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13<sup>TH</sup> NATIONAL RURAL  
HEALTH CONFERENCE  
24-27 May 2015, Darwin Convention Centre, NT

## Guidelines for submission of peer-reviewed papers

### The peer-review process

Where authors have asked for their papers to be peer-reviewed, two independent experts from the content area will review their draft paper.

The review process is 'blind': details of the author(s) and their affiliation will not be revealed to the reviewers. The peer-review process is designed to ensure that the papers published in the Proceedings are eligible for inclusion in the Department of Education's Higher Education Research Data Collection (HERDC). To assist their authors to obtain academic points for them, peer-reviewed papers will be clearly identified as such on the Conference Program and in the Proceedings.

Authors of peer-reviewed papers will be asked to consider the changes suggested by reviewers prior to final acceptance of their paper.

## Conference Proceedings

All peer-reviewed papers presented at the Conference will be published in the Conference Proceedings.

## Important dates

To accommodate the formal peer-reviewing process, authors are asked to provide the first draft of their full paper by **27 March 2015**. Following the blind review process, authors will be asked to consider reviewers' suggestions and provide their final paper by **28 April 2015**. If final papers are not received by this date the author's place on the program cannot be guaranteed.

When authors are producing their final paper, they may wish to revise their abstract, bearing in mind that only the abstract will appear in the Conference Handbook. Revised abstracts should be emailed to the Alliance by **13 March 2015**.

To allow for blind reviewing, the author name(s) and the title of the paper should be clearly identified in the body of the email to which the paper is attached, but the author name(s) and affiliation(s) **should not** appear in the paper.

**Note:** the title as shown in the paper and the email should be the same as it appears on the program. The Word document filename should not include the author name(s) or affiliation(s).

## Paper content

The paper should be original (ie not published elsewhere). The paper should develop the topics and/or methods outlined in the abstract. Authors are encouraged to include at least one policy recommendation as part of their paper. For instance, this might draw out the implications of the work for practical changes to health services on the ground.

Peer-reviewed papers should:

- be **clearly expressed**, using correct grammar and spelling;
- show evidence of a **literature** search, including up-to-date materials, and should reference the material, preferably using the Vancouver system of Referencing (see Attachment);
- be **analytical** rather than only descriptive (eg of a program undertaken, or a service developed);
- refer to the **theoretical context** or **contextual framework** in which the study was undertaken, and report on the work in the context of that framework;
- show that the **evidence** related to the issue discussed has been considered;
- present a **coherent discussion** of a topic that does not fracture into a number of issues thus clouding the intent of the paper; and
- demonstrate an emphasis on, and/or a relevance to, current health issues in **rural and remote** Australia.

## Length

Papers should be no longer than 3,000 words.

## Paper format

- Please **do not** include author details. **This is extremely important** as the papers will be subject to 'blind' review.
- Preferably, the paper should be supplied in a Word document, using a standard 12 point font with single line spacing.
- Lists should be set as bullets, unless there is a particular reason for them to be numbered.
- Full stops are not generally used for abbreviations (eg ie Mr Dr etc).
- Use **bold** (not underlining) if you need to emphasise words.

## Paper submission

Papers for review and for final submission can be emailed to [speakers@ruralhealth.org.au](mailto:speakers@ruralhealth.org.au)



## The Vancouver system of referencing

The Vancouver system of referencing is used in some scientific (particularly) medical literature. References are shown with in-text numbering using superscript Arabic numerals, as shown here<sup>1</sup> which relate to references listed at the end of the document.

In the text, each reference is numbered in the order of appearance. This numeral becomes the unique identifier of the source to which it refers; if the source is referred to again, the identifying numeral is repeated.

More than one identifier can be used at a single reference point to indicate multiple sources: commas (also set as superscript characters) are used to separate the identifiers and there is no space between the comma and the number following it, as shown here.<sup>1,5</sup>

The identifiers should be placed before all punctuation marks except full stops and, whenever possible, immediately after a direct quotation.

In the reference list, the references are numbered according to their identifier in the text and are listed in numeric order. The names of all authors should be included when there are six or less; when there are seven or more, list the first three followed by et al.

Depending on its type, references should be listed in the following form.

### **Journal article**

<sup>1</sup> Alderman CP, Cosh DG, Peters PG Thompson CJ. Development of a pilot course in applied pharmacology for nurses working in rural settings. *Australian Journal of Rural Health* 1994; 2: 3–6.

### **Book**

<sup>2</sup> Jones KP. *Rural Health and Welfare in Australia*, 3rd edn. Brisbane: Mosby Williams, 1994.

### **Chapter in a book**

<sup>3</sup> Ried F. Mobility and safer handling. In: McMahon CA, Harding J, eds. *Knowledge to Care: A Handbook for Care Assistants*. Oxford: Blackwell Science, 1994; 53–69.

### **CD-ROM**

<sup>4</sup> Anderson SC, Poulsen KB. *Anderson's electronic atlas of hematology [CD-ROM]*. Philadelphia: Lippincott Williams & Wilkins, 2002.

### **Journal article on the Internet**

<sup>5</sup> Smith DM. Barriers facing junior doctors in rural practice. *Rural and Remote Health* 2005; 5: 348. [Cited 22 Aug 2008]. Available from URL: <http://www.rrh.org.au/articles/showarticlenew.asp?ArticleID=348>