

Call for Papers for Special Issue

MODELS OF COMMUNITY HEALTH IN ACTION



Guest Editors

- Professor Virginia Lewis, La Trobe University
- Professor Fran Baum, University of Adelaide
- Dr Connie Musolino, University of Adelaide

This **special issue will explore the power and potential of community health care to strengthen health systems and improve population health and wellbeing.** It will highlight a variety of models, programs, policies and approaches to community health and examine their past, current and possible future contributions.

Submissions may highlight success stories and impacts as well as challenges faced and lessons learned in delivering this model. We are interested in the operation and contribution of community health models in **Australia and internationally**, including the **connections between policy, theory and practice.**

Submissions

Please send your abstract as an **expression of interest by May 2024** to Prof Virginia Lewis at v.lewis@latrobe.edu.au to confirm the suitability of your submission for the special issue. If you wish to submit an expression of interest but are unable to do so by April 2024, please contact us. Once suitable abstracts have been selected, we will invite **full submissions by mid-2024**, and these will be subsequently peer reviewed.

Articles will be published online as accepted to ensure **swift publication**. There will be further publicity for all included articles when the special issue is formally published in **mid-2025**.

Following acceptance of your expression of interest, please submit your complete manuscript online at <http://mc.manuscriptcentral.com/csiro-py> and select “Community Health” during the submission process. Your paper should conform to the Australian Journal of Primary Health’s [Author Instructions](#).

For questions please contact v.lewis@latrobe.edu.au

Overview

Community Health models

While there are many health services delivered in the community, the focus of this special issue is on **not-for-profit community health organisations that provide a comprehensive primary health care service through interprofessional teams.** While there is no agreed definition of a “community health centre”, these models are characterised by their aim to *integrate primary care services, health promotion programs, and population/community health programs, ... have a commitment to equity and social inclusion and put emphasis on access to health care (with special attention given to the most vulnerable) and place a strong emphasis on community engagement and civic participation in health and health care* (See

<https://www.ifchc.org/what-are-chcs/>). Reflecting this description, the well-established Community Health sector in Ontario, Canada formed an Alliance whose membership includes a wide range of community-governed, interprofessional, primary health care organisations delivering comprehensive PHC. They describe the model of care in this way:

Alliance members offer primary care services in combination with health promotion and community development activities to address medical and biological issues, and to improve the circumstances in which people live, work, play and age. Comprehensive primary health care not only improves the health of individuals, it creates healthier communities – inclusive, connected and caring places where everyone feels they belong and are empowered to take control of their health and wellbeing.

(<https://www.allianceon.org/model-health-and-wellbeing>)

The Australian context

A number of services that could be described today as community health centres (CHCs) were operating in Australia during the 20th Century. A major impetus for the growth of the model was provided when the Whitlam Labor government established the first Community Health Program in Australia in 1973, aiming to provide universal primary health care services across Australia based on the social model of health. A range of services and programs were funded under the program, including CHCs in metropolitan and rural areas. However, the establishment and implementation of these services varied greatly across the states and territories. In 1981, discrete funding for the program from the Commonwealth was discontinued. Despite this, the services and related programs provided by CHCs continued in most states with different models of operation and governance and with varying levels of government support.

Key areas

We welcome submissions of primary research as well as practice & innovation, commentary (Forum) and review papers. We particularly seek submissions that:

- Provide evidence of the contribution of community health models to the community and/or the health sector as a whole
- Propose potential solutions to the challenges facing community health services at a government policy level or a service program level
- Describe and provide data on the impact of community health service programs and advocacy aimed at addressing the social determinants of health of their populations
- Analyse contemporary health care policy reforms in relation to their impact on the provision of community health services and vice versa

About the Journal

The **Australian Journal of Primary Health** (AJPH) is published by CSIRO Publishing on behalf of the Australian Institute for Primary Care & Ageing at La Trobe University. The AJPH is a peer-reviewed journal that publishes research articles, literature reviews, reports of evidence-based practice and innovation, forum articles and letters. The AJPH aims to provide its readers with information on issues influencing community health services and primary health care, and on integrating theory and practice utilising perspectives from a range of disciplines. For further information please see <http://www.publish.csiro.au/py>