



The Potential for Stakeholder Engagement to Improve the Development and Tailoring of Implementation Strategies

Amber Haley (@amberdhaley)

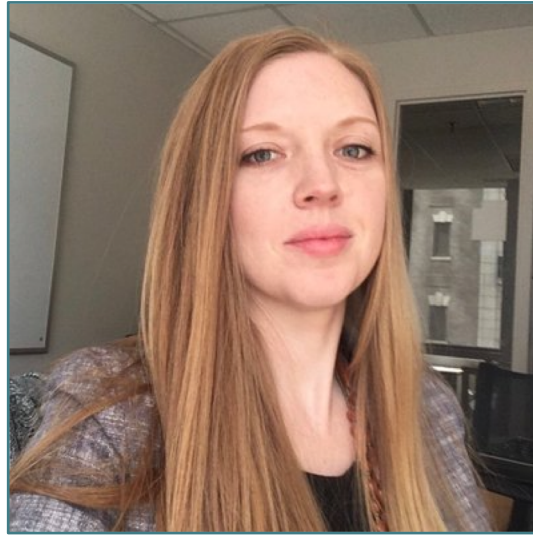
Byron J. Powell (@byron_powell)

June 12, 2019

UNC Summer Institute on Implementation Science | Chapel Hill, North Carolina



Where is Amber Haley!?



Amber D. Haley, MPH, PhD Candidate



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- NIMH R25MH104660 (Gallo, PI)
- NIDA R01DA044051 (Garner, PI)
- NIDDK R18DK114701 (Gold, PI)
- AHRQ R13HS025632 (Lewis, PI)
- NIDA R01DA047876 (Go, PI)
- NHLBI R01HL137929 (Ward, PI)

North Carolina Child Treatment Program

William T. Grant Foundation



Overview

1. Introduction
2. COAST-IS Project
3. Additional Opportunities for Stakeholder Engagement
4. Discussion



The Potential for Stakeholder Engagement to Improve the Development and Tailoring of Implementation Strategies

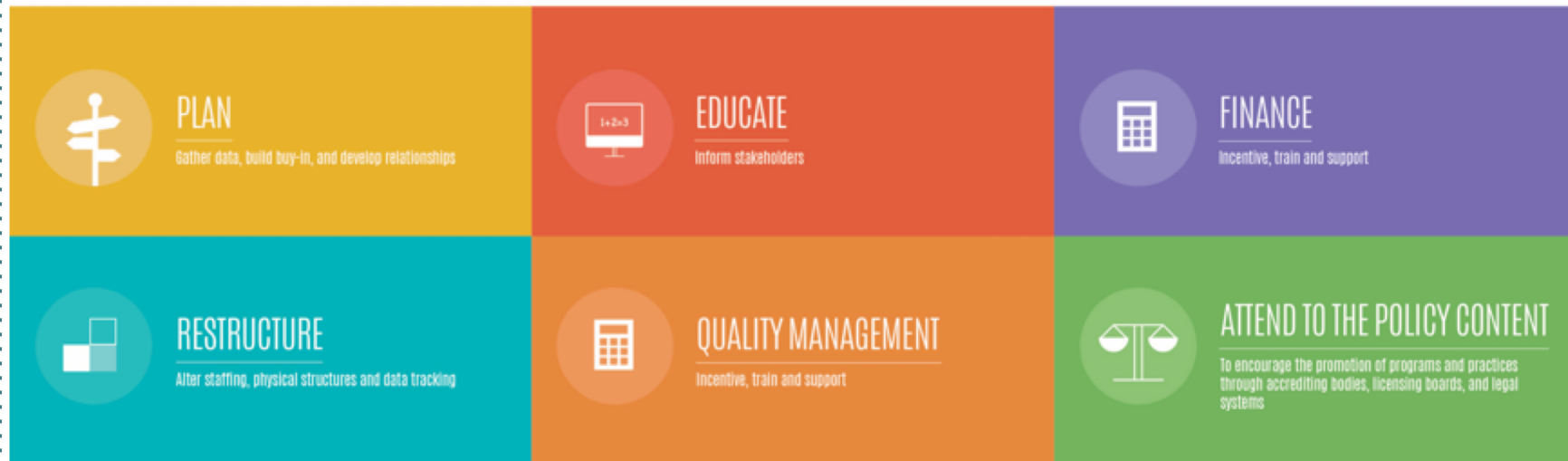
Introduction



Methods or techniques used to enhance the adoption, implementation, sustainment, and scale-up of a program or practice.

Proctor, Powell, & McMillen (2013); Powell, Garcia, & Fernandez (2018)

IMPLEMENTATION STRATEGIES



Powell et al. (2012)



Updated Compilation

Powell et al. *Implementation Science* (2015) 10:21
DOI 10.1186/s13012-015-0209-1



IMPLEMENTATION SCIENCE

RESEARCH

Open Access

A refined compilation of implementation strategies: results from the Expert Recommendations for Implementing Change (ERIC) project

Byron J Powell^{1*}, Thomas J Waltz², Matthew J Chinman^{3,4}, Laura J Damschroder⁵, Jeffrey L Smith⁶, Monica M Matthieu^{6,7}, Enola K Proctor⁸ and JoAnn E Kirchner^{8,9}

Waltz et al. *Implementation Science* (2015) 10:109
DOI 10.1186/s13012-015-0295-0



IMPLEMENTATION SCIENCE

SHORT REPORT

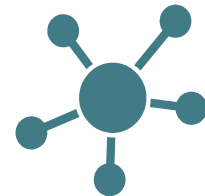
Open Access



Use of concept mapping to characterize relationships among implementation strategies and assess their feasibility and importance: results from the Expert Recommendations for Implementing Change (ERIC) study

Thomas J. Waltz^{1,2*}, Byron J. Powell³, Monica M. Matthieu^{4,5,10}, Laura J. Damschroder², Matthew J. Chinman^{6,7}, Jeffrey L. Smith^{5,10}, Enola K. Proctor⁸ and JoAnn E. Kirchner^{5,9,10}

*See Additional File 6 of Powell et al. (2015) for most comprehensive version of the compilation



Application & Impact



U.S. Department
of Veterans Affairs

*The National
Academies of* | SCIENCES
ENGINEERING
MEDICINE



School mental health settings (Cook et al., 2019; Lyon et al., In Press)

Technical assistance in child welfare (Metz, Boaz, Powell, In Press)

Child maltreatment prevention programs in LMICs (Martin, PI, DDCF)

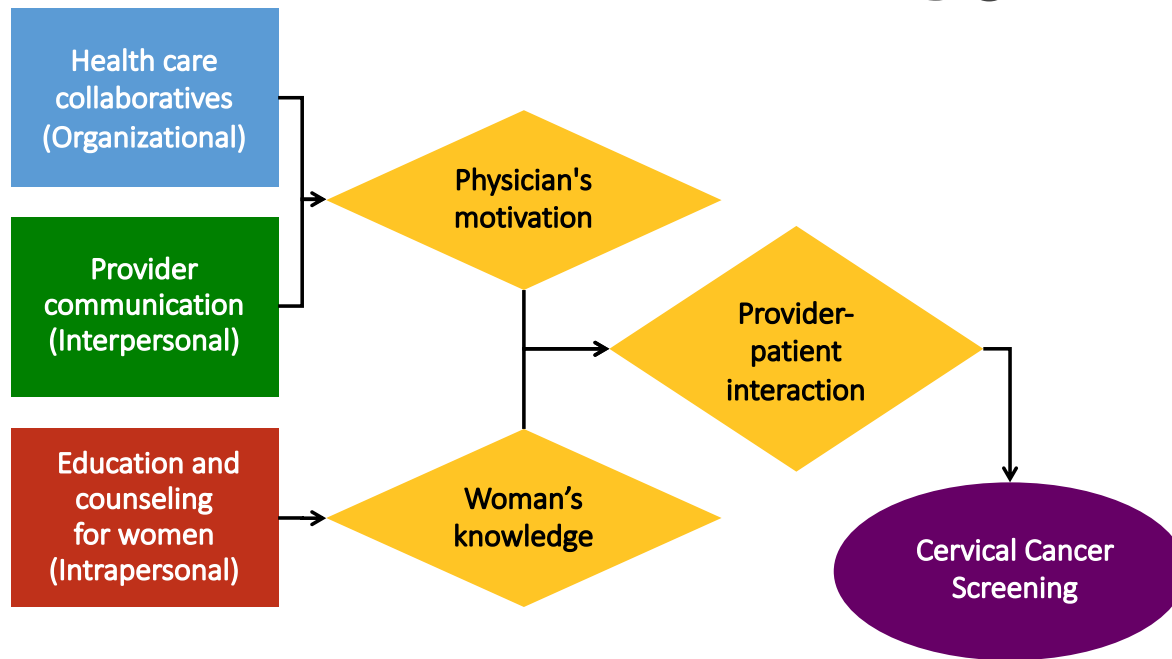


Discrete Strategy Examples

Identified Barriers	Relevant Implementation Strategies
Lack of knowledge	Interactive education sessions
Perception/reality mismatch	Audit and feedback
Lack of motivation	Incentives/sanctions
Beliefs/attitudes	Peer influence/opinion leaders



Multifaceted Strategy Example



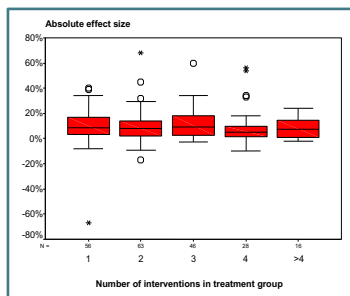
Weiner et al. (2012)



Unfortunately, we far too often...



**"Train and Pray"
Approach**



**"Kitchen Sink"
Approach**



**"One Size Fits
All" Approach**

"It seemed like
a good idea at
the time"
(Eccles)

**"ISLAGIATT"
Approach**

Grimshaw et al. (2004); Henggeler et al. (2002); Squires et al. (2014)



Examples of Missing the Mark

Powell et al. *Implementation Science* 2013, **8**:92
<http://www.implementationscience.com/content/8/1/92>



IMPLEMENTATION SCIENCE

STUDY PROTOCOL

Open Access

A mixed methods multiple case study of implementation as usual in children's social service organizations: study protocol

Byron J Powell^{1*}, Enola K Proctor¹, Charles A Glisson², Patricia L Kohl¹, Ramesh Raghavan^{1,3}, Ross C Brownson^{1,4}, Bradley P Stoner^{5,6}, Christopher R Carpenter⁷ and Lawrence A Palinkas⁸



Decision making not driven by evidence,
theory, or “best practices”

Strategies not used with frequency,
intensity, and fidelity required

“...results suggest a mismatch
between identified barriers and
the quality improvement
interventions selected for use.”

Powell et al. (2013); Powell (2014); Powell & Proctor (2016); Bosch et al. (2007)



Enhancing Impact of Strategies



- 1) Enhance methods for designing and tailoring
- 2) Specify and test mechanisms of change
- 3) Conduct more effectiveness research
- 4) Increase economic evaluations
- 5) Improve tracking and reporting of strategies

Powell et al. (2019)



Need to Enhance Methods for Designing and Tailoring

Methods to Improve the Selection and Tailoring of Implementation Strategies

Byron J. Powell, PhD

Rinad S. Beidas, PhD

Cara C. Lewis, PhD

Gregory A. Aarons, PhD

J. Curtis McMillen, PhD

Enola K. Proctor, PhD

David S. Mandell, ScD

- Group Model Building
- Conjoint Analysis
- Concept Mapping
- **Intervention Mapping**

Baker et al. (2015); Bosch et al. (2007); Colquhoun et al. (2017); Grol et al. (2013); Powell et al. (2017)



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The Potential for Stakeholder Engagement to Improve the Development and Tailoring of Implementation Strategies

COAST-IS

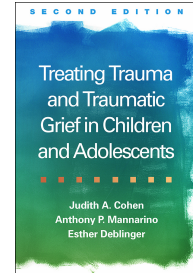


COAST-IS (K01MH113806)



A PARTNER IN
NCTSN

The National Child
Traumatic Stress Network

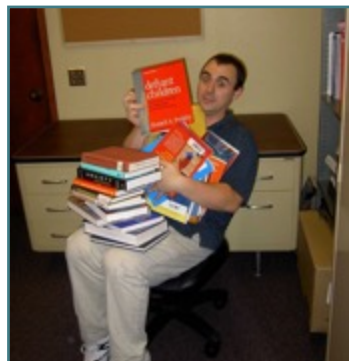
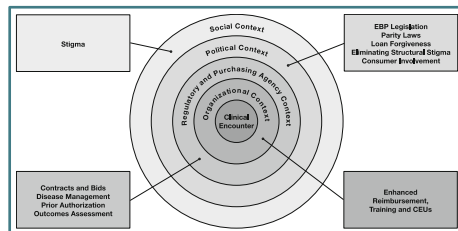


Collaborative Organizational Approach for Selecting and Tailoring Implementation Strategies

- Develop and pilot COAST-IS, which will involve coaching organizational leaders and clinicians to use Intervention Mapping to select and tailor implementation strategies.
- COAST-IS will be piloted using a mixed methods, randomized matched-pair design within the context of an NC CTP learning collaborative.



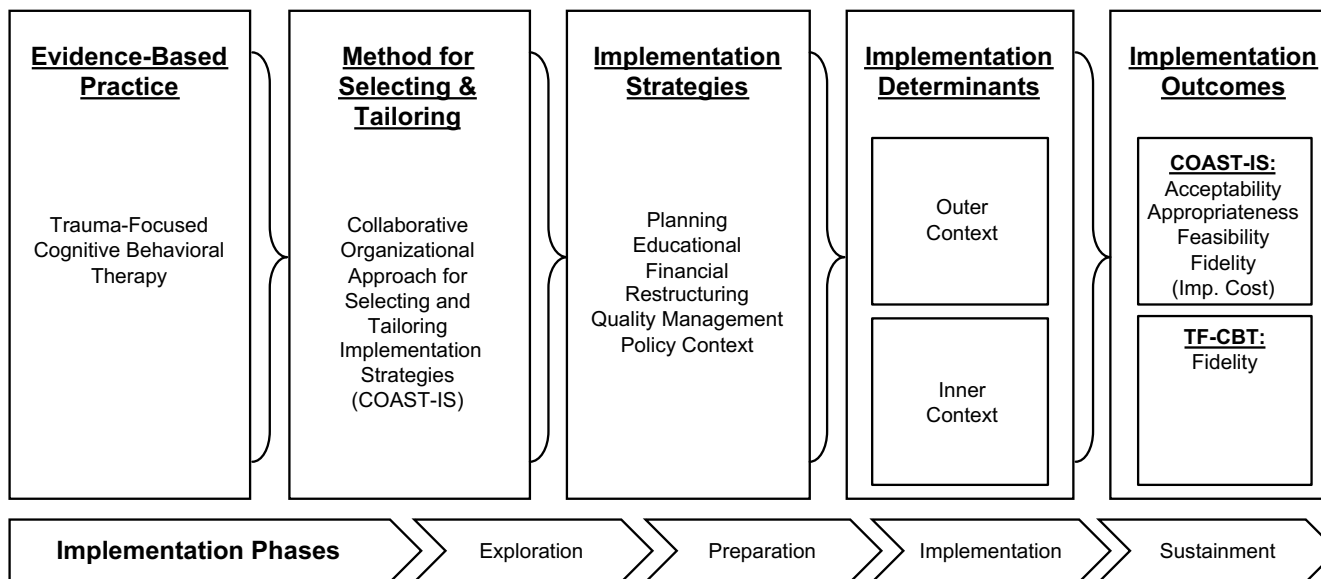
Guiding Rationale



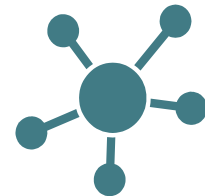
EBP Photo Credit: Chorpita & Daleiden (2007)



Conceptual Framework



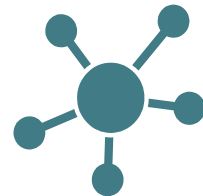
Bartholomew et al. (2016); Proctor et al. (2009); Aarons et al. (2011); Powell et al. (2012)



Partnered Development of COAST-IS



Organizational Advisory Board
Caregiver Advisory Board
Youth Advisory Board



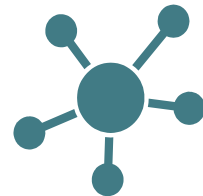
Partnering Networks

- **North Carolina Child Treatment Program (NC CTP)**
 - Full partners in the study design, data collection, and analysis
- **National Child Traumatic Stress Network (NCTSN)**
 - Connect to existing stakeholder groups
 - Partners for planning and dissemination



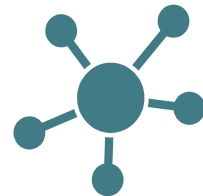
Org Advisory Board

- **Composition:** 10 clinicians and/or leaders from orgs providing trauma-focused clinical treatments
- **Goal:** Provide feedback on structure and content of COAST-IS to increase feasibility and acceptability
- **Impact:** Informed timing of content delivery, number of contact hours, format and language for sharing resources with COAST-IS participants



Youth & Caregiver Advisory Groups

- **Composition:** 7 young adults who have completed a trauma-focused clinical intervention as youth; 10 caregivers of children/youth who have been in tx
- **Goal:** Identify barriers to completing trauma-focused treatment and recommend strategies to address them
- **Impact:** Develop resource for orgs to better understand and address barriers



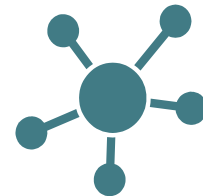
Potential Impacts

- Consideration for potential client and organizational level barriers during the planning phase
- Improved timing, pacing, and coordination of COAST-IS
- User-friendly intervention materials
- Useful measures of implementation barriers
- Potential for scale-up through partner organizations



The Potential for Stakeholder Engagement to Improve the Development and Tailoring of Implementation Strategies

Additional Opportunities for Stakeholder Engagement



Assessing Our Readiness for Community-Engaged D & I

TBM

ORIGINAL RESEARCH

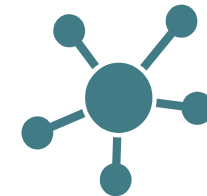


Researcher readiness for participating
in community-engaged dissemination and implementation
research: a conceptual framework of core competencies

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Translational Sciences Institute
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²Department of Health Policy and
Management, UNC Gillings School of
Global Public Health

Christopher M. Shea, PhD, MPA, MA,^{1,2} Tiffany L. Young, PhD,^{1,3,4} Byron J. Powell, PhD, LCSW,^{1,2}
Catherine Rohweder, DrPH,^{1,2} Zoe K. Enga, MPH,¹ Jennifer E. Scott, BA,^{1,2} Lori Carter-Edwards, PhD,^{1,5}
Giselle Corbie-Smith, MD, MSc^{1,3,4}



Measuring Determinants, Processes, and Outcomes

Stanick et al. *BMC Health Services Research* (2018) 18:882
<https://doi.org/10.1186/s12913-018-3709-2>

BMC Health Services Research

RESEARCH ARTICLE

Open Access



Operationalizing the 'pragmatic' measures construct using a stakeholder feedback and a multi-method approach

Cameo F. Stanick¹, Heather M. Halko², Caitlin N. Dorsey³, Bryan J. Weiner⁴, Byron J. Powell⁵, Lawrence A. Palinkas⁶ and Cara C. Lewis⁷

Powell et al. *Implementation Science* (2017) 12:118
DOI 10.1186/s13012-017-0649-x

Implementation Science

SHORT REPORT

Open Access



Toward criteria for pragmatic measurement in implementation research and practice: a stakeholder-driven approach using concept mapping

Byron J. Powell^{1*}, Cameo F. Stanick², Heather M. Halko³, Caitlin N. Dorsey⁴, Bryan J. Weiner⁵, Melanie A. Barwick⁶, Laura J. Damschroder⁷, Michel Wensing⁸, Luke Wolfenden⁹ and Cara C. Lewis⁴

Lewis et al. *Systematic Reviews* (2018) 7:66
<https://doi.org/10.1186/s13643-018-0728-3>

Systematic Reviews

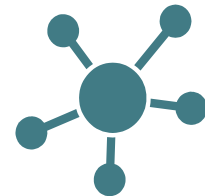
PROTOCOL

Open Access



An updated protocol for a systematic review of implementation-related measures

Cara C. Lewis^{1,2,3*}, Kayne D. Mettert¹, Caitlin N. Dorsey¹, Ruben G. Martinez⁴, Bryan J. Weiner⁵, Elspeth Nolen⁵, Cameo Stanick⁶, Heather Halko⁷ and Byron J. Powell⁸

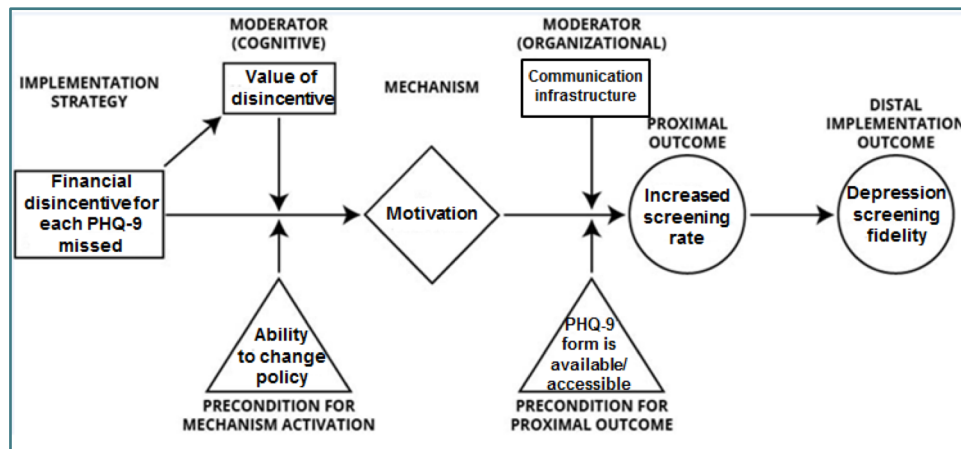


Understanding Mechanisms (i.e., How and Why They

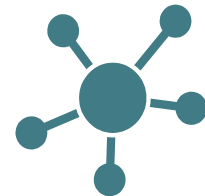
Work)



SOCIETY FOR IMPLEMENTATION
RESEARCH COLLABORATION



Lewis et al. (2018)



Lessons Learned from Early-Career Investigators

Administration and Policy in Mental Health and Mental Health Services Research
<https://doi.org/10.1007/s10488-019-00930-5>

ORIGINAL PAPER



Skills for Developing and Maintaining Community-Partnerships for Dissemination and Implementation Research in Children's Behavioral Health: Implications for Research Infrastructure and Training of Early Career Investigators

Geetha Gopalan¹  · Alicia C. Bunger² · Byron J. Powell³



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Discussion



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STAKEHOLDER ENGAGEMENT: FINDING THE FIT THROUGH DIVERSITY, EQUITY, AND INCLUSION

LISA SALDANA

OREGON SOCIAL LEARNING CENTER

Summer Institute on Implementation Science
University of North Carolina- Chapel Hill
June 12, 2019

“My stakeholders are my key basically. If I don’t have buy-in from my stakeholders, then that program’s not gonna survive.”



~ Agency Director



STAKEHOLDERS: WHO ARE THEY?

- Researcher Perspective

Systems
Regions/Districts
Agencies/Offices
Purveyors
Providers
Consumers

- Program Provider Perspective

Referrers
Community
Fundors
Consumers



STAKEHOLDERS: WHO ARE THEY?

- Researcher Perspective
 - +
 - Program Provider Perspective
- Positive Consumer Outcomes



Systems
Regions/Districts
Agencies/Offices
Purveyors
Providers
Referrers
Community
Fundors
Consumers

STAKEHOLDERS: WHO ARE THEY?

- Researcher Perspective

+

- Program Provider Perspective

Positive Implementation Outcomes



Systems
Regions/Districts
Agencies/Offices
Purveyors
Providers
Referrers
Community
Fundors
Consumers



STAKEHOLDER ENGAGEMENT IS EMBEDDED IN IMPLEMENTATION

STAKEHOLDER ENGAGEMENT IS EMBEDDED IN IMPLEMENTATION

Stages of Implementation Completion (only - Variable Descriptions)

Stage 1 – Engagement	
Date site is informed/learns services/program available	<ul style="list-style-type: none"> Agency or System Identifies that a Program is available for Scale-up Site might have proactively sought out information Information might have been purposefully disseminated to site
Date of interest indicated	<ul style="list-style-type: none"> Site reaches out to purveyor or developer group requesting initial information Site reaches out to purveyor or developer group express a desire to assess program fit Site notifies purveyor or developer that they want to move forward with a potential implementation plan Site chooses the EBP from a list of practices available to implement Site agrees to talk with other relevant parties within the system or organization to determine if they would support adoption
Date agreed to consider implementation	<ul style="list-style-type: none"> Site expresses high enough interest that the purveyor or developer provides information regarding the costing structure for implementation General cost and resource information is provided to the site (not necessarily specific to site structure).
Date initial cost information sent	
Stage 2 – Consideration of Feasibility	
Date of 1st site planning contact	<ul style="list-style-type: none"> Date of first discussion to describe the implementation process and expectations in detail Date of first discussion where implementation is outlined including negotiation to fit implementation plan within the parameters of the site's rollout
Date Stakeholder meeting #1	<ul style="list-style-type: none"> Date of first meeting with leadership and key members involved in the implementation process Meeting is often in person, but can also occur via videoconference or teleconference Concrete information is provided to key members of site's initiative and expectations are clearly defined Steps necessary to achieve positive outcomes are described
Date Feasibility Questionnaire completed	<ul style="list-style-type: none"> Documentation of feasibility is sometimes recorded by the site and sometimes by the purveyor Regardless, a dialogue occurs to address if it is feasible for site to implement the EBP using the typical implementation strategy Concrete expectations (e.g., regarding population served, flexible scheduling, collaboration with psychiatrist) are outlined and the value of specific needs clarified.
Date liaison/Program Champion representative identified to purveyor	<ul style="list-style-type: none"> Identification of the site's employee or team member responsible for taking the lead on the implementation efforts with the purveyor.
Stage 3 – Readiness Planning	
Date of cost calculator / funding plan review	<ul style="list-style-type: none"> Site and Purveyor look over program cost projections Site is provided with estimates for program costs and calculations are reviewed with purveyor specific to site
Date of staff sequence, timeline, hire plan review	<ul style="list-style-type: none"> Job titles, FTE and roles are discussed for the varying program positions. Purveyor provides a staffing timeline to make sure roles are filled in an efficient manner; e.g. therapist hired prior but close to training.
Date of recruitment review	<ul style="list-style-type: none"> Reviewing recruitment of non FTE positions essential to the implementation; e.g. foster parents, skills coaches... Might involve preparing pamphlets, advertising, attending community gatherings... The date should be the start of this process as it will continue and evolve over the entire implementation.
Date of referral criteria review	<ul style="list-style-type: none"> Establishing the source of the target population of the implementation efforts. Might involve preparing pamphlets, advertising, establishing locations to present on the intervention... The date should be the start of this process as it will continue and evolve over the entire implementation.

May 2018

Stage 3 – Readiness Planning (continued)	
Date of communication plan review	<ul style="list-style-type: none"> Establishment of a plan for relaying information to necessary personnel; e.g. Crisis situation, weekly team meeting...
Date Stakeholder #2 and/or leadership meeting	<ul style="list-style-type: none"> Meeting where final questions about site needs and requirements are addressed with site's Executives, Purveyor and possibly Key Community Stakeholders.

STAKEHOLDERS

IMPLEMENTATION

Stage 3 – Readiness Planning

Date of cost calculator / funding plan review	<ul style="list-style-type: none"> • Site and Purveyor look over program cost projections • Site is provided with estimates for program costs and calculations are reviewed with purveyor specific to site
Date of staff sequence, timeline, hire plan review	<ul style="list-style-type: none"> • Job titles, FTE and roles are discussed for the varying program positions. • Purveyor provides a staffing timeline to make sure roles are filled in an efficient manner; e.g. therapist hired prior but close to training.
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May 2018

Stage 3 – Readiness Planning (continued)

Date of communication plan review	<ul style="list-style-type: none"> • Establishment of a plan for relaying information to necessary personnel; e.g. Crisis situation, weekly team meeting...
Date Stakeholder #2 and/or leadership meeting	<ul style="list-style-type: none"> • Meeting where final questions about site needs and requirements are addressed with site's Executives, Purveyor and possibly Key Community Stakeholders.
Date written implementation plan completed	<ul style="list-style-type: none"> • Finalized written plan establishing protocols, goals, policies and timelines for the implementation.
Date Service Provider selected	<ul style="list-style-type: none"> • (Optional) Occurs when a System or Funder works through the earlier implementation activities and then selects a provider. (RFP)
Date of signed contract received	<ul style="list-style-type: none"> • Execution of the Implementation contract terms.
Date of initial materials sent	<ul style="list-style-type: none"> • Providing the sites with the necessary literature, manuals and tools to get their clinical staff familiar with the model prior to training. • Every Implementation process is unique and this activity might happen long in advance of establishing a contract.

DEFINING THE APPROPRIATE STAKEHOLDER GROUP FOR THE MISSION

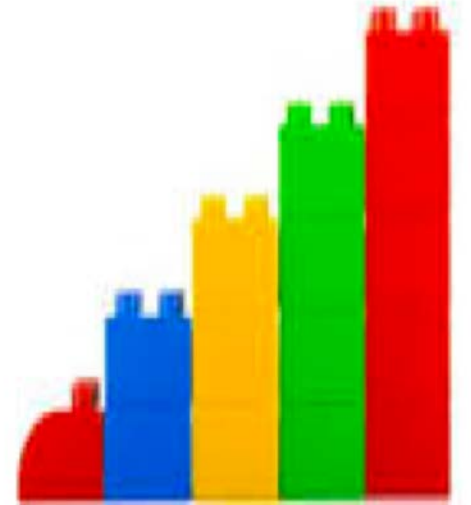


PROGRAM PROVIDER/SITE PERSPECTIVE

- “we certainly reach out to stakeholders and, you know, counties and probation offices that we contract with, and meet with them prior to implementation of any model to **make sure there's a need** and that it is something that they would utilize.”
- “We go to like social services and probation and present to them, you know, the actual social workers and probation officers... **you know, the workers themselves.**”
- “Every time there's a **new** judge, I go in and meet with him.”
- “we have a strong reputation with social services for **helping and doing a really good job**...I get referrals just because they're like- this parent really needs your help.”
- “we have **relationships built** with all the funders and stakeholders in each county.”

WHO IS DEPENDENT ON WHAT

Systems
Regions/Districts
Agencies/Offices
Purveyors
Providers
Referrers
Community
Funders
Consumers



WHO IS DEPENDENT ON WHAT

Systems = Regions/Districts = Agencies/Offices = Purveyors =
Providers = Referrers = Community = Funders = Consumers

Self-Check: Who is Absent? Were they Invited?
If Invited, Is there an Equal Seat at the Table?

THE ART OF ENGAGING AND MAINTAINING STAKEHOLDERS

Different engagement approach depending on stakeholder group

- Active and reflective listening
- Use of reinforcement
- Balance frequency of contacts
- Make contacts without an "ask" attached
- Provide feedback
- Use humor
- Value what each stakeholder brings to the table
- Follow-through with what you say you will do

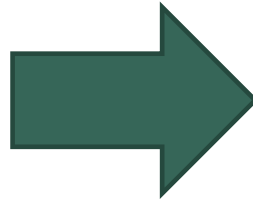


STAKEHOLDER MEETINGS BASICS

- Be mindful of **who is in the room together** at the same time
- Make sure it is a good use of people's time
- Set a clear agenda prior to meeting to set expectations
- Food and/or beverage
- Basic supplies (e.g., pens) in addition to what you need to accomplish goals
- Be a facilitator
 - Know where you can be flexible and where you need to be firm with boundaries
 - Keep it active!
 - When possible and appropriate— keep it fun!

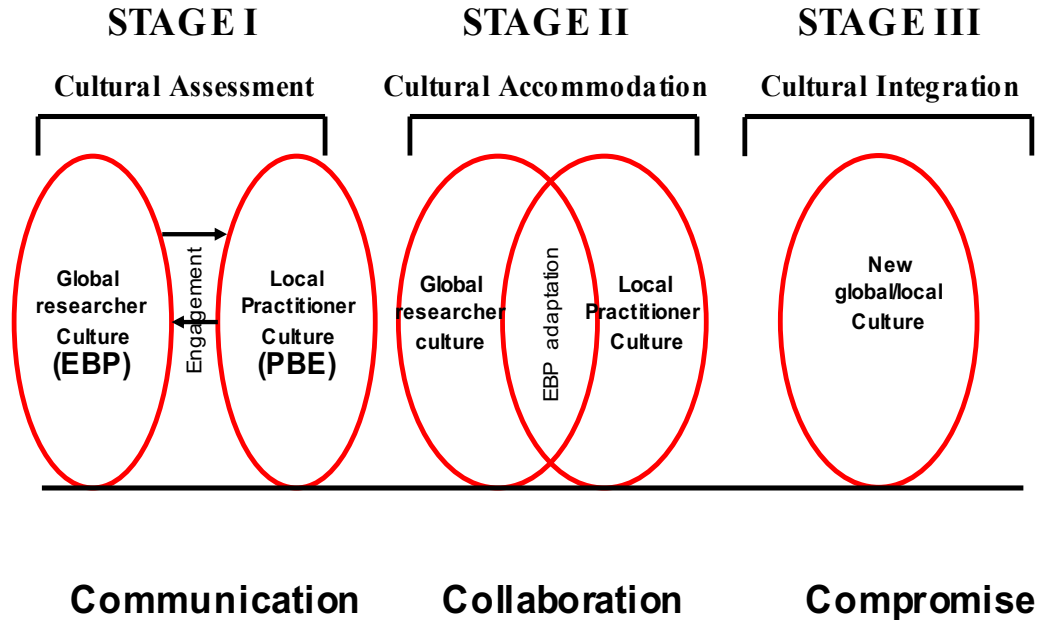


WHAT IS THE GOAL?



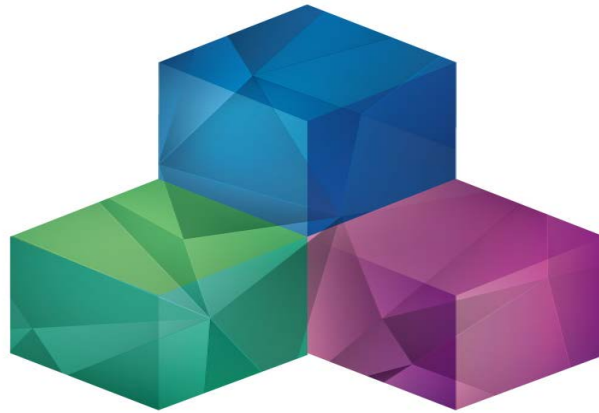
CULTURAL EXCHANGE

- A transaction and transformation of knowledge, attitudes and practices (KAP) of individuals or groups representing different cultural systems
 - Global culture of Evidence-Based Practice
 - Local culture of Practice-Based Evidence
- A process and product of debate and compromise. (Palinkas, Allred & Landsverk, 2005)



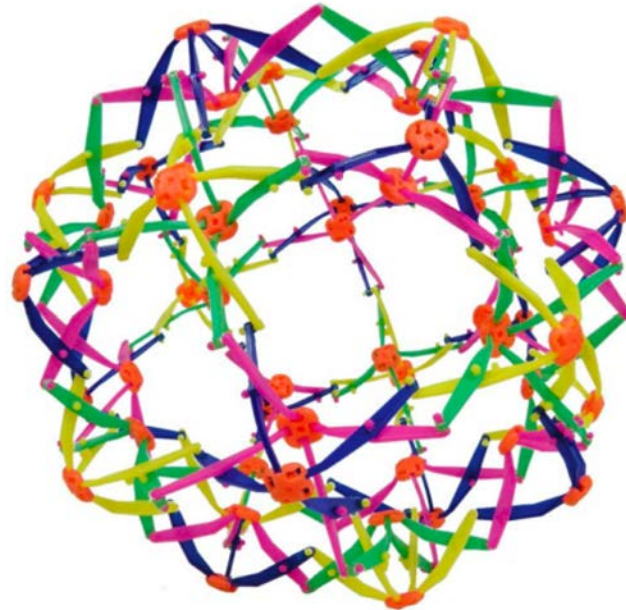
CASE EXAMPLE

Development of an implementation intervention DUE to strong stakeholder engagement



REINFORCE
EFFORT-RELATIONSHIPS-SMALL STEPS

INSIDE-OUT VERSUS OUTSIDE-IN



HISTORY OF R³



MODEL DEVELOPMENT

- 
- Focus Groups with Parents
 - Discussions with System Leaders
 - Focus Groups with Workforce
 - Focus Groups with Agency Leadership
 - Development of Training Materials
 - Recognition of Capacity Limitations
 - Repeat of Process
 - Training
 - Piloting – mixed methods
 - Independent Evaluation

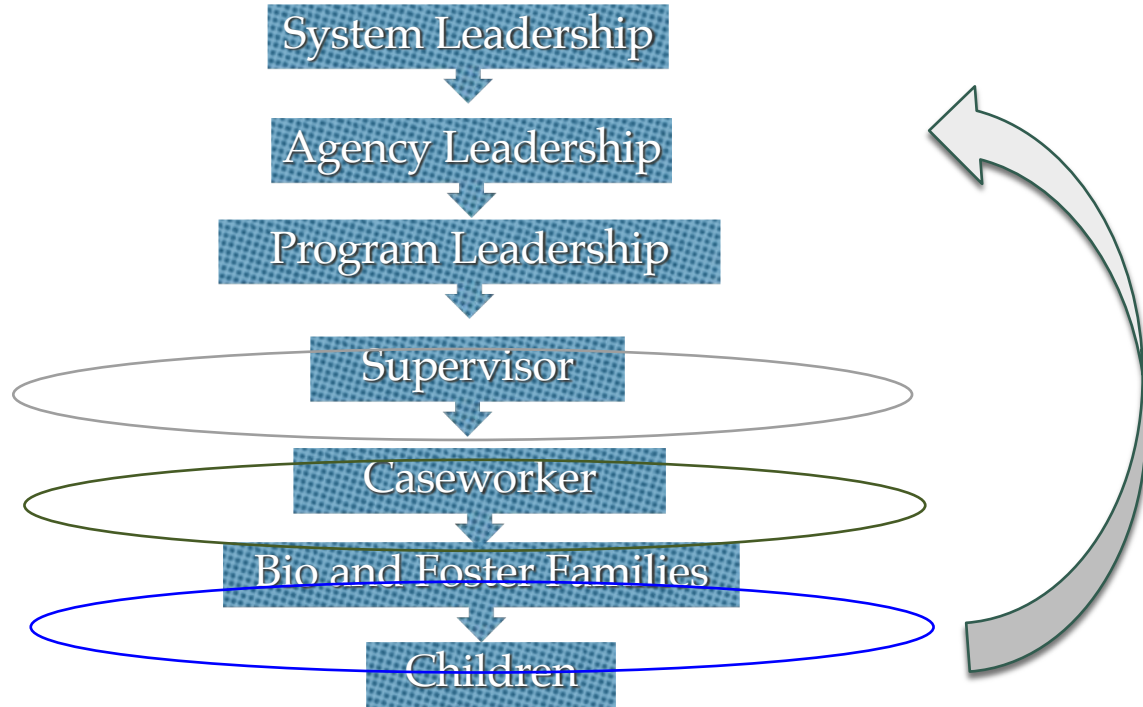
281 Caseplanners, 114 Supervisors, 23 Agency Leaders

GOALS OF R³

- (R1) Reinforcement of effort
- (R2) Reinforcement of relationships/role
- (R3) Reinforcement of small steps



R³ AIMS TO SHAPE INTERACTIONS AND TARGETS ENGAGEMENT



MAKING IT HAPPEN: CO-DESIGN

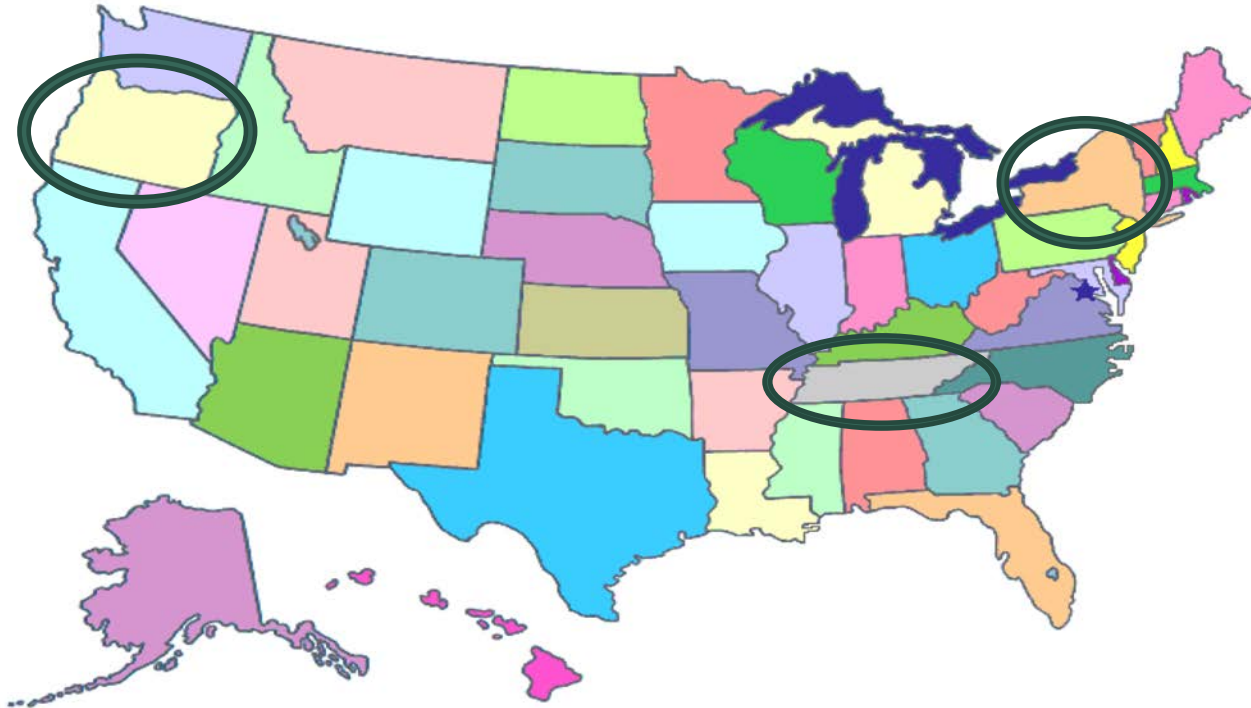
- NYC Providers
 - System Leaders
 - Supervisors
 - Caseworkers





PUTTING IT ON THE GROUND

PUTTING IT ON THE GROUND



DIFFERENT

DIFFERENT GOALS FOR EACH SYSTEM

- NYC – What Does It Take and Can it Work?
- Tennessee – Does It Replicate and Create System Change?
- Oregon – Can It Address a Current High Need?



LOSING ENGAGEMENT



WHAT DO PEOPLE SAY ABOUT R³?



“It strengthened my skill set as a leader and provided me with great ideas on how to encourage my team to encourage themselves and the families that we serve.”

“[My coach] was able to pull out strengths that I myself don’t even realize...it’s good to get that feedback from someone else”

“I thought I was going to get a lot of [flack] but people spoke about being able to really form good relationships with their families. Parents were not seeing them as villains anymore.”

ORGANIZATIONAL CHANGE: CONTROLLING FOR REGION (DESPITE SYSTEM LEADER CHANGE 3XS)

Measure	Outcome	Coefficient	SE	p-value
Implementation Climate Scale	ICS Scale 1: Focus on EBP	0.025	0.017	0.155
	ICS Scale 2: Educational Support for EBP	0.134	0.021	0.000
	ICS Scale 3: Recognition for EBP	0.023	0.021	0.267
	ICS Scale 4: Rewards for EBP	0.054	0.026	0.037
	ICS Scale 5: Selection for EBP	-0.079	0.022	0.000
	ICS Scale 6: Selection for Openness	0.006	0.021	0.768
	ICS Total Score	0.023	0.016	0.135
Implementation Citizenship Behavior Scale	ICBS Scale 1: Helping Others	0.057	0.021	0.007
	ICBS Scale 2: Keeping Informed	0.023	0.020	0.250
	ICBS Total Score	0.041	0.019	0.032
Supervisor Implementation Leadership Scale	Supervisor ILS Scale 1: Proactive	0.088	0.046	0.060
	Supervisor ILS Scale 2: Knowledgeable	0.147	0.034	0.000
	Supervisor ILS Scale 3: Supportive	0.033	0.028	0.239
	Supervisor ILS Scale 4: Perseverant	0.025	0.036	0.490
	Supervisor ILS Total Score	0.061	0.031	0.051

STAKEHOLDER ENGAGEMENT THAT IS INCLUSIVE CAN HELP IMPLEMENTATION SURVIVAL



CONCLUSIONS

- Engagement with Stakeholders is both Fun and Essential
- An Inclusive Stakeholder group is both Diverse and Equitable
- Stakeholders are Needed Partners in Implementation Research
 - Intervention Adoption
 - Scale-Up
 - Measurement Development
 - Intervention Development
 - Adaptation
- Stakeholder Engagement can Help Mitigate the Changing Tides in Systems



THANK YOU

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Oregon Social
Learning Center
Science benefiting families

