

ANALYSIS

Analysis articles discuss a topic relevant to health policy or practice to further understanding of that topic area and to offer solutions or suggestions for 'next-steps'. Topics vary. Many discuss health systems and policy issues.

Analysis articles *are not* long commentaries. As their name suggests, they must *analyse* something sufficiently well to extend knowledge; description of a status quo (or two) and some unsupported opinion that this should change is inadequate. Although analysis articles may have a Canadian focus, the international context of the topic must also be discussed. While these articles do not present primary data, they may analyse secondary data, or discuss particular cases using a framework or theory, for the purposes of extending understanding on a particular issue.

Analysis articles should be written in an evidence-based style, which means that authors must comment on, or discuss, the type, quality, recency and findings of primary research cited. Merely making a statement and supplying a reference is usually insufficient.

Each submission should identify a senior clinician or expert as guarantor so that readers can identify who takes overall responsibility for the content. We request therefore that submissions include the following statement: "[guarantor name] is the guarantor of the clinical content of this submission."

Structure:

While it is not easy to supply a simple template for this article type, the following suggested structure gives an idea of what's required. We find that it helps us to avoid having several rounds of revision if authors try to follow the structure.

Analysis articles should be about 2000 words with 25 references.

Please organize your article using a scaffold of subheadings framed as questions.

INTRO (250 WORDS MAX)

This should be readable and engaging; the aim is to capture/hook the reader's attention in fewer than 6 sentences. State what you are writing about and explain very broadly why this is a topical issue that needs to be addressed now. Briefly summarize how you see the issue being resolved (i.e. allude to your conclusion in one sentence). Avoid stats, data or citations in the introduction. Avoid acronyms.

MAIN SECTION 1 (ABOUT 300 WORDS)

Provide a history of the current issue or 'problem' – what has led us to this point? - and a bit of detail on the shortcomings and problems of the status quo. Expand a bit more on the nature of the problem (to segue into next section).

MAIN SECTION 2 (ABOUT 450 WORDS)

Outline the scope and nature of the problem; infer its potential scope if evidence is insufficient for us to know for sure. You may analyse the problem using a specific theoretical framework to enhance current understanding.

Consider supplying roughly three examples to illustrate the scope/nature and nuance of the problem, discussing data/evidence as appropriate.

MAIN SECTION 3 (ABOUT 400 WORDS)

Widen the discussion to look at international experience/examples – what's happening in other jurisdictions and with what effect? Appraise, in a balanced way, success/failures/costs/criticisms with reference to data/reports.

MAIN SECTION 4 (300-450 WORDS)

Given what's been presented in main sections 1 through 3, what are your proposed solutions/recommendations? These need to flow realistically from what has already been presented and should be concrete, highlighting 'next steps'. It is good to be self-critical or circumspect as to the challenges of implementation. It's good to present no more than three broad categories of solution or policy recommendation. No lists please.

SHORT CONCLUSION (250 WORDS MAX)

Please end with a very short kicker that leaves the reader with a clear take-home message. "More research is needed" is not a strong conclusion. Please avoid repeating or paraphrasing the introduction, and don't introduce any new concepts here.

Please also see <http://www.cmaj.ca/content/by/section/analysis> for a list of recent Analysis articles, to get an idea of how they are generally structured.