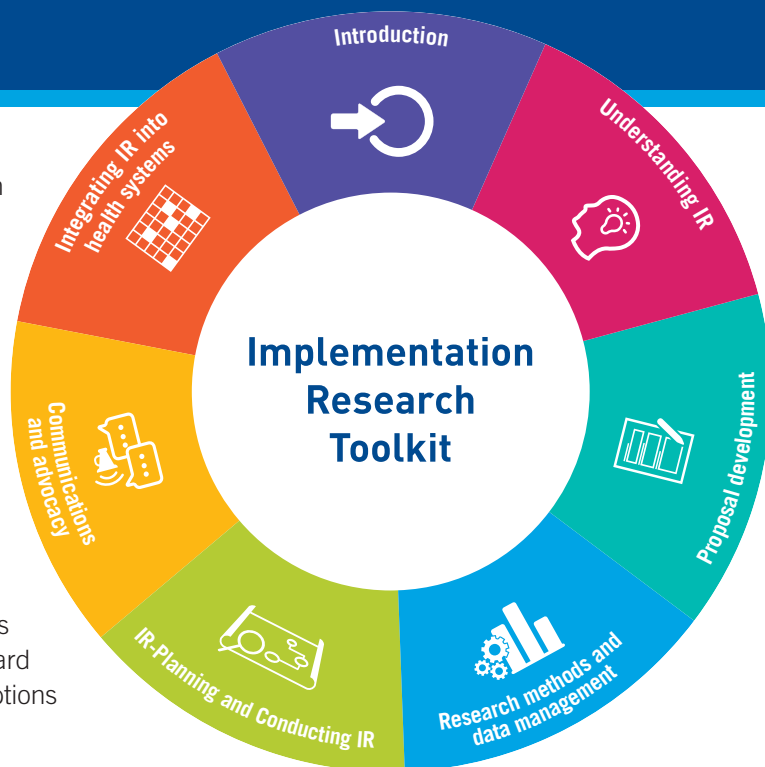


# Implementation Research Toolkit

Implementation research (IR) is conducted within health systems and community settings, removed from the controlled settings associated with other types of scientific research. It is an ongoing process that provides continuous feedback of results back to the health system, facilitating adaptation of services and interventions. So, by its nature, IR is adaptive. People may not come to work; the rains may impact access of people to services; delivery of key materials may be delayed. IR teams must be willing and able to adapt their projects to address such real-life likelihoods.

The newly revised *Implementation Research Toolkit* is designed to help people learn and adapt a standard process that leads to results. It is now available with options for downloading and printing individual modules.



This toolkit is helpful for:

- Health care service providers
- Programme staff
- Researchers
- Decision-makers
- Finance and administration officers
- Communications professionals and journalists involved in IR

Users of the Toolkit should have elementary awareness of IR-related principles and approaches. Those without this pre-existing knowledge are strongly encouraged to take the TDR Massive Open Online Course (MOOC) on Implementation Research. Information is available on the TDR website at: [www.who.int/tdr](http://www.who.int/tdr).

The IR Toolkit allows teams to:

- Apply a structured process to identify known bottlenecks and barriers (the 'problem') in the health system.
- Contextualize the problem.
- Identify and engage relevant stakeholders.
- Formulate appropriate research questions.
- Determine the applicable study design.
- Articulate a proposal to help leverage required resources.
- Implement and monitor the research in a robust and rigorous manner.
- Feed the solutions/adaptations back into the health system.
- Communicate and advocate effectively throughout the IR process.

## Influence of health system factors on effectiveness and impact



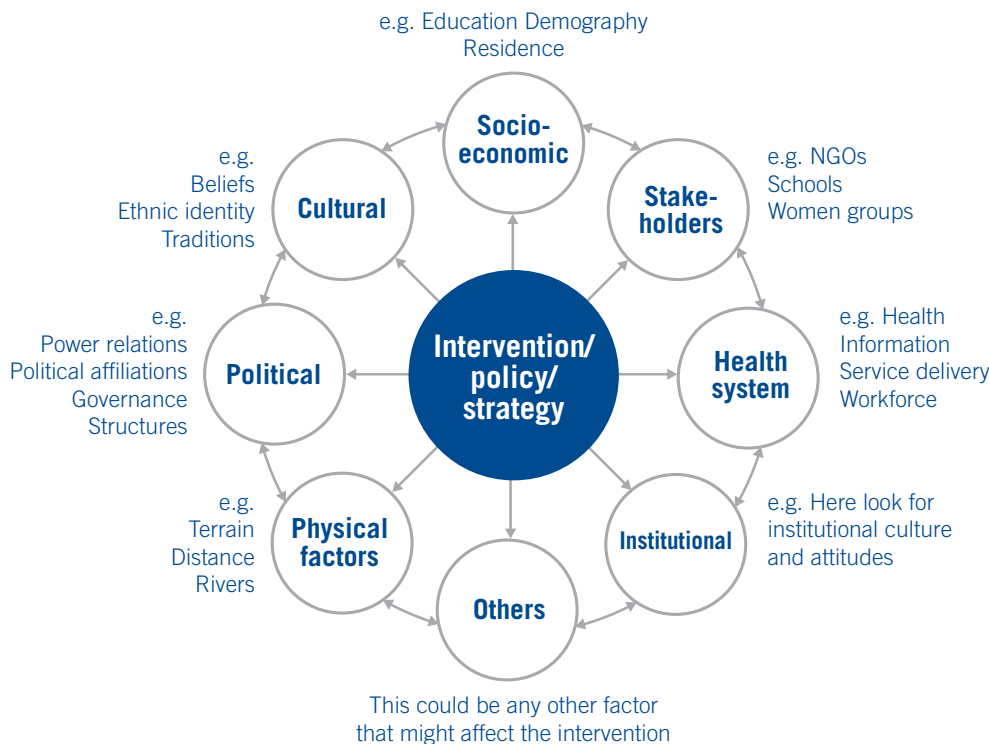
# What has changed since the Toolkit was first launched in 2014?

Since its launch in 2014, over 100 researchers, academics, disease control programme managers, policy-makers, health administrators, communication scientists and journalists have used the Toolkit and provided feedback. The latest revision responds directly to their comments, as well as to new learning about the critical role of IR in the effective introduction of new policies, strategies and health technologies within health systems:

- Individual modules now have a sharper focus, and there are new modules on *Understanding IR*, *Integrating IR into the health system*, and *IR-related communications and advocacy*.
- The IR toolkit is now in a self-learning format, unlike the previous version that had to be used through workshop settings. Now research teams can use it individually or together, and in their own time and pace.
- Modules are self-contained, so they can be used as stand-alone tools, according to the relative understanding and skills of users in each thematic area.

*Collaboration between key stakeholders to generate research questions that address a given problem is central to IR.*

## Contextual factors in implementation research



*IR uses contextual knowledge to study processes to improve practice. It applies research findings and methods to real-world contexts and settings.*

Try out the IR Toolkit online, and provide feedback and comments at <http://adphealth.org/irtoolkit/>.