

Report

Improving Implementation for Enhanced Outcomes:

State of Implementation Science in IBP Member Organizations

Findings from the 2015 state of implementation science survey of IBP members

Prepared by the IBP Initiative's KM Task Team
www.ibpinitiative.org



ACKNOWLEDGEMENTS

The State of Implementation Science in IBP Member Organizations survey report was developed to further IBP members' understanding of what sister organizations and projects are doing with regard to implementation science. The questions in the survey were developed by staff at Pathfinder International, as part of its role as IBP Chair (June 2013-June 2015), with input and recommendations by the IBP KM Task Team. The survey, collection of responses, and report analysis was coordinated by the IBP KM Task Team Chair.

A huge thank you to all of the organizations and projects that responded to the survey, provided inputs into the questions, reviewed drafts of the report, and took the time to share their implementation science experiences with the rest of the IBP. The report would not be possible without the respondents who graciously took their time to answer questions about their organization's implementation science and learning activities.

For further information about particular concepts or examples given in the report, to be connected with the organizations or projects responsible for various examples, or to see the raw survey data, please contact the IBP Secretariat who will work with appropriate parties.

Any questions about the report should be directed to Sarah Burns, Knowledge Management Advisor at Pathfinder International (sburns@pathfinder.org) who compiled the report.

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OVERVIEW

PURPOSE

This report summarizes the most common implementation science (IS) practices based on a survey of all IBP consortium members. Its purpose is to share what IBP members are currently doing related to IS, shed light on current definitions and conceptualizations of IS, and to provide members with ideas for improving their current IS and learning activities.

HISTORY

Under the chairmanship of Pathfinder International, the December 2014 semiannual IBP meeting convened IBP members to review key concepts of IS with lead researchers in the field, and discuss their implications for global health and family planning and reproductive health (FP/RH) implementation. Beginning at a reception joining members of the NIH Science of Dissemination and Implementation conference and following into a two-day participatory meeting, IBP members explored how IS can be applied in our landscape, and considered how IS can support us to challenge and evolve the state of the art in FP/RH implementation. As a follow-up to this meeting, IBP members expressed interest in capturing ongoing efforts to advance IS within the consortium, including efforts discussed in the meeting that are related to IS even if not previously considered as such. With approval from the steering committee, the KM Task Team carried out a survey and subsequent report to capture the range of ongoing IS efforts within the IBP community. This report is intended as a resource from the IBP consortium to its members, to continue the discussions begun in December in considering how we might continue to draw from consortium member experiences in IS to advance the reach, quality, and impact of our implementation of evidence-based FP/RH interventions.

METHODOLOGY

The survey was conducted by the IBP KM Task Team, and primarily coordinated through the current Chair. The questions were drafted by Pathfinder International (IBP Chair June 2013-June 2015) and the KM Task Team Chair, and then sent to the KM Task Team for review. On March 3, 2015, the survey was sent to all IBP members (via the IBP listserv) through a Survey Monkey, and a reminder was sent on March 18, 2015. Survey responses were collected until April 23, 2015. The survey contained 28 questions (primarily closed-answer) with an open text field for additional comments. Respondents were also given the option of contacting the KM Task Team Chair to verbally reply to questions. In total, **27 organizations participated** in the survey through a variety of means.

The KM Task Team Chair analyzed and drafted the report in May 2015. Analysis prioritized categorization of common themes emerging across responses; notation of conceptual areas with high variation between respondents; search for key IBP-related priority topics including scale-up, High-Impact Practices (HIPs), evidence-based interventions, and best practices (BP); and identification of concrete activities that others could adopt. The report was reviewed by all respondents for clarifications and comments, concluding with final edits by the KM Task Team and IBP Secretariat.

It is important to note that this is not a rigorous or methodological survey of IBP members. The responses have been analyzed and compiled into a reader-friendly report that identifies main topics and themes. Not all respondents answered all of the questions and not all responses are highlighted in the report. Respondents' approach to question responses varied, and those who responded through verbal interviews provided more detailed responses than those who responded solely via Survey Monkey. Given the different number of responses to each question, it is not possible to provide accurate percentages for each yes/no response, and the responses are not generalizable to all of the respondent organizations. The results are meant to provide a snapshot of IS and related learning activities within the consortium.

STUDY PARTICIPANTS

In total, **27 organizations and projects participated** in the survey through a variety of means. Seventeen filled out the Survey Monkey, three filled out PDF versions of the survey, two indicated in the Survey Monkey willingness to be contacted, three independently contacted the IBP to answer the survey, and two were specifically contacted by the IBP to request their participation based on recommendations from other respondents and the IBP steering committee. In addition, thirteen respondents entered their contact information into Survey Monkey but did not answer any questions. Five respondents requested to be contacted, but did not respond to requests for interviews.

Project/Organization	Name	Country	Response Type
Abt Associates	Francis Ogojo Okello	USA	PDF
CAI Global	Dawn Middleton	USA	Online
EDC	Jon Silverstone, Elena Vinogradova	USA	Interview conducted based on respondent request
Evidence Project	Laura Reichenbach	USA	Interview conducted based on IBP request
Evidence to Action (E2A) Project	Fariyal Fikree	USA	Interview conducted based on IBP request
FHI 360	Theresa Hoke	USA	Interview conducted based on respondent request
GRM Futures Group	Farley Cleghorn	Global	Online
International Medical Corps	Luis Ortiz-Echevarria	USA	Online
Ipas	Erin Pearson	USA	PDF
Management Sciences for Health	James Rice	USA	Online
MCSP	Jennifer Hoeg, Laura Raney, Jim Ricca, Anuja Shah	USA	Interview conducted based on respondent request
Mothers Give Life	Susan Field	Australia	Online
Pathfinder International	Claire Cole	USA	Online
Plan International USA (formerly)	Laurette Cucuzza	USA	Online
Population Council	Martha Brady	USA	Online
Population Council - Guatemala	Alejandra Colom	Guatemala	Interview conducted based on respondent request
Population Media Center	Scott Connolly	USA	Online
Reprolatina (NGO)	Juan Diaz	Brazil	Online
Save the Children	Shannon Pryor	USA	PDF
Southern African AIDS Trust (SAT)	Margaret Zulu	South Africa	Online
Uganda Family Planning Consortium	Kenneth Nyehoora Mugumya	Uganda	Online
URC-CHS/USAID ASSIST Project	Kate Fatta	Global	Online
USAID - Asia Regional Bureau	Kristina Yarrow	USA	Interview conducted based on respondent request
USAID/GH/PRH/PEC	Amani Selim	USA	Online
WHO	Asa Cuzin	Switzerland	Online
WHO	Moazzam Ali	Switzerland	Online
WHO - Alliance of Health Systems Research	Dr. Nhan Tran	Switzerland	Interview conducted based on IBP request
World Vision	Adrienne Allison	USA	Online

SUMMARY OF KEY FINDINGS

IMPLEMENTATION IMPROVEMENT AS COMMON GOAL

A main finding of this survey is that, **regardless of the definition or examples of activities provided, there is consensus across all respondents that the end goal of all IS and IS-related activities is the same: improving implementation to generate enhanced outcomes.**

Reflecting the wide variation of implementation and research roles played by IBP consortium members, the methods by which organizations and projects pursue research and learning activities to improve implementation vary widely. Several respondents expressed IS as rigorous research that is led by researchers on interventions which are then translated and used by implementers to generate new programs, and others conceptualized IS as approaches to implementation processes whereby project-generated data is used for iterating and learning during the course of an interventions' implementation. The majority of responses mentioned elements of activities that ranged across the entire spectrum, rather than one definition or activity representative of 'the' true and perfect definition or example of IS.

DEFINITION OF IMPLEMENTATION SCIENCE

The majority of IBP members are conducting activities that they consider to be IS or related to it; however, a definition of IS has not been universally adopted, nor is there consensus within most organizations and projects on the definition of IS. In reviewing the aggregate of responses, the term IS was often used interchangeably with other related concepts such as operations research, implementation research, health systems research, program learning, learning and adapting, and knowledge transfer.

Within this variation, two main categories of IS emerged that encompass the IS efforts across respondents:

1. Researchers conducting research about a particular intervention and subsequently helping implementers translate the findings to inform their programs;
2. Implementers conducting research and learning activities throughout the course of implementation by modifying existing monitoring systems to generate data, and then using this data for iterative intervention design during project implementation and in future project design.

Regardless of the definition, respondents consistently considered IS to be assessment of *how* and *why* interventions work in their implementation context, to inform their successful adaptation and application in future settings and at-scale when possible, to improve health outcomes. Respondents were clear that IS was not about research on impact of an intervention or a project's effect.

EMPHASIS ON DATA & INFORMATION USE

All respondents emphasized that a key purpose of IS is the use of evidence for improving programs. A few provided concrete and systematized activities that enable and prioritize the use of this evidence within projects, ranging from iterative project design to, as one respondent stated "research on the utilization of research" in implementation. Again, depending on the approach the respondent took to IS, the respondent focused either on generating evidence for others to use, or discussed ways to use monitoring and evaluation systems to learn and engage in mid-course correction and iterative project design throughout the life of a project. Of interest, although the emphasis on *use* included using all available information (both externally and internally produced), the majority of examples of use provided by respondents were restricted to use of internally produced data to inform programs.

EMPHASIS ON SHARING EXTERNALLY

The majority of respondents identified multiple and detailed systems for ensuring that their learning is documented for external audiences in a variety of formats, including peer-reviewed journal articles, conferences, and publications. However, when asked how respondents integrate external information to inform their projects, very few mentioned systematic methods or activities. Mostly, respondents said that they sought external information from listservs and literature reviews, but not necessarily as a systematic part of their design.

The desire of the majority of the respondents to share their findings with others is juxtaposed with the respondents' acknowledgement that they themselves have limited time, people, and budget to use the findings of others in their own work. Many mentioned a quick Google search or personal networks as sources of information, but few mentioned a systematic literature search for solutions to problems they are seeing in their programs. Rather, the vast majority rely on personal experience and knowledge to propose solutions.

DONOR PRIORITIES & RESOURCE CONSTRAINTS

Resource constraints proved a common consideration by respondents. Examples in which IS resources were available were few, but centered on experiences with a small, select pool of donors who are willing to fund IS and related activities, and examples of projects for which the RFA was explicitly dedicated to IS from the beginning. Though IS was acknowledged as a concept with implications for any project to do with implementation of evidence-based interventions, the majority of respondents voiced concern over donor disinterest and/or disinclination to support IS as part of project design—a dynamic posing challenges to members' ability to actualize IS concepts in actual project implementation. These responses appear to demonstrate a common phenomenon in the IBP FP/RH community, in which IS and its related activities are valued by the organization, but are among the first to be cut from members' proposal budgets during competitive bidding.

Though this was the dominant perspective, some respondents were able to highlight small but growing desire on the part of a select pool of donors to fund these activities. Of note, a few respondents came from projects explicitly dedicated to IS, and were able to reflect on donor interest in fostering activities that lead to improved implementation in the FP/RH sector.

DEMONSTRATING THE VALUE OF IMPLEMENTATION SCIENCE

Offering another potential explanatory factor for donor hesitation to fund IS activities, one respondent noted that it is difficult to convince donors of the benefit generated by devoting funds to IS activities. A sentiment – that it is difficult to measure the impact of IS on implementation in a direct, measurable way, posing challenges to members' ability to advocate for its inclusion to decision-makers not already versed in IS concepts and their merits—was reiterated by most respondents when explaining how they measure the success of their own IS activities.

Several respondents expressed difficulty explaining how they demonstrate the success of their IS activities. Examples of measures of success from IS offered by respondents included: seeing policy change that reflects IS research findings; seeing critical thinking and learning being embodied by implementers; and seeing improved health outcomes from implementation. As might be expected, respondents' measures of success were in line with the IS definitions offered and activities in which they were involved. For example, respondents most closely aligning their definition of IS with the role of researchers noted use of their research by policy makers to change policy. By contrast, respondents aligning their definition of IS with the role of implementers gauged their success in terms of implementers' ability to adapt and optimize their project interventions for improved fit to context and, as a result, improved health outcomes.

DETAILED RESPONSES

The following pages are the compiled and analyzed responses to each question, in detail. All of the answers are compilations of the responses given during the interviews and through the online survey open ended questions.

QUESTION 1: GENERAL CONSENSUS ABOUT THE MEANING AND UTILITY OF IS?

Is there a general consensus in your organization about the meaning and utility of ‘implementation science’?

Responses	27
Yes	15
No	12
More Information	19

The majority of respondents indicated that their organizations have a shared understanding of the utility of IS; however, few have a precise definition for the term. There was consensus that IS goes beyond biomedical research-like randomized controlled trials (RCTs), with the respondents using a variety of terms to describe IS and their IS activities, such as: implementation research; operations research; knowledge generation; knowledge translation and use of evidence; improvement cycles; integration of research findings into programs; and iterative processes for scaling up.

Regardless of the respondent’s position on the definition of IS, the underlying purpose and utility of IS was consistent—to ensure that those involved in decision-making about implementation (implementers, Ministry of Health officials, policy makers, donors, etc.) have access to, and can use, the best possible evidence and information to design and improve their programs and implementation. Multiple respondents highlighted the term “use” in their definitions, whether this meant that programs are generating their own information to use, or that researchers are generating the information for others to use. The consistent theme from all respondents was that information should be useful to implementers for improving implementation, and thus for improving impact.

Across respondents, two distinct themes emerged when defining IS: 1) IS conceptualized as *researchers* studying implementation and then passing along the findings to implementers for use in implementing their programs, and 2) IS conceptualized as *implementers* studying their own implementation and then using analysis of these findings to improve their own programs, as well as to share with external audiences for use in future settings. To be clear, some respondents saw IS as the study of implementation by researchers and others viewed IS as the analysis and modification of implementation activities including research/study by implementers. Still others viewed IS as the use of information generated by researchers in implementation, and some respondents saw it as a combination of the aforementioned themes.

When discussing definitions and thinking through what IS can be, one issue repeatedly raised by respondents was where the line, or boundary, between implementation and IS falls. As one respondent asked, “when are we doing implementation? And when are we doing implementation research? We are implementers doing implementation, so what needs to be added to that so we are doing implementation science?” This reflection pertaining to how implementers can better tackle IS—or if they should be—was a common theme among respondents.

Many respondents also deliberated over the difference, perceived difference, and at times confusion between implementation research and IS. Implementation research was one of a few terms that was consistently used interchangeably with IS, with only a few respondents providing explicit distinctions between the two. In an illustrative case, a respondent articulated the distinction between the two in this way: 1) IS is part of implementation research, 2) implementation research is research about implementation, and 3) IS is when this research directly and immediately feeds back into implementation, with implementers as the actors engaging in implementation and the researchers engaging in research.

A common concern highlighted by respondents linked to defining IS relates to the level of rigor that anything labeled ‘science’ or ‘research’ requires. Some respondents shared the perception that research should be rigorous, and questioned how that should fit with the iterative needs of real world implementers to understand and adapt programming in real-time. There was concern that overemphasizing the science of IS might render programs and/or research protocols too rigid to be useful to implementers, precluding the flexibility required to truly iterate and adapt to context in order to meet project needs. As one respondent posited, in order to make programming truly iterative (meaning a program that can change direction and respond to needs based on evidence generated during implementation), IS should be considered to be “super amped up implementation” instead of research or science. The perception that IS may be considered implementation with systematic inquiry, learning, and intervention iteration processes by which programs are routinely reviewed and adjusted based on evidence was a common theme.

Two respondents specifically noted that their organizations have adopted definitions of IS from other bodies, one from the Annual NIH Conference on Implementation and Dissemination and the other from the Third Global Health Systems Research Symposium’s Statement on Advancing Implementation Research and Delivery Science, which reads: “Effective implementation science and research delivery science involves using scientific methods to address the challenges of implementation and scale-up. It builds on operations research, participatory action research, management science, quality improvement, implementation science, and impact evaluation.”

Two respondents noted the role of donors in shaping the meaning and utility of IS, sharing that an organization’s orientation to IS and its implications depends on what donors ask of them and choose to fund. One of these respondents noted that if there was more funding for studying implementation, they would, but given limited funding, they are less able than they would like to use IS, implementation research, and research findings in general.

Notably, one respondent highlighted that their organization doesn’t necessarily have a concrete definition of IS because it changes depending on what the donor perceives it to be. Another organization shared an anecdote about a project conducting learning activities that used existing monitoring and evaluation systems to inform iterative project design and resulted in course corrections that led to better project outcomes, but then stated that the only reason this was feasible was because the donor supported those activities and was flexible enough with the project design to allow changes to occur.

Given the focus of the IBP, of note is that, though it may have been implied in many responses, only three respondents explicitly mentioned the terms scale, scale-up, or scaling-up in their responses. When responses did reference scale, the definition of IS wasn’t impacted, but the reasons for doing IS, and the justification for the important utility shifted. These respondents noted that IS is done for the purpose of scaling-up good practice.

Highlights

The majority of respondents are familiar with the field of Implementation Science and sees its value to the impact of their work in FP/RH— particularly in terms of our ability to understand how and why interventions “work.” Respondents define IS in terms of its relationship to research and implementation improvement, and conceptualize this in two main parts: research by researchers for implementers’ use, and systematic evidence generation, analysis, and use by implementers. In either distinction, responses reflect that IBP members are interested and engaged in IS and are working to update their processes to integrate IS into actual project implementation, for greatest benefit to the FP/RH interventions our community is now implementing.

QUESTION 2: SPECIFIC ACTIVITIES UNDER IS?

Is your organization doing any specific activities under your organization's own meaning of implementation science? Please provide examples of specific endeavors/projects conducted under your organization's meaning of implementation science. What effort/actors are involved? How are your staff based in countries where you implement programs engaged in these implementation science efforts?

Responses	Yes	No	More Information
27	20	7	19

By far, the most pronounced finding from the responses to this question was that the majority of organizations are exploiting and expanding their approaches to monitoring and evaluation, to systematically collect more data and to collect more of the *kind* of data that is necessary to answer their questions about implementation. One respondent reflected an interesting perspective in that their work “is not implementation science, because it isn’t science; it’s just bringing monitoring data to another level.”

Similarly reflecting the division between respondents’ definitions of IS based on the roles of researchers and implementers, respondents’ discussion of their organization’s activities related to IS followed these two categories, with respondents focused on what their organizations are doing in terms of research by researchers, and others focused on IS’s implications for implementers’ approaches to implementation and understanding performance. Just as two respondents discussed RCTs that they are establishing and two others discussed the Internal Review Board processes they must go through to conduct IS, the majority of respondents focused on how their organizations are rethinking how to go about systematically capturing and analyzing data about implementation, with a few discussing the tools they are using to collect this data.

Regardless of whether respondents discussed IS as an endeavor conducted separately from actual project implementation or IS being conducted during and as part of routine project implementation, when respondents discussed the specific activities they were engaged in related to IS, more than half described these IS activities as “research,” such as a family planning research project using the Fostering Change methodology. The majority of these respondents discussed this research referencing the inclusion of research questions and use of existing monitoring and evaluation systems to capture data on those questions, as well as the more generally focused traditional monitoring and evaluation questions around impact and services delivered. Only one respondent indicated that their IS focus is on studying quality within their implementation, meaning the study of the level of quality of services delivered within their project. All other responses focused on learning what works and how.

When describing the actors involved in IS, almost all respondents identified a wide variety of actors, including the donor, HQ staff, local staff, and external organizations (both internationally and locally-based) with whom they are working. Only a few respondents specifically mentioned governments and Ministries of Health (MOH) when describing the entities they work with. There was a particular prominence assigned to monitoring and evaluation staff, given their role in enhancing existing monitoring and evaluation systems to capture further information about implementation. Importantly, the majority of respondents also stated that field level staff are significant players in these IS activities, leading the identification of the learning questions (where applicable), collecting the data (both qualitative and quantitative), analyzing the information through conducting and participating in meetings where information is shared, monitoring the quality of implementation, and translating findings into their local contexts.

Of the portion of respondents who discussed their IS activities as research being done by researchers, many provided examples in which researchers’ efforts were designed as part of an implementing project’s design (as opposed to stand-alone research). One respondent had an interesting perspective that the goal of IS and the activities they are pursuing encompasses “not just knowledge generation, but improving implementation.” By embedding their research into a

project's implementation, respondents expressed the view that IS becomes part of implementation and allows implementers to understand more about their projects and change them when warranted. In this vein, however, only a few of these respondents highlighted specific learning activities that are embedded in the researchers' or larger projects efforts, such that the research approach ensures that implementers become the actors responsible for doing the research, analysis, and application of learning to improve their actual implementation.

The primary focus of one respondent's IS activities was strengthening the ability of implementers to conduct research *within their own* projects by shifting the focus of research grants from academics to implementers themselves. The respondent noted that although academic researchers generate very detailed and important research on implementation activities, there is a major gap when the project's critical problems are being addressed by outside researchers. The goal of IS from this respondent's point of view is to embed research into the implementation process, ultimately "trying to address the gap between the people who are doing the doing and the people who are doing the research." In this respondent's opinion, research should be reframed as a tool to support implementation, rather than as a separate endeavor.

In contrast to the above concepts, another respondent suggested that they have adopted a wider focus to their research projects by ensuring that researchers thoroughly consider the channels used to disseminate their research findings to include implementers. This respondent elaborated that in order to truly make their research align with IS (using their definition of IS as "the use of the research in future implementation"), they encourage their staff to think beyond presenting at conferences and other traditional channels for disseminating findings when writing their research proposals. They encourage their staff to truly identify who the stakeholders of this research are and who will use the information. This was an interesting juxtaposition to other respondents who view implementers themselves as the ones conducting the IS activities.

Some concrete examples of activities that respondents provided as fitting under IS are:

- A baseline assessment whose findings were used to guide the design of a targeted media campaign.
- A RCT study on an in-home couples counseling intervention.
- Evidence collection using tools to measure organizational capacity and community mapping.
- Implementer-led and designed learning agendas, designed to inform decision-making through routine cycles of evidence generation, analysis, and use.
- Operations research on family planning interventions, testing what works under routine conditions, process evaluation, and collection of cost data.
- Researcher assisting a district health officer to apply systematic approaches for looking at the health system.
- Tracking fidelity of implementation.
- Work with implementers to identify research questions and generate research protocols.

Highlights

IBP members are actively engaged in incorporating IS into their work. As reflected in their definitions, respondents can be grouped into two primary categories: those pursuing IS as an endeavor led by researchers, and those working to imbed IS in implementation led by implementers to enable real-time iterative program design. Regardless of this distinction, respondents consider their IS efforts as imbedding research and systematic data generation and analysis into implementation to improve implementation. And that involving frontline implementers in this effort is critical for its success.

QUESTIONS 3, 4, 5: NEED FOR IS, MANAGEMENT SUPPORT, AND STAFF ASSIGNMENTS?

Question	Responses	Yes	No
Has a need for implementation science (or any of the above related topics) been identified in your organization?	25	25	0
Does senior management understand and support implementation science as a key to your organization’s ability to improve outcomes from project implementation?	24	22	2
Are people specifically assigned to implementation science activities?	24	14	10
More information provided	17		

Although all respondents affirmed that the need for IS has been identified in their organizations and projects, not all had senior management support, and about half had dedicated staff to pursue IS and related activities. The activities that were described mostly aligned with the answers to the previous questions – research into implementation, modifying implementation to include research, and maximizing existing monitoring and evaluation systems to collect more qualitative and quantitative data to learn more during implementation.

Though the responses reflect a large number of organizations with senior management support for IS and with dedicated staff, the most common qualitative responses in this series of questions was the acknowledgement from respondents that their projects and organizations could be doing more to support IS activities in terms of prioritization, management support, and/or dedicated resources.

Of the small pool of respondents that provided concrete examples of management support for IS, these examples can be clustered in two categories: 1) staff assignments and job duties to meet IS needs, and 2) planning for implementation to include and prioritize learning. The respondents who discussed changes to staffing mostly highlighted the use of existing monitoring and evaluation staff to include gathering information related to IS, as well as the role of project management in ensuring the information is used to adapt and iterate. One organization recently hired a “Senior Technical Lead for Innovation” to champion efforts for IS and related activities, indicating strong prioritization and support from senior management. Other respondents highlighted that knowledge management (KM) is supported as part of the learning cycle, whether through documentation and dissemination or through sharing experiences and applying lessons to new contexts.

The majority of respondents highlighted that the methods through which their organization or project may choose to actualize or advance their learning agenda were sometimes conceptualized as plan, do, study, act (PDSA) cycles, process documentation, or monitoring and evaluation methods. These processes were usually managed by the project manager who is responsible for all aspects of the project. One respondent stated that the importance of ensuring that “projects monitor and generate evidence to answer ‘how’ and ‘why’ an intervention yields the results it does, in addition to tracking the results of the interventions themselves” is recognized by their organization. These responses seem to fit with the concept of IS being done as part of implementation, instead of researchers conducting research that then feeds into implementation.

Finally, funding was consistently mentioned as a barrier to prioritizing and supporting IS activities. Many respondents noted that regardless of what senior management thinks about the importance of IS, when there is little funding for IS activities, they do not happen. Lack of funding can also have implications beyond capacity to engage in IS activities; as one respondent noted, challenges with funding sometimes preclude allocations for documenting and publishing their results, making it difficult to share what they are learning.

QUESTION 6: ACTIVITIES NOT CALLED IS, BUT FALLING UNDER THE IDEA OF IS?

Is your organization doing something that, although not called implementation science within your organization, falls under the idea of implementation science? Please describe the effort and actors involved. What steps has your organization taken to support these actors' efforts? (structure, processes, investments, budgeting and resource-allocation, human resources, other). How are your in-country staff (those based in countries where you implement programs) engaged in these activities?

Responses	Yes	No	More Information
24	21	3	17

Unsurprisingly, the respondents that answered the first series of questions about IS as researchers engaging in research took this opportunity to discuss the learning and monitoring and evaluation activities they were undertaking. Similarly, respondents that answered the first series of questions with a focus on implementer-led learning activities used this question as an opportunity to talk about more rigorous research they are undertaking. Most importantly, rigorous research and embedded ongoing learning by implementers were seen as integral pieces of IS; different organizations prioritized either research or learning according to their orientation.

Quite a few respondents highlighted learning and KM as other activities that are not specifically called IS, but that support the goal of improved implementation. Most respondents used the two terms 'learning' and 'KM' interchangeably, with learning having a focus on analyzing monitoring and evaluation data and KM being the process that allows that data to be shared and used. Many respondents mentioned communities of practice as a means of information sharing, technical assistance and capacity building on IS and implementation in general as other activities which support IS. More than half of respondents also stated they were working on documenting their experience, with KM being one of the avenues used to communicate and share their learnings externally.

When describing how in-country staff are involved in other activities which are not IS, but fall under the idea of IS, half the respondents shared that their field staff are participating in these activities, mostly as a means of having their capacity built and less as a means of taking ownership or responsibility for these activities. The rest of the respondents shared that there are people responsible for these activities in their field offices who spearhead the efforts in these areas.

Some examples of other activities that respondents identified as not being called IS, but related to the concept:

- Monitoring and evaluation work at scale.
- Costing, integration of costing data, collecting costing data.
- Technical assistance on evidence-based practices.
- Developed guide for project design and implementation.
- Internal capacity building on implementation science.
- Formal monitoring and evaluation and process evaluation measures.
- Introducing new contraceptive methods.
- Technical assistance on research utilization.
- Creation of a position focused on KM and learning.
- University-partnership to create a course on IS.
- Organized a symposium on IS and global health.
- Integration of IS activities in their global monitoring and evaluation workshops.

QUESTION 7: OTHER LEARNING INITIATIVES?

Is your organization working on other learning initiatives? Why types of activities? Please describe the effort and actors involved. What steps has your organization taken to support these actors' efforts? (structure, processes, investments, budgeting and resource-allocation, human resources, other). How are your in-country staff (those based in countries where you implement programs) engaged in these activities? What, if any, back-end set up has your organization created to enable this process?

Question	Responses
Program Learning/Organizational Learning	19
Process Monitoring and Research	18
Prioritizing Adaptation Activities	11
Evidence-generation regarding context	13
Identifying and Disseminating Evidence-based Practices and/or Innovations	20
None	1
Other	2
More Information	19

The majority of respondents reported conducting activities under the banner of program or organizational learning, process monitoring and research, and identifying and disseminating evidence-based practices and/or innovations. Slightly more than half of the respondents reported working on evidence-generation regarding context, and even fewer are working on prioritizing adaptation activities. When providing more information about these areas, aside from a few outliers, the majority of respondents provided more information on activities, such as learning cycles, KM as a means of sharing and systematizing that learning, monitoring and evaluation as a means of capturing data about implementation, using that data to learn, and communications to share that learning externally.

The majority of respondents described similar organizational support, resources, and back-end structures as well; the majority had some budgetary support to conduct these activities, through the assignment of staff and the concrete allocation of resources to these activities either within the organization or within the project. A few respondents listed that their organization has made it a strategic priority to become a learning organization, which impacted the budget and resulted in resources being dedicated to these activities, including hiring new staff and creating new positions, like the Chief Knowledge Officer.

In terms of the back-end systems and structures that are in place, most respondents mentioned intranets, monitoring and evaluation systems, project management systems (as one respondent stated, the use of a learning before, during, and after tool that their organization developed), and human resources and budgetary resources. Two respondents specifically mentioned their libraries as systems that support these learning activities, but although they support program or project specific learning, they also support organizational learning as well, so materials are also stored on Finance, Administration, Operations, etc. One respondent showcased a database that had been built to capture cases when evidence is used for iterative project design. This database catalogues a body of cases documenting specific examples of using evidence to adapt and iterate.

Only one respondent mentioned looking at the Consolidated Framework for Implementation Research¹ (CIFR) as one means of generating evidence regarding context. The respondent stated their project is “trying to study context, by documenting it, looking at the CIFR, and looking at other tools.” Although 13 respondents affirmed that they are engaging in activities

¹ For more information, see Consolidated Framework for Implementation Research Technical Assistance Website: <http://cfirguide.org/>

around understanding more thoroughly the context in which implementation is occurring, only one provided a concrete activity associated with how they are doing it.

When providing more information about other activities the respondents are engaged in, many stated that they have focused on, and improved, their KM activities. The majority of organizations that have focused on KM stated that this is a corporate investment, with one stating that the investment is “made on the belief that KM is a valuable contributor to IS.” One respondent provided a very clear definition and explanation for how their project sees KM: “KM is the internally focused action learning and the sharing of the knowledge generated through the learning activities, with communications packaging the knowledge for external audiences.” This definition of KM was one of few provided in any of the survey responses.

One respondent specifically answered that their organization does not systematically pursue IS or any of the learning activities listed in the question, however, learning and adaption still happens. The respondent provided an anecdote illustrating this; although learning is not systematically or scientifically conducted within their projects, adaptation and improvement still occurs due to the experience of the implementers. The implementers tacitly know some of what works and what doesn't work and they use their personal experience and expertise to design appropriate programs based on their experience and experience of their colleagues.

One respondent provided an example of building staff capacity in these learning initiatives. The respondent's organization awards a research methods certificate for their staff after they successfully complete a training course. The certificate is for field and project staff who complete a one-year training course, participating in monthly long-distance sessions, and finishing assignments. The goal of the training is to improve the research skills of project staff, which will then help them to collect and analyze the data for better programs, as well as help the project management staff to oversee and improve all areas of the project since data collection will be more robust. An unforeseen benefit of this certificate work is also the identification of project staff who have an interest in the topic and are then able to take on larger IS responsibilities out of both interest and skill.

Finally, one respondent mentioned internal cultural barriers to learning. This respondent stressed the need to invest in creating a culture that makes their staff feel comfortable asking for help with a problem they are having. The respondent highlighted that it is always a work in progress to foster a safe culture, but that in their case, this issue is addressed by taking the time and creating the space to show staff that problems will not be punished, as long as staff are actively trying to solve them.

Other example activities:

- Tracking execution of workplan.
- Learning before, during, and after reviews.
- Monitoring and documentation.
- Country-based trainings on Communications and Knowledge Management.
- Sharing experiences at conferences.
- Knowledge sharing events.
- Brownbags.
- Technical meetings.
- Communities of practice (both informal and formal).

QUESTION 8: PROCESSES TO CAPTURE IMPLEMENTATION?

Does your organization have processes to capture the implementation process of your projects and/or specific interventions?

Responses	Yes	No	More Information
16	15	1	16

Continuing in the same theme as other responses, the respondents' answers to these questions depended on their definition or conceptualization of IS. If they defined IS as research, then they stated their rigorous research methodologies used to collect evidence on implementation. If they defined IS as implementation with embedded learning for improvement, they stated their learning methodologies, such as process documentation and enhanced monitoring and evaluation plans. Regardless of their definition, however, most respondents referenced the use of monitoring and evaluation plans as the main tool for collecting information about implementation. One respondent also added that they capture costing data along with their monitoring and evaluation systems to truly capture the cost of the intervention as well.

Although the majority of respondents listed ways that they capture the implementation process (listed below), all acknowledged that their methods are not perfect and that it is challenging to capture all of the information needed to really understand the 'how' of an intervention. No standardized method of capturing information about implementation emerged, and all respondents have a slightly different focus. As one respondent pointed out, it "isn't a straightforward yes or no question, it really depends on the project and how the project approaches these activities." One respondent stated that "we try to do it, but there is so much more we could be doing; we'd love to learn what others are doing." Similarly, another mentioned that the process of capturing implementation is mostly ad-hoc, a sentiment reflected in many responses.

The main processes identified were monitoring and evaluation systems, process documentation, and documenting projects and interventions at large. Few went into detail about how these systems are set up to capture implementation, but the majority referenced particular data collection tools and routine monitoring as part of project implementation as the main ways organizations and projects currently capture implementation processes.

Some examples of how organizations capture the implementation process are:

- Research studies.
- Process documentation.
- Intervention tracking tool.
- Cost tracking.
- For service delivery projects, collection is driven by the project monitoring plan (PMP).
- Technical quality assurance.
- In-house documentation, analysis, and reporting.
- Publication assistance.
- Publication bonus for each peer-reviewed manuscript accepted for publication.
- Rigorous M&E structures.
- Baseline and endline qualitative and quantitative processes.
- Special studies to validate or explore certain aspects of implementation for course correction.
- Case studies on implementation research.

QUESTION 9: LEARNING FROM IS SYSTEMATICALLY TRANSFERRED?

Is the learning generated from your organization's implementation science (or related) activities systematically transferred to those who need it (i.e. through publications, communities of practice, lessons learned databases, share fairs)?

Responses	Yes	No	More Information
20	17	2	20

The vast majority of respondents stated that the learning is transferred, whether externally or internally; however, many also stated that although systems are in place to facilitate this transfer, it is not necessarily as systematic as they would like and the majority reported working on improving the systems.

Almost all respondents, whether specifically in response to this question or to others, referenced peer-reviewed journal articles as the crème de la crème for disseminating their learnings to external audiences. The second most referenced dissemination mechanism was conference publications and proceedings. Other modes of transferring learnings noted by respondents include: websites, listservs, communities of practice, grey literature publications, case studies, and other knowledge sharing activities like journal clubs, social media, and technical meetings. No respondent mentioned the IBP as a channel for disseminating learnings from their organizations or projects.

One respondent stated that this systematic transfer of knowledge to those who need it is considered to be KM within their organization, and KM and communications outside the organization. Knowledge products for external audiences were considered the means for sharing generalizable knowledge, separate from internal products and activities that focus on getting softer, less generalizable, and less explicit knowledge to those who need it internally. This showcases a related challenge that was raised by many respondents, namely that the most systematic or prioritized part of the knowledge transfer was on the external knowledge product and external knowledge sharing. There was less systematic use of knowledge within organizations or projects for ongoing improvement of implementation.

One example of knowledge transfer is the use of regular management meetings to enhance the learning of a project or organization. One respondent mentioned that they have embedded learning questions within regular management meetings, where management asks questions related to learning, which allows staff to see that learning is valued and important and leads to staff bringing up issues and sharing more information even between meetings if there was a problem they needed help solving. This was one of the few answers that addressed how to engage the cultural aspects of learning instead of the more mechanistic side, even though it was a systematic process being described.

One final concrete example of knowledge sharing was provided by another respondent who explained that their organization created a telephone "hot line" that project staff can call when they have questions. There is a dedicated staff member who answers the hot line, and can either answer the question or connect the caller to the appropriate person who can answer the question so that project staff get the information they need when they need it to improve their work. This was one innovative way of having geographically disparate staff be able to use the learning network of an entire organization to improve their own interventions.

QUESTION 10: LEARNING INCORPORATED BACK INTO IMPLEMENTATION?

Is the learning generated from implementation science incorporated back into implementation? Either through iterative project design (in other words, a project learns and then adapts an intervention based on that learning), or other means?

Responses	Yes	No	More Information
17	16	1	17

The majority of respondents reported struggling with incorporating their learning back into projects in a systematic way. Only a few respondents stated their organizations and projects use the learning to improve other intervention sites, learn from each other during implementation, or explicitly look for what was done before to feed into project design. Two reasons were consistently identified by respondents to explain this lack of systematic transfer of learning back into implementation: 1) it is rare for donors to provide the flexibility to make program adjustments mid-course, so even if there is tremendous evidence of the need to change, it is difficult to convince donors to approve of deviations from the set course and 2) although respondents regularly consider ways for feeding learning into programs, the actual concrete steps to do so are less systematic than they'd like and they are all struggling to improve this particular piece of their IS work.

QUESTION 11: EXTERNAL PUBLICATIONS INFORM INTERNAL PROGRAM LEARNING?

Do your publications written for external publication inform internal program learning?

Responses	Yes	No	More Information
14	9	5	11

The respondents that answered yes to this question mostly pointed out that the learning that informs internal program learning is less about the publication and more about all of the back-end systems that allow the information to be captured in the first place. The publications and peer-reviewed journal articles are less the means by which an organization informs its own learning and more specific products for external audiences to showcase and share their learning.

Several respondents that answered no explained that the publication itself didn't inform internal program learning because the learning that was going on was already done in the development of the publication, and the learning was captured in other ways and this was used for internal program learning.

Interestingly, all respondents answered the question in a similar manner, but had different views on what the question was asking. In general, respondents saw publications as products for external consumption of the internal learning which had informed program learning; however, the publication itself did not inform the learning. Rather, it was the learning systems that allowed for the development of the publication in the first place.

QUESTION 12: COMMUNICATE LESSONS FROM IS TO EXTERNAL AUDIENCES?

How does your organization communicate its lessons from implementation science to external audiences?

Responses
12

This question mostly produced results similar to the previous questions:

- Publications
- Working Groups
- Blogs
- Peer-reviewed journals
- Listservs
- Reports
- Conferences
- Social Media
- Websites
- Case Studies

QUESTION 13: EXTERNAL LEARNING AND BEST PRACTICES FOR USE?

Beyond learning gathered from your own organization's implementation, does your organization consistently and systematically look for external learning, findings, and best practices for use internally within your organization?

Responses	Yes	No	More Information
18	17	1	15

Although all but one respondent stated that their organization or project does consistently and systematically look for external learning, the majority of free text responses explained that they would like to be doing much more than they currently are. What was gleaned from the more detailed responses was although many browsed the literature and tried to stay abreast of the latest information, they ran into time and budgetary constraints that did not always allow them to ensure that information produced externally was fed back into their program design or into their internal learning systems as much as they would like it to.

Considering that all respondents stated that the goal of IS is to ensure that research and learning is fed back into projects, it is very interesting to see how few organizations and projects have been able to prioritize and systematize the inclusion of learning into their projects from external sources. Respondents were very much focused on generating their own learning and disseminating it.

One of the most curious findings was that although many respondents stated that their main avenue for sharing their information about IS is through peer-reviewed journal articles, very few respondents, in their in-depth responses, stated that they systematically explore the literature during project design and iteration. This does not reflect a lack of interest in the literature; rather, it indicates a lack of time to appropriately search and explore the literature given its vast content and the pressing time demands of designing a project with limited time and resources.

There was one outlier respondent that categorically stated that their activities are not designed without an explicit and extensive literature review and landscape analysis, but that is because of a donor mandate that gives them the budget, resources, and time to do so.

Most relevant to the IBP, only one respondent mentioned the HIPs, and only three explicitly mentioned the IBP as a resource they use to find information they need. Quite a few respondents mentioned that participation in communities of practice was one of the main ways they obtain new information, so it is possible that they consider the IBP to be one of many communities of practice they use.

Multiple respondents listed a variety of information sources that they use on a regular basis, including end of project reports, technical publications from other organizations, Table of Contents emails from journals, and information being sent out through listservs. Listservs were the most frequently mentioned source of external information, with many respondents saying that they are the main way of accessing the latest relevant information. A common theme was that users scan the information in their emails, delve into the topics that were most relevant, and share information with their colleagues that they deemed relevant. As one respondent stated "the serendipitous nature of sharing is one of the main ways people access the latest information."

To address the lack of time and the serendipitous nature of information finding, a few respondents highlighted their library and library staff. One respondent in particular mentioned that their library sends a monthly update email to all staff with the most recent relevant literature, and that they can use their librarians to conduct the time extensive searching for them when they need to get a list of materials that they should read.

QUESTION 14: MEASURE THE IMPACT OF IS OR RELATED EFFORTS?

Does your organization measure the impact or success of its implementation science (or related) efforts?

Responses	Yes	No	More Information
16	13	3	15

Responses to this question mirrored the divergence of definitions and conceptualizations of IS within the respondents' organizations and projects. For some, measurement was part of their project and their mandate was to show that the evidence that they generate is being used. For some, IS and related activities were so new, they didn't even know what they would be measuring yet. And for others still, the success of their efforts could be measured by the impact their work had on health outcomes or policy changes.

Similar to the other survey questions, there was no clear-cut yes or no answer to this question from respondents. The majority of respondents answered yes and provided some examples of how they currently operate but also stated that they want to improve their processes further. The majority of respondents mentioned that to study IS efforts, they are using their traditional monitoring and evaluation systems, project outcome reports, training activities, and research studies. Some respondents stated their IS efforts would be measured by their ability to scale-up interventions that were identified as being worthy of scale.

One respondent provided an interesting example of how their project measures learning by thinking of implementation on a scale from assessment of an intervention all the way to scale-up of the intervention. They are hoping to measure their IS and learning activities against a scale to see how far each intervention is able to go to scale. The details of this measurement are yet to be determined. Part of this measurement is also the evaluation of the IS and learning activities themselves, to justify the extra time and expense of the learning activities.

As a final example, one respondent noted that the measure of success of IS is whether stakeholders involved in their work—ranging from project managers to Ministry of Health officials—are interested in and actively engaged in learning about their work to improve it. The respondent specifically stated that one of the goals was for participants to see learning for the sake of learning as a valuable addition to their daily work lives and routines.

Although many respondents highlighted challenges in measuring the impact or success of IS, one respondent also highlighted that a key challenge of measuring IS relates to the difficulty inherent in teasing apart attribute of effect. Because changes in implementation and policy often occur as the result of a culmination of evidence, opposed to just one piece of evidence, it is very challenging to demonstrate how large-scale change was impacted, influenced, or induced by one IS research study.

CONCLUSIONS

The goal of this survey and report was to provide IBP member organizations with an overview of the state of IS in IBP member organizations. The survey responses echoed the sentiments heard in the December 2014 IBP meeting—that although all of the members have different definitions, ideas, and tactics, respondents shared the end goal to improve programming for their beneficiaries through the study of implementation and the translation and use of the study results (information) into future and current programming to achieve better health outcomes. All respondents noted that their organizations are working towards improving their own IS activities and share a desire to learn from others.

This report showcases the multitude of ways to think about IS and provides ideas and insights that could support IBP members to improve their own IS-oriented activities. All members are encouraged to reach out to survey participants to find out more about their specific activities, and to keep the conversation going through the IBP.

APPENDIX 1 – SURVEY QUESTIONS

1. Is there a general consensus in your organization about the meaning and utility of ‘implementation science’? YES or NO. If there is, what is the definition your organization uses?
2. Is your organization doing any specific activities under your organization’s own meaning of implementation science? YES or NO
 1. Please provide examples of specific endeavors/projects conducted under your organization’s meaning of implementation science.
 2. What effort/actors are involved?
 3. How are your staff based in countries where you implement programs engaged in these implementation science efforts?
3. Has a need for implementation science been identified in your organization? YES or NO
4. Does senior management understand and support implementation science as a key to your organization’s ability to improve outcomes from project implementation? YES or NO
5. Are people specifically assigned to implementation science activities? YES or NO
 1. Please provide some more information if you have answered YES to questions 3, 4, and 5.
6. Is your organization doing something that, although not called implementation science within your organization falls under the idea of implementation science? YES or NO
 1. Please describe the effort and actors involved.
 2. What steps has your organization taken to support these actors’ efforts? (structure, processes, investments, budgeting and resource-allocation, human resources, other)
 3. How are your in-country staff (those based in countries where you implement programs) engaged in these activities?
7. Is your organization working on other learning initiatives? What types of activities? (checkboxes)
 - Program Learning/Organizational Learning, Process Monitoring and Research, Prioritizing Adaptation Activities, Evidence-generation regarding context, Identifying and Disseminating Evidence-based Practices and/or Innovations, None, Other, please specify.
8. You answered that your organization is doing other learning activities. Please answer the following questions about what those other activities are:
 1. Please describe the effort and actors involved.
 2. What steps has your organization taken to support these actors’ efforts? (structure, processes, investments, budgeting and resource-allocation, human resources, other)
 3. How are your in-country staff (those based in countries where you implement programs) engaged in implementation science?
 4. What, if any, back-end set up has your organization created to enable this process?
9. Does your organization have processes to capture the implementation process of your projects and/or specific interventions? YES or NO. If yes, please describe.
10. Is the learning generated from your organization’s implementation science (or related) activities systematically transferred to those who need it (i.e. through publications, communities of practice, lessons learned databases, share fairs, etc.?) YES or NO. If yes, please describe.
11. Is the learning generated from implementation science incorporated back into implementation? Either through iterative project design (in other words, a project learns and then adapts an intervention based on that learning), or other means? YES or No. If yes, please describe.
12. Do your publications written for external publication inform internal program learning? YES or NO. If yes, please describe.
13. How does your organization communicate its lessons from implementation science to external audiences?
14. Beyond learning gathered from your own organization’s implementation, does your organization consistently and systematically look for external learning, findings, and best practices for use internally within your organization? YES or NO. If yes, please describe.
15. Does your organization measure the impact or success of its implementation science (or related) efforts? YES or NO. If yes, please describe.