



Implementation Science Subgroup

Terms of References

July 2018

www.childhealthtaskforce.org

Roles and Responsibilities

1. Define specific objectives, tasks and deliverables for the subgroup in relation to the broader task force terms of reference
2. Provide technical leadership and facilitate development of standards, activities and products that will advance implementation science and research for child health programs
3. Serve as a platform for dissemination of research and program evaluation results (ideally bidirectional from global to country level and vice versa)
4. Develop and disseminate research and evaluation tools to increase program performance and quality through analysis, reporting and use of data
5. Identify research knowledge gaps and propose research questions to provide evidence for child health programming
6. Assist other subgroups with defining research priorities and provide guidance to harmonize their research implementation strategies

Goal

To promote implementation science, advance innovations, and engender the use of research results to inform program design and implementation.

Objectives

1. Build consensus on a working definition of “implementation science” under the TF
2. Generate and disseminate the evidence on “how to” implement integrated packages for child health and development that are context specific
3. Strengthen the capacity of target country child health program managers and stakeholders to conduct, as part of program implementation, implementation research, document iterative learning, and use findings for program adaptations when warranted.
4. Facilitate evidence generation by other child health subgroups (e.g. private sector, nutrition, etc.)
5. Coordinate tracking of implementation science results and dissemination with organizations with similar goals (e.g. CORE group, QED, etc.)

Expected Results (2018-2020)

1. Production of an annual subgroup work plan produced and updated which defines specific objectives, tasks and deliverables for the subgroup.
2. Utilize regular teleconferences to review implementation science progress for child health, disseminate child health research findings and define new research priorities.
3. Development of a technical brief defining implementation science approaches for child health programs.
4. Number of countries conducting implementation research as part of child health programs.
5. Technical brief listing research priorities, current gaps in knowledge, and recommendations for strengthening the integration of research in program implementation.

Membership

Current organization membership includes:	
1. Abt Associates	21. MSH
2. Action Against Hunger	22. Muso Health
3. Aga Khan Health Services Tanzania	23. PATH
4. Bill & Melinda Gates Foundation	24. Plan International
5. Boston University	25. Project Concern International
6. Canadian Red Cross	26. PSI
7. CHAI	27. Public Health Surveillance Group
8. Community Health Impact Coalition	28. R4D
9. ICF	29. RTI
10. Imperial College London	30. Save the Children
11. IntraHealth International	31. Swiss Tropical and Public Health Institute
12. IRC	32. Trinity College Dublin
13. Johns Hopkins School of Public Health	33. UNICEF
14. JSI	34. Unitaid
15. Karolinska Institutet	35. University Research Co.
16. Living Goods	36. University of Vermont
17. London School of Hygiene and Tropical Medicine	37. USAID
18. Malaria Consortium	38. WHO
19. MCSP/JSI	39. WVI
20. Medicines for Humanity	

Leadership

Co-chairs:

- David Hamer (Boston University)
- Karin Källander (UNICEF)

Meeting Schedule

Online calls every two months