations facing vulnerability and marginalization in order to put into practice and sustain our value base of gender, social and health equity, social inclusion, and ethics in policy, practice and research. It aims to share and debate experience from a range of settings and contexts across all field-building dimensions. We particularly welcome submissions from minority, indigenous/First Nations and 'Global South' scholars, practitioners and activists as well as other stakeholders (such as adolescents) whose voices are seldom heard in research and health system dialogues and debates. Submissions related to reflective practice, ethics and learning in policy, planning and action at multiple levels for health systems responsiveness and resilience are also welcome under this sub-theme.

3. Engaging power and politics in promoting health and public value

This sub-theme focuses on analysing, engaging, and challenging power and politics, in health systems research (HSR), health systems development or learning strategies, in relation to the broad conference theme of responsive and resilient health systems for a changing world. The power relations and political economy of the global health and development arenas are among the most relevant issues under this theme. Examples include:

- The Sustainable Development Goals;

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- Global-national and South–South–North dynamics, with or without donors;
 - Power and politics of health systems; or
 - HSR-related aspects of macroeconomic, geopolitical, refugee and climate crises.

Micro- and meso-level engagement of power and politics in health systems and HSR is equally relevant to this theme, for example, in relation to the experience of and strategies to confront social exclusion. Again, we particularly encourage perspectives that demonstrate success in primary and community-based health interventions, particularly from the vantage point of people living in conditions of vulnerability, marginalization, and exploitation.

4. Implementing improvement and innovation in health services and systems

This sub-theme focuses on implementation, from strengthening health worker supervision and access to integrated frontline teams, to harnessing new ideas and resources for quality improvement including enhanced resilience and responsiveness. Submissions to this theme might address a range of questions, for example:

- What are we learning about research needs and methods for health system improvement?
- What is new, promising, or needs to be challenged regarding the ‘governance of quality’ in planning for large-scale improvements in population health?
- How does organizational culture affect system performance and how can it be changed to promote improvement in system performance?
- Are results from economic evaluation and economic modeling being harnessed for health system improvement?
- What have we learned – or what should we have learned – from: Ebola in West Africa; innovations for health systems strengthening to tackle HIV, TB and malaria; MNCH; indigenous/aboriginal perspectives on wellness and experience of health system challenges; the diverse needs of increasingly diverse populations?



5. New partnerships and collaborations for health system research and development

This sub-theme focuses on new partnerships and collaborations through which the symposium themes can be advanced. Examples of possible submissions under this theme might include (but are not limited to):

- Developing system-focused multi-actor partnerships to increase availability, access, affordability, and use of medicines and services.
- Communication, negotiation, and mediation skills and processes for effective partnerships.
- Assessing intended and unintended impacts of system-focused partnerships, from different actors' perspectives.
- Strengthening health systems through public health as well as infectious disease and NCD disease-based programmes.
- New mechanisms and approaches to enhancing research use by communities and health systems practitioners.

6. Future reciprocal learning and evaluation approaches for health system development

Complementing sub-themes 1 and 2, this sub-theme focuses on future learning and evaluation approaches – oriented specifically to health system development. Under this theme, we might:

- Ask what high-income countries can learn from the rest of the world, and how?
- Interrogate the capacities and skills needed to cultivate health policy and systems research (HPSR) for a changing world, given the acute mal-distribution of teaching capacity and resources.
- Explore strategies for strengthening learning at local levels, to build health system resilience and responsiveness.
- Take a critical and creative look at the current and future roles of technology and the internet in knowledge translation and health system development;
- Examine governance, financing, priority setting and sustainability approaches and strategies for changing HPSR priorities.

7. Other

If your topic does not appear to fit in one of the sub-themes but DOES clearly fit with the overall Symposium theme, include it in the 'Other' category and make the case for pertinence and excellence!



Symposium languages

Abstracts in English, French and Spanish will be accepted. Simultaneous translation into French and Spanish will be available for all plenary sessions; simultaneous translation into French and Spanish will be available for a limited number of concurrent sessions. Posters may be produced in English, French or Spanish.

Submitting your abstract

Organized sessions

Organizers may submit proposals for 90-minute sessions under two different 'session type' categories:

Participatory sessions

These could be round table discussions, debates, 'fishbowl' discussions, simulations, games, pyramid sessions, group modelling, or any other approach that actively encourages audience participation. We also encourage organizers to plan how to involve those not able to be physically present in Vancouver.

Panel presentations

This format is the traditional panel presentation, but organizers must allow adequate time for audience discussion and interaction.

[The organized session template](#) requires the following information:

- Title (maximum 25 words).
- Session type.
- Thematic area and field-building dimension.

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- The session organiser's contact details.
 - Contributors' details: the session chair/ moderator as well as a maximum of four/five named additional contributors, who will play active roles in the session; whether lead author is from low- and middle-income countries.
 - A short (50 word) overview of the organized session that will appear in the Symposium programme.
 - A 400-word (maximum) summary of the session content, including: purpose/objective, technical content, target audience and significance for the selected thematic area and/or field-building dimension; learning objectives.
 - A 400-word (maximum) summary of the planned session process, including: short description of any presentations or inputs, the moderation or management approach of the session, the role of contributors – both those named in the abstract and any others with planned roles, and a rough breakdown as to how the 90 minutes will be used.

In line with the core Symposium principles, the Scientific Committee will be asked to assess organized session on the basis of: (i) technical merit; (ii) relevance to the Symposium theme; (iii) significance for the sub-theme area and/or field-building dimension; (iv) engagement of policy-makers, managers and civil society groups (i.e. chair and those with planned roles); and (v) potential for active involvement by the audience.

Individual abstracts

Individual abstracts may be submitted as a paper, poster or e-poster (does not require attendance, but does involve a small fee). If an abstract is submitted as a paper, it may be accepted as a poster.

Those [submitting individual abstracts](#) will be required to submit the following information:

- Title (maximum 25 words English).
- Speaker contact details.
- Sub-theme and field-building dimension.
- List of co-authors, if applicable.
- An abstract of 400 words or less.



Abstract format: If your abstract describes primary or secondary cutting-edge research, you are encouraged to submit a structured abstract covering: *background, methods, results and discussion / conclusions*. Those submitting abstracts on conceptual research, or work under other field-building dimensions, are encouraged to include information on: *Purpose, focus/content, significance for the sub-theme area/field-building dimension of relevance and target audience*.

In line with the core principles outlined above, the Scientific Committee will be asked to assess individual abstracts on the basis of: (i) technical merit; (ii) relevance to the Symposium theme; (iii) significance to the sub-theme area and field-building dimension.

Individual abstracts may be accepted either for oral or poster presentation.

Within the programme, individual abstracts accepted for oral presentation will be grouped into sessions according to sub-themes and, if applicable, by field-building dimensions. Additional research topics may also be identified from the selected abstracts. Sessions based on individual abstracts will be actively facilitated and may be managed in various ways (that is, they will not necessarily entail a set of short presentations).

Restriction on number of presentations per person

In order to foster diversity, each person will be permitted to present a **maximum** of:

- Once in an organized session (either as chair/moderator or named contributor);
- Once in individual abstract-based sessions;
- And once as a poster presenter, based on an accepted individual abstract.

Multiple submissions that include the same named contributor will be reviewed by the Scientific Committee, but the Programme Working Group will be responsible for finalizing abstract selection so as to maximize diversity and ensure balance across the programme.



Timelines

The call for both organized sessions and individual abstracts will open on October 19th, 2015.

The deadline for **organized session** proposals is 24th January 2016 (midnight, Central European Time). Organizers will be notified whether their session has been accepted or rejected by 22nd February 2016. If not accepted, this allows organizers and/or the planned contributors to submit similar content as individual abstracts.

The deadline for **individual abstracts** is 20th March 2016 (midnight, Central European Time). Those who have submitted individual abstracts will be notified whether their abstract has been accepted (either for oral presentation or poster presentation) on 11th April 2016.



	START DATE	DEADLINE
Call for organized sessions	19 October 2015	24 January 2016
Organized session submitters notified	22 February 2016	
Call for individual abstracts	19 October 2015	20 March 2016
Individual abstract submitters notified	11 April 2016	



Travel support

Organizers of the Fourth Global Symposium hope to be able to provide travel support to some participants, in particular residents of low- or middle-income countries and full-time students (from countries of all income levels). Applications for travel support will be accepted only after the results of the organized session and individual abstract review process is complete (approximately April 2016). Applications will only be accepted from those who have had an individual abstract accepted (for poster and/or oral presentation) or who are named contributors within an accepted organized session that does not have external funding. The number of scholarships offered per organized session will be dependent on funding availability.

Registration

Registration for the Symposium will open in February 2016.

If your organized session or individual abstract is accepted for presentation, you will be required to register and pay as a delegate in order to be able to participate in the Symposium.





www.healthsystemsresearch.org/hsr2016