FACTSHEET on Implementation Research

Member organizations of the Network **Medicus Mundi Switzerland** (MMS) work together to enhance **Implementation Research** (IR) within their organizations and to promote an NGO driven research in Switzerland's international health cooperation.

Implementation Research within MMS

In 2015 a thematic working group of MMS member organizations established a platform on IR. The platform underlines the importance for Swiss NGOs working in the field of international health cooperation to strengthen evidence-based research in their projects and programs. The members argue that embedding IR in programs would create applied knowledge and evidence for the scaling up of successful NGO interventions.

Medicus Mundi Switzerland's new Strategy 2017-2019[1] clearly stresses the importance of IR for its network. The MMS IR platform mandated the Institute for Social and Preventive Medicine (ISPM) to conduct a study on IR within its network, as part of a mutual learning process.

Definition and characteristics of IR

IR attempts to solve a wide range of implementation problems; it finds its origins in several disciplines. The word *"implement"* comes from Latin *"implere"* and means to fulfil or to carry into effect. Thus, *"Implementation research is the scientific inquiry into questions concerning implementation—the act of carrying an intention into effect, which in health research can be policies, programs, or individual practices (collectively called interventions)."* [2]

IR has been defined in various ways by different institutions. Common interpretations focus on the systematic approach to understand and address barriers to effective implementation of health interventions, strategies and policies. IR is demand-driven and research questions are framed based on needs identified together with relevant stakeholders and implementers in the health system. It clearly goes beyond scientists to include policy-makers, the media and community members. To sum up key characteristics, IR is systematic, multidisciplinary, contextual and complex (table 1).

Examples of IR

IR has been used to increase the use of bednets in Africa to reduce malaria, to address the rise in multi-drug resistant tuberculosis in Eastern Europe and to prevent mother-to-child transmission of HIV in South Africa. It is a very powerful type of research that can **identify implementation barriers** and **improve health care delivery**. [3]

MMS's start to work on IR:
2015, establishment of IR platform

Strategic framework for IR:
MMS strategy 2017-2019

Learning about IR/Outputs:
Side event during ECTMIH, September 2015
MMS Bulletin #135, December 2015
IR platform Round Tables, meeting regularly

IR platform members:
Enfants du Monde
FAIRMED
Fondation Terre des hommes
Institute of Social and Preventive Medicine
Medicus Mundi International
SolidarMed
Swiss Red Cross
Swiss Tropical and Public Health Institute

Study on IR:
Implementation Research of Swiss NGOs, Working in the Field of International Health Cooperation. ISPM, Bern University 2017.

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[1] MMS strategy 2017-2019, *Gesundheit für alle weltweit mit einer für das Recht auf Gesundheit engagierten Schweiz, Wissen und Lernen*, see 2.1 and 2.4.
[2] Peters et al., 2013, *Implementation Research, what it is and how to do it, BMJ 2013; 347: f6753;* doi: 10.1136/bmj.f6753.
[3] TDR, *Implementation Research Toolkit, An aid to help you address critical health system barriers,* 2014

Table 1: Key characteristics of IR, adapted from TDR, Implementation Research Toolkit, 2014

Characteristic	Summary/description
Systematic	The systematic study of how evidence-based public health interventions are integrated and provided in specific settings, and how resulting health outcomes vary across communities. Balances relevance to real life situations with rigor, strictly adhering to norms of scientific inquiry.
Multidisciplinary	Analysis of biological, social, economic, political, system and environmental factors that impact implementation of specific health interventions. Interdisciplinary collaborations between behavioral and social scientists, clinicians, epidemiologists, statisticians, engineers, business analysts, policy makers, and key stakeholders.
Contextual	Demand driven. Framing of research questions is based on needs identified by implementers in the health system. Research is relevant to local specifics and needs, and aims to improve health care delivery in a given context. Generates generalizable knowledge and insights that can be applied across various settings. Mindful of cultural and community-based influences.
Complex	Dynamic and adaptive. Multi-scale: occurs at multiple levels of health systems and communities. Analyses multi-component programs and policies. Non-linear, iterative, evolving process.

"Gap" between the involved stakeholders

The need to address implementation bottlenecks is often greatest in settings where health systems are the weakest or non-existent. Unfortunately, in these settings local institutions often have limited knowledge of IR and lack essential capacities to frame relevant research questions, and conduct, manage and interpret research results for program planning and policy implementation. Academic public health curricula tend not to focus on such research. As a result, most trainings do not adequately prepare researchers, practitioners, providers or decision-makers for essential partnerships and interdisciplinary approaches. IR addresses these bottlenecks by identifying **optimal approaches for a particular setting** and promotes the uptake of research findings.[4]

A toolkit for IR

The Special Programme for Research and Training in Tropical Diseases (TDR), hosted at the WHO, is a global program of scientific collaboration established in 1975 (UNICEF, UNDP, World Bank, WHO). In 2014, TDR published a useful comprehensive workbook on IR (*"Implementation Research Toolkit"*) that presents six modules following a stepwise cyclical process on how to conduct IR (figure 1).
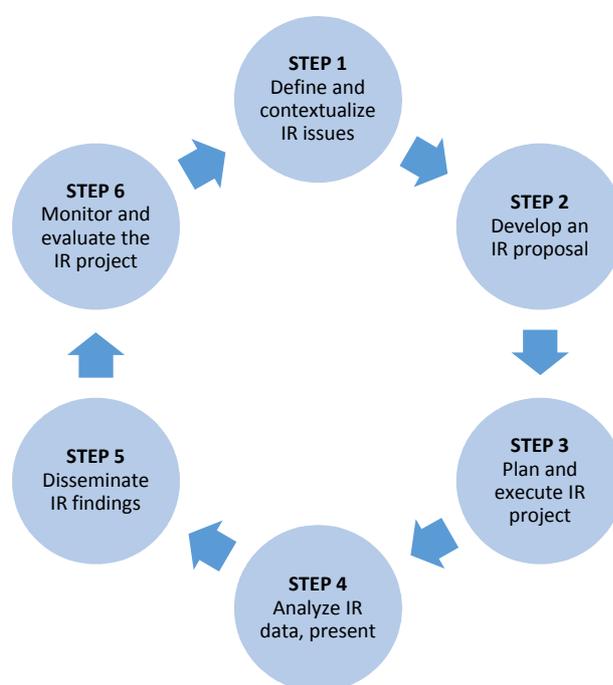

Figure 1: Six steps of the IR cycle, adapted from TDR, 2014

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[4] TDR, *Implementation Research Toolkit, Workbook,* 2014, www.who.int/tdr/publications/topics/ir-toolkit