Making Programs Work: Strategies for Effective Implementation

Training for DBHR Prevention Providers

WA State Prevention Provider Meeting

October 27, 2026

Tacoma, WA

Washington State Health Care Authority

Presenters

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https://hd.wsu.edu/research-labs/impact-lab/



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Funding for this training provided by HCA Division of Behavioral Health & Recovery

Agenda

- Introductions & Opening Discussion
- Context and Stage Setting
- Barriers and Solutions
- Tools and Resources
- Debrief

Entering Today's Conversation



- Learn a framework for understanding
- Discover practical planning tools and resources

Build understanding
Ask questions
Learn from others

- Gain language for experiences you've had
- Reflect on where current efforts may be getting stuck

Share examples
Challenge assumptions
Connect concepts to practice

How are you arriving today?

How confident do you feel in your ability to effectively implement (or support) a prevention program?

PollEv.com/brittanycooper049

Acknowledgements

- The content for this training was developed by using concepts and modifying materials from the ***Active Implementation HUB***.

- The ***Active Implementation HUB*** is a free, online learning environment for use by any interested party involved in the active implementation and scaling up of programs and innovations. The goal is to increase the knowledge and improve the performance of persons engaged in actively implementing any program or practice.



Two-minute overview video: https://www.youtube.com/watch?v=b3244yMS32U&t

Objectives



Apply concepts of effective implementation using the Implementation Stages Planning Tool.

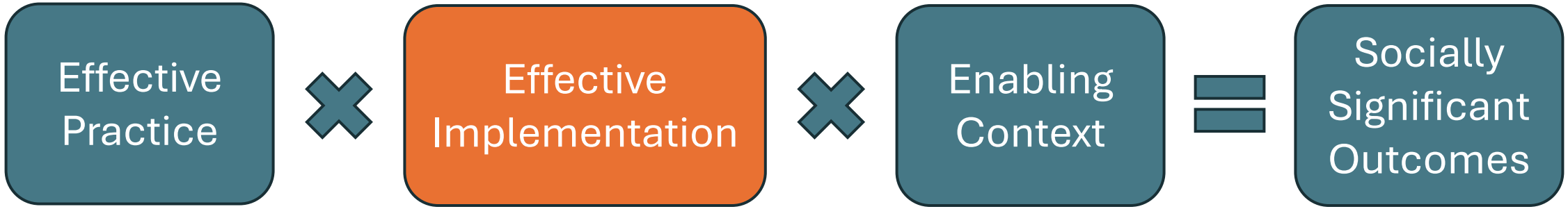


Engage with peers to identify solutions to common implementation barriers.



Explore tools and resources that support effective implementation to achieve program outcomes.

Effective Implementation is Key to Success



- Just like a multiplication problem, if one component is missing, you won't achieve intended outcomes.
- In today's training, we focus on effective implementation.

Formula taken from Active Implementation Hub.

Effective Implementation

We achieve ***effective implementation*** when programs…

- ✓Are delivered with quality
- ✓Are delivered with fidelity to core components
- ✓Are sustained across time
- ✓Reach and engage the community in a way that meets their needs
- ✓Achieve their intended goals and objectives

Context & Stage Setting

Implementation Stages



EXPLORATION

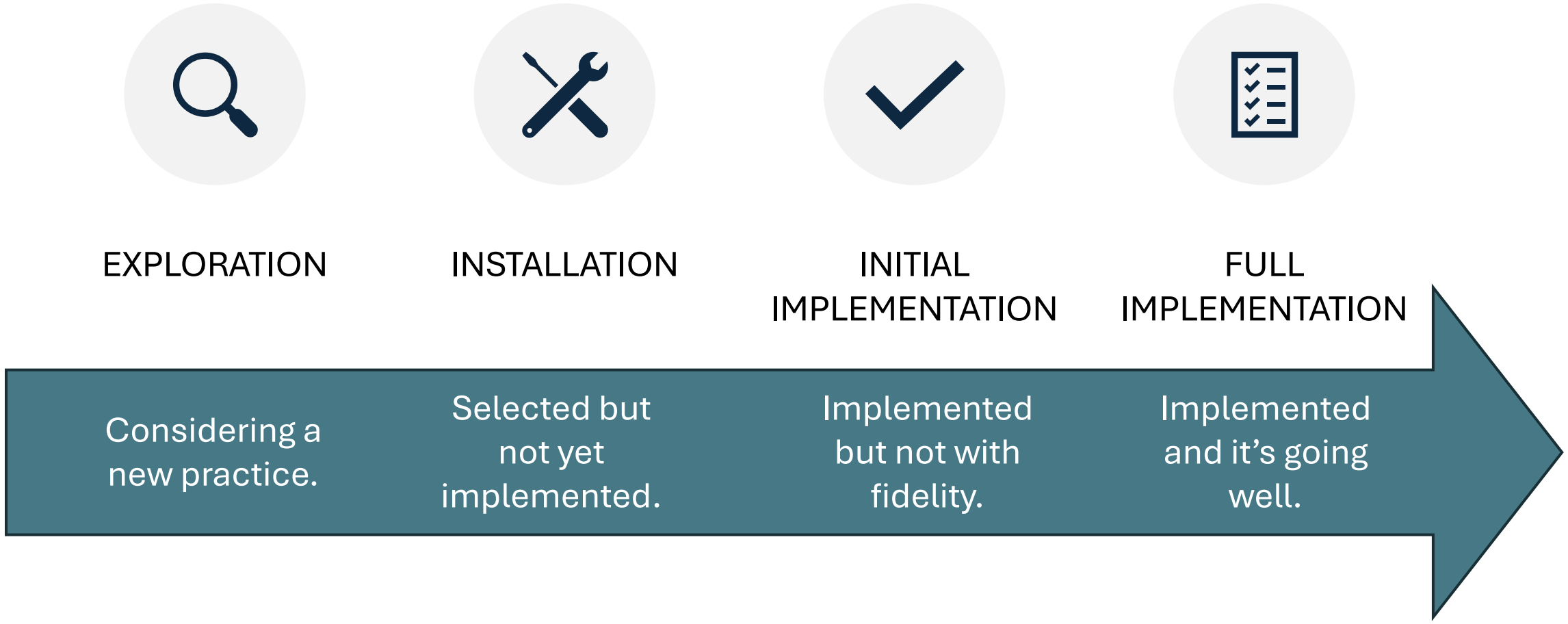
INSTALLATION

INITIAL IMPLEMENTATION

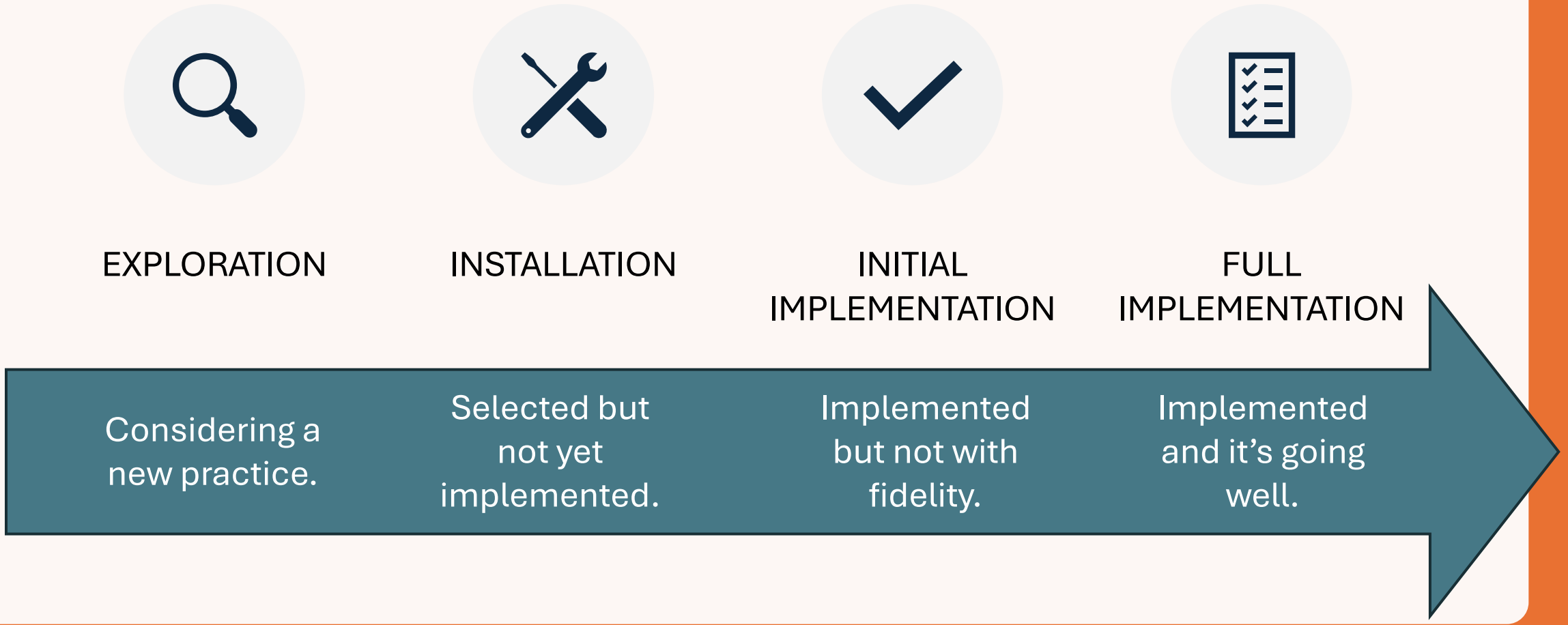
FULL IMPLEMENTATION

https://implementation.fpg.unc.edu/implementation-practice/stages/

Implementation Across Stages



Which of these stages resonates with you the most at this moment?



Exploration: Finding the best fit.

- Form an **implementation team** to support the process
- Document the need
- Select the program/practice that matches the need while balancing acceptability and feasibility of implementing
- Garner buy-in from leaders and partners

Implementation Teams: The What

Group of engaged and committed staff responsible for “making it happen” by supporting full, effective, and sustained implementation.

What do we want in a team?

- Knowledge of evidence-based program
- Application of implementation science
- Use of improvement cycles
- Engage in systems change
- Flexibility to change as needed
- Available capacity and willingness

https://implementation.fpg.unc.edu/implementation-practice/teams/

Implementation Teams: The Who

Teams can include:

- Coalition members
- Community organization partners (e.g., school counselors)
- DBHR Staff
- Individual volunteers
- and more!

Members can serve different roles, at different points in time, with different levels of commitment.

Implementation Team does not necessarily equal Coalition Members.

Implementation Team Competencies

- Nurture and build relationships
- Build teams through development & management
- Facilitate change through training and coaching
- Make data-informed decisions to support change
- Understand program components and connection to outcome

Forming an Implementation Team in Practice

What competencies are needed?

Who has these competencies?

Given the work, how many are needed?

TEAM:	**INNOVATION:**
Name	
Affiliation	
Role	
Expertise	
Responsibility	

https://implementation.fpg.unc.edu/implementation-practice/teams/

What about your team?

At your table, discuss:

1. Who is **one** person that should be part of the implementation team?
2. What expertise or perspective would they bring?
3. Are they currently involved?



Exploration Stage Checklist

EXPLORATION STAGE ACTIVITIES	In Continuous Improvement	In Progress	Not Yet Initiated (Choose one)
E1. Grow relationships with stakeholders with a variety of diverse perspectives and inclusive of voices not traditionally prioritized.	☐	☐	☐
E2. Develop an Implementation Team representative of the staff, organization and community that are the participants in and recipients of needed changes.	☐	☐	☐
E3. Cultivate Sponsors/Champions that have the authority and cultural capital to promote change.	☐	☐	☐
E4. Assess and create readiness for team, staff, and organization.	☐	☐	☐
E5. Identify changes needed, existing assets, and potential root causes.	☐	☐	☐
E6. Scan or assess what is currently in place to address the change needed (Initiative Inventory).	☐	☐	☐
E7. Identify and learn about other potential practices or programs to address the change needed.	☐	☐	☐
E8. Assess fit and feasibility of options to address the change needed. Consider need, fit, evidence, usability, capacity, and supports (Hexagon Tool).	☐	☐	☐
E9. Using fit and feasibility assessment results, identify the option to implement, or choose to reassess need and potential options, or choose not to proceed.	☐	☐	☐
E10. Develop communication processes and messages.	☐	☐	☐
E11. Determine what actions will be needed to optimize readiness and develop staff capacity, as well as organization and systems changes needed for the identified option.	☐	☐	☐

Installation: Setting ourselves up for success.



Effective and efficient implementation team



Supports are in place



Plan for collecting and using data to make decisions



Channels of communication

Installation Stage Checklist

INSTALLATION STAGE ACTIVITIES	Not Yet Initiated	In Progress	In Continuous Improvement
	(Choose one)		
I1. Ensure the practice/program is clearly defined.	☐	☐	☐
I2. Revisit implementation team membership to ensure needed perspectives.	☐	☐	☐
I3. Ensure the implementation team has the appropriate knowledge, skills, functions and authority to support infrastructure development and improvement of the program/practice.	☐	☐	☐
I4. Convene implementation team regularly to use data (e.g., fidelity, program/ process, outcome) to critically examine and improve implementation.	☐	☐	☐
I5. Develop plan for implementation: • Develop selection protocols for practitioners. • Develop Training/Professional Learning Plans. • Develop coaching plans. • Develop data systems (what data, how data will be collected, used, and shared). • Develop decision making criteria for success and scaling.	☐	☐	☐
I6. Secure and develop infrastructure resources and supports needed for the program/ practice.	☐	☐	☐
I7. Select practitioners.	☐	☐	☐
I8. Provide initial training for practitioners.	☐	☐	☐
I9. Review and refine needed policies and procedures.	☐	☐	☐

Initial Implementation: Trying it out.



Select individuals are using program/practice



Follow data collection and feedback to iterate and improve



Program/practice fidelity and feasibility

Initial Implementation Stage Checklist

INITIAL IMPLEMENTATION STAGE ACTIVITIES	In Continuous Improvement	In Progress	Not Yet Initiated
	(Choose one)		
II1. Convene implementation team regularly to use data (e.g., outcome, fidelity, process) to critically examine and improve implementation.	☐	☐	☐
II2. Practitioners begin delivery/use of program/practice.	☐	☐	☐
II3. Implement Coaching Supports.	☐	☐	☐
II4. Continue Training/Professional Learning as needed.	☐	☐	☐
II5. Gather data and feedback through multiple sources including staff, practitioners, recipients, families, and stakeholders to monitor progress.	☐	☐	☐
II6. Use a process to develop improvement strategies through analysis of data and feedback.	☐	☐	☐
II7. Refine implementation infrastructure (i.e., training, coaching, data systems, leadership supports and resources) based on data and feedback.	☐	☐	☐
II8. Use feedback loops with leadership, practitioners, staff, recipients, and stakeholders to communicate about progress, improvement strategies and success.	☐	☐	☐
II9. Use decision making criteria for expanding use of the practice/program.	☐	☐	☐

Full Implementation: A new way of doing.



Data feedback process informs decision-making



Providers delivering with fidelity and ease



Evaluation data indicating improved outcomes

Full Implementation Stage Checklist

FULL IMPLEMENTATION STAGE ACTIVITIES	In Continuous Improvement	In Progress	Not Yet Initiated
	(Choose one)		
F1. Convene implementation team regularly to use data (e.g., fidelity, program/ process, outcome) to critically examine and improve implementation.	☐	☐	☐
F2. Monitor and improve implementation supports and resources as needed to sustain implementation.	☐	☐	☐
F3. Continue to collect and use data for improvement (e.g., fidelity, program/ process, outcome).	☐	☐	☐
F4. Continue the training and coaching supports to maintain skillful use of the program or practice.	☐	☐	☐
F5. Continue to use feedback loops with leadership, practitioners, staff, recipients and stakeholders to communicate about progress, improvement strategies and success.	☐	☐	☐
F6. Evaluate for expected outcomes.	☐	☐	☐



Is the organization considering implementing a new practice?

Yes

The organization is in **EXPLORATION**

Have staff (e.g., education staff) already started implementing the new program or practice?

No

The organization is in **INSTALLATION**

Yes

Are the majority of staff implementing the new program or practice with fidelity?

No

The organization is in **INITIAL IMPLEMENTATION**

Yes

The organization is in **FULL IMPLEMENTATION**

Start here.

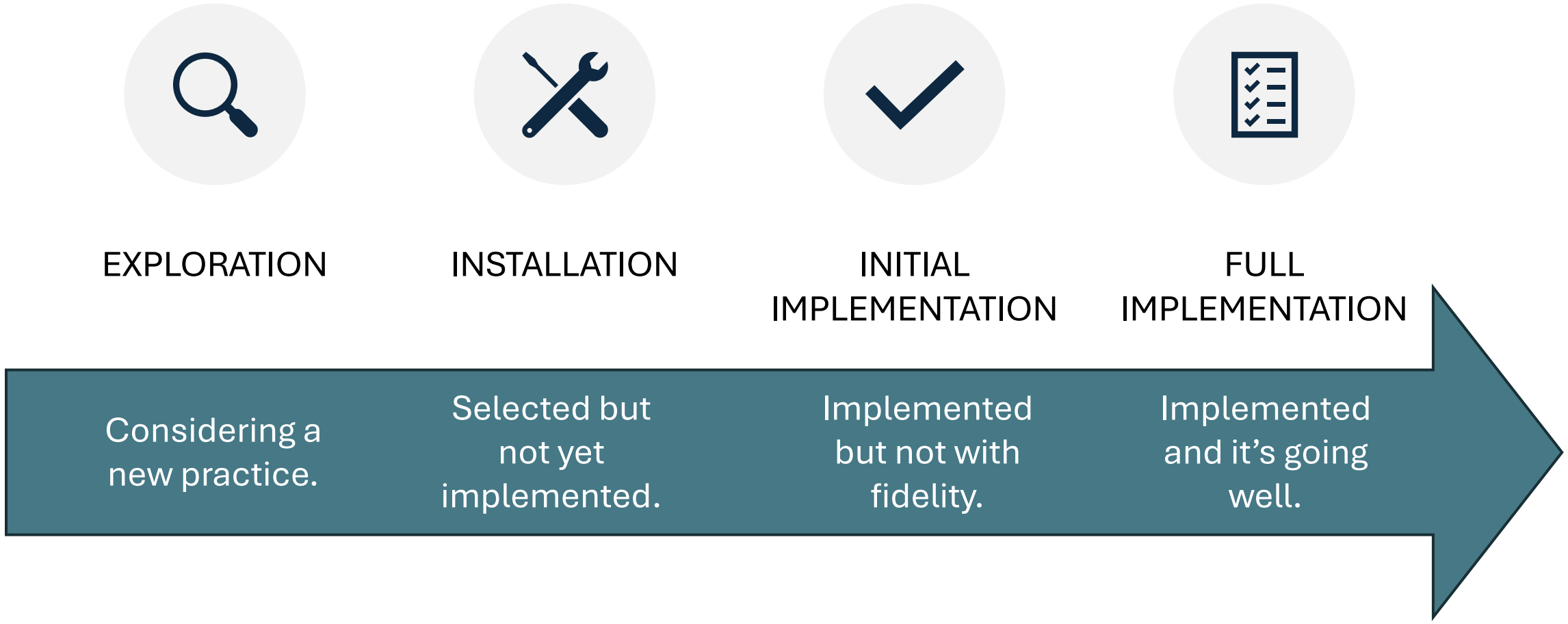
Has the organization selected a practice to implement?



Yes

Effective Implementation: Identifying Barriers

Implementation Across Stages



Where do things go wrong?

Step 1: Brainstorm a list of implementation barriers you face when implementing an EBP in your community.



EXPLORATION

INSTALLATION

INITIAL IMPLEMENTATION

FULL IMPLEMENTATION

Where do things go wrong?

Step 2: Add responses using link or QR code.



https://padlet.com/EW_WSU/DBHR

Where do things go wrong?

Step 3: Review and ‘like’ posts you agree with.



https://padlet.com/EW_WSU/DBHR

Common Implementation Barriers

Exploration	Installation	Initial Implementation	Full Implementation
• Poor fit • Lack of understanding of logic model • Challenges engaging partners • Where to find EBPs • Bias against research • No plan for data	• Staff turnover • Training not available • Underestimating resources needed • Lack of interest from participants • Lose partners/ champions	• Need to adapt • Balance fidelity & adaptation • Lack of engagement/ participation • Unexpected (e.g., illness, weather) • Lack of confidence • Program doesn't work/got stalled	• Maintaining fidelity • Recruiting participants • Sustaining • Leadership change/ lack of buy-in • Poor participation (attendance/ evaluation) • Facilitator resigned, poor quality

Time for a break!

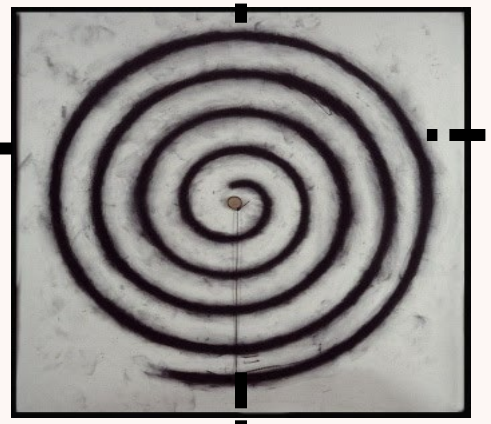
We will resume at 10:05am

Effective Implementation: Identifying Solutions

Reflect on implementation barriers…

1: What implementation barrier is top of mind for you & why?

2: What is it about this implementation barrier that is most challenging?



3: What factors influence this implementation barrier?

4: What will happen if this implementation barrier is not addressed?

Troika Consulting: Overview

Goal: Based on your experiences, identify solutions for effectively addressing common implementation barriers.

Step 1: Get in groups of 3 and arrange your chairs in small circle.

Step 2: Ask for help and get advice from two others in 3 rounds of consultations.

https://www.liberatingstructures.com/troika-consulting

Troika Consulting: How it Works

We will do 3 rounds of the below steps so each person will get a chance to be the client. When you hear the chimes and see the slide change, it's time to move to the next step.

Step 1
(2 minutes)

Client shares the implementation barrier and what kind of help they need to address it.

Step 2
(2 minutes)

The consultants ask clarifying questions – no judgements, no solutions.

Step 3
(5 minutes)

Client turns around and listens silently taking notes while consultants discuss their ideas.

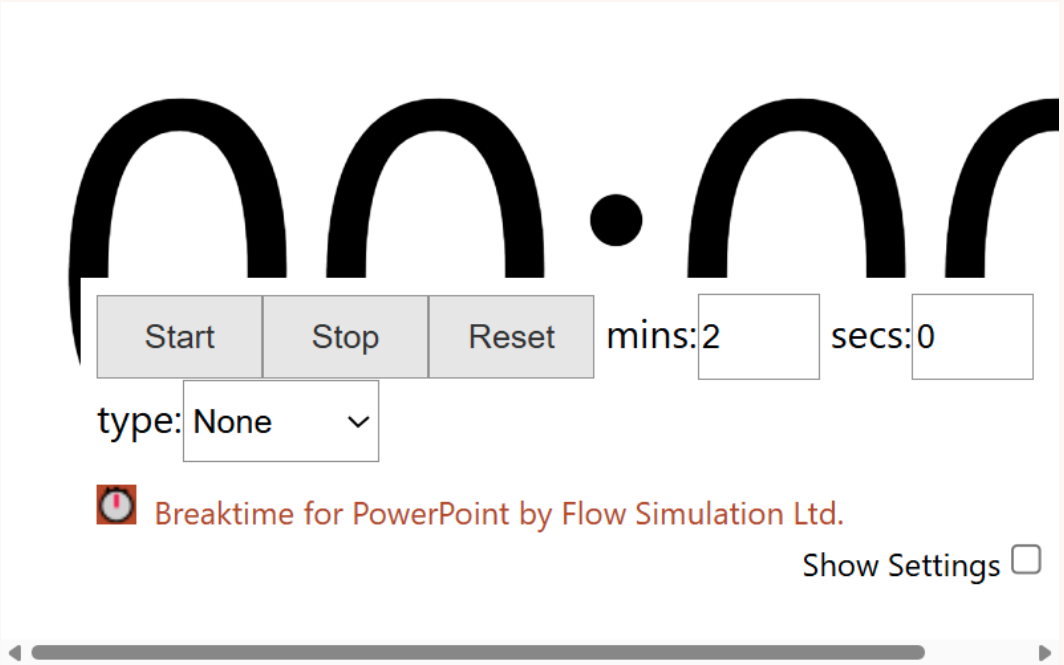
Step 4
(2 minute)

Client turns around and shares what they found most valuable.

https://www.liberatingstructures.com/troika-consulting

Troika Consulting: Step 1

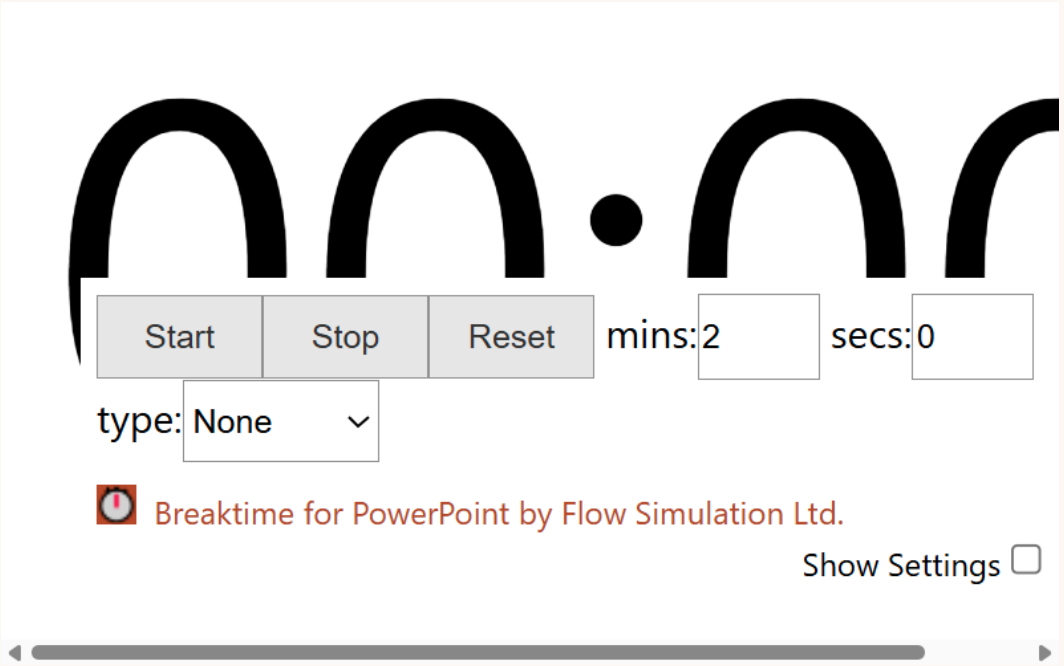
***Client** share your implementation barrier and what kind of help you need to address it.*



https://www.liberatingstructures.com/troika-consulting

Troika Consulting: Step 2

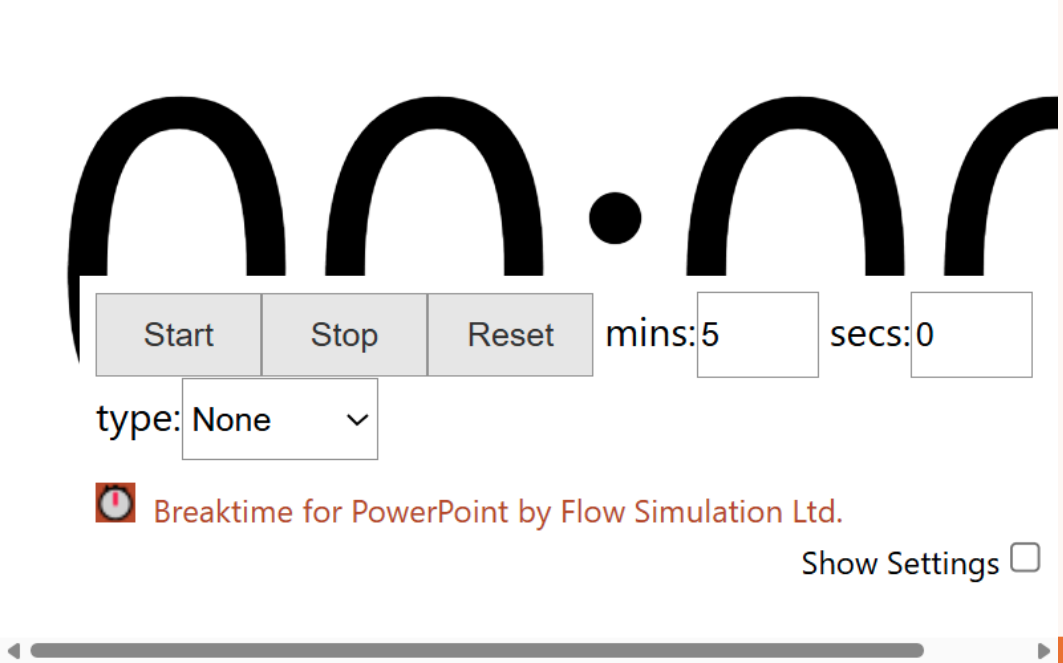
Consultants *ask the client any clarifying questions – do not share any judgements or no solutions.*



https://www.liberatingstructures.com/troika-consulting

Troika Consulting: Step 3

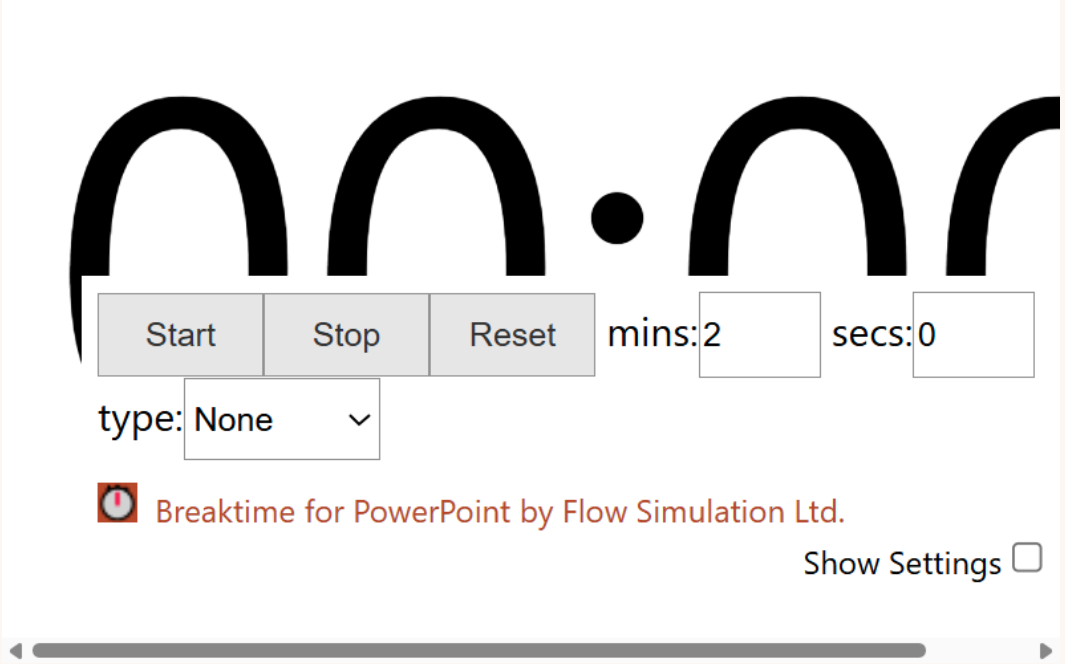
***Client** turn around so your back is facing the consultants – you will listen silently (taking notes if you desire) while **consultants** discuss their ideas.*



https://www.liberatingstructures.com/troika-consulting

Troika Consulting: Step 4

***Client** turn back around so you are facing the consultants – share what you found most valuable from the discussion.*



https://www.liberatingstructures.com/troika-consulting

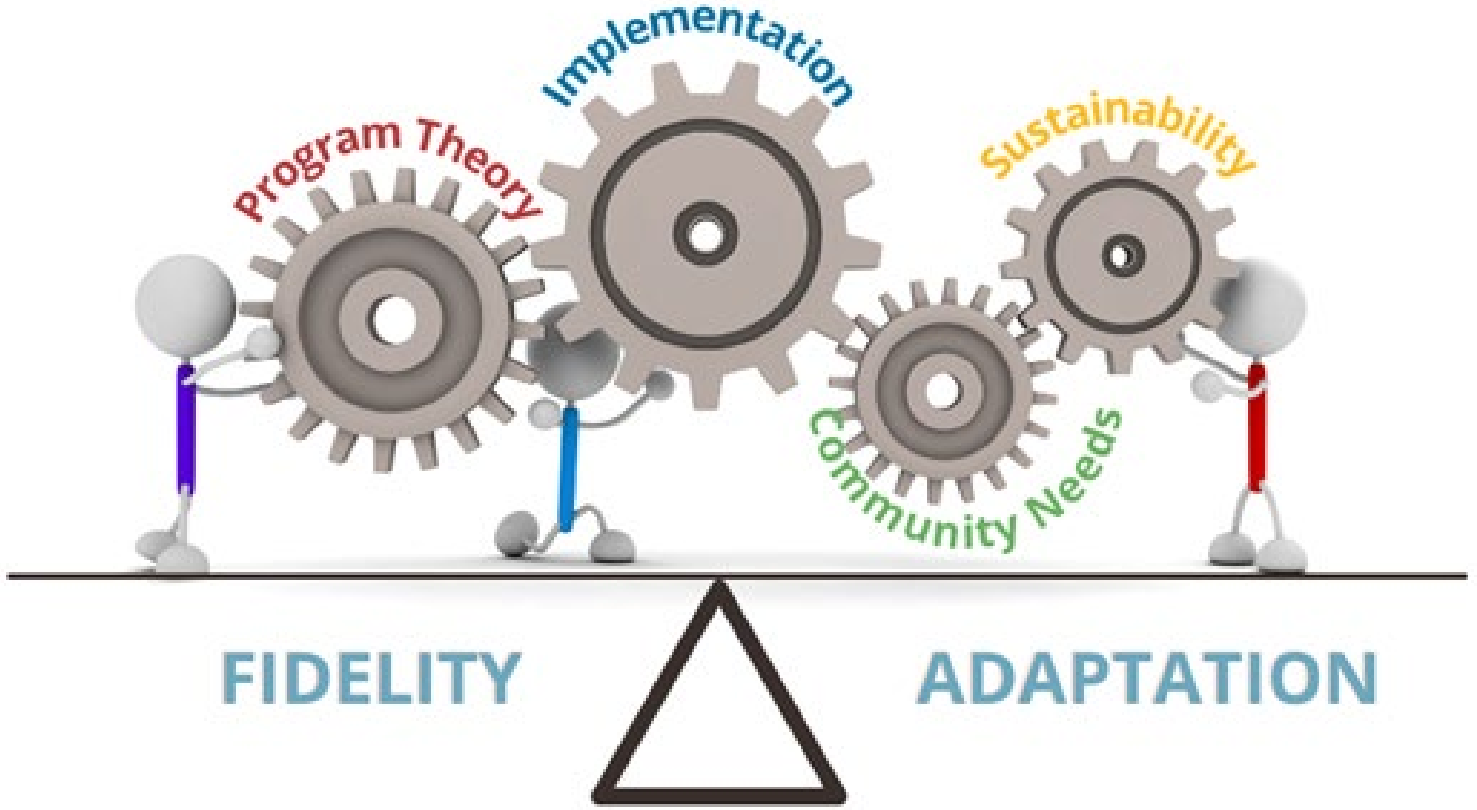
Troika Consulting: Debrief

- How was that experience?
- What themes did you hear?
- What strategies might you be able to use when you have implementation challenges?

Effective Implementation: Tools & Resources

How to strike the right balance between fidelity & adaptation?

To achieve effective implementation, you must strike the right balance.



Best Practices Guide for Balancing Fidelity & Adaptation

Cooper, B.R., Parker, L. A., & Diaz Martinez, A. (2019). Balancing fidelity & adaptation: A best practices guide for evidence-based program implementation. WSU Publications, retrieved at: https://hdl.handle.net/2376/16873



BALANCING FIDELITY AND ADAPTATION:

A GUIDE FOR EVIDENCE-BASED PROGRAM IMPLEMENTATION

Abstract

The adoption of an effective program is only the first step toward achieving the positive youth and family outcomes community-based organizations aim to achieve. Research has demonstrated time and time again that high-quality implementation is critical if evidence-based programs are to attain their intended goal of improved youth and family outcomes. However, there continues to be substantial debate about whether evidence-based programs should be flexibly adapted to fit local contexts versus delivered with strict fidelity.

This fact sheet will delve into the science of this debate, provide a useful analogy for understanding that science and present a best practices guide aimed at helping program coordinators and implementers effectively balance program fidelity with local adaptations in order to best meet the needs of their local communities.

The Fidelity versus Adaptation Debate: What can we learn from prevention science?

Prevention science has made tremendous advances in the past four decades in determining which programs are most effective at enhancing youth and family well-being in areas such as pro-social behavior and parent-child bonding, and preventing poor outcomes like youth substance use, delinquency, and violence (National Research Council & Institute of Medicine 2009). These programs are referred to as evidence-based programs because they are theoretically sound interventions that have been evaluated using a well-designed study and have demonstrated significant improvements in their targeted outcomes. In other words, research has demonstrated that participants who received the evidence-based program had significantly better outcomes in comparison to people who did not receive the program – and the only explanation for these better outcomes is the exposure to the program.

However, prevention science is increasingly recognizing that research evidence is only one piece of the puzzle (Kemp 2016). The program coordinators and implementers charged with delivering these evidence-based programs have years of experience and expertise about what works in their communities – this is often referred to as contextual or experiential evidence – and this type of evidence should also play a role in determining which evidence-based program to adopt and how to implement that program in a specific community (https://vetoviolence.cdc.gov/understanding-evidence).

Making decisions about how to adhere to the dosage, content, and structure of the program as it was originally designed (i.e., program fidelity) while adapting to local contexts is challenging and complex, particularly with limited resources, and program implementers are often left to make these decisions without much guidance. Fortunately, this fact sheet can offer some help.

Fidelity versus Adaptation: What does the research say?

Within the field of prevention science, there is still some debate about whether evidence-based programs should be adapted to fit local contexts versus delivered with strict fidelity (Barrera et al. 2017; Chambers and Norton 2016; Kemp 2016; Perez et al. 2015). Those who are proponents of the 'fidelity argument' say it is best not to tinker with a proven-effective program because if local implementers make changes, there is no guarantee that the evidence-based program will achieve the same positive outcomes as it did during the research studies that proved its effectiveness. The 'fidelity argument' also suggests that communities should leverage the program developers' expertise and thus deliver the program as originally designed with as little

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5 Best Practices for EBP Implementation



Strategic Planning Pro Tip: The CPWI Strategic Plan Template has prompts asking questions about fidelity and adaptation. If you plan to use an external, validated tool like the ones we discuss today, you can reference them in the text of your strategic plan. This can set the stage for future success and short-term plan approval.

DBHR's Identifying Adaptations: A Tool for Prevention Providers also provides step by step guidance to assess potential program adaptations.



1: Select the EBP that best meets your needs

- Are targeted outcomes relevant & acceptable?
- Strong evidence with targeted population?
- Will content & methods be accessible & appealing to targeted population?
- Pick a program that will need the least amount of adaptation and one whose developer/trainer is willing to work with you

The **NIRN's Hexagon Tool** can be used by communities to better understand how a new or existing program fits into an implementing site's existing context. https://implementation.fpg.unc.edu/resource/lesson-the-hexagon-tool/



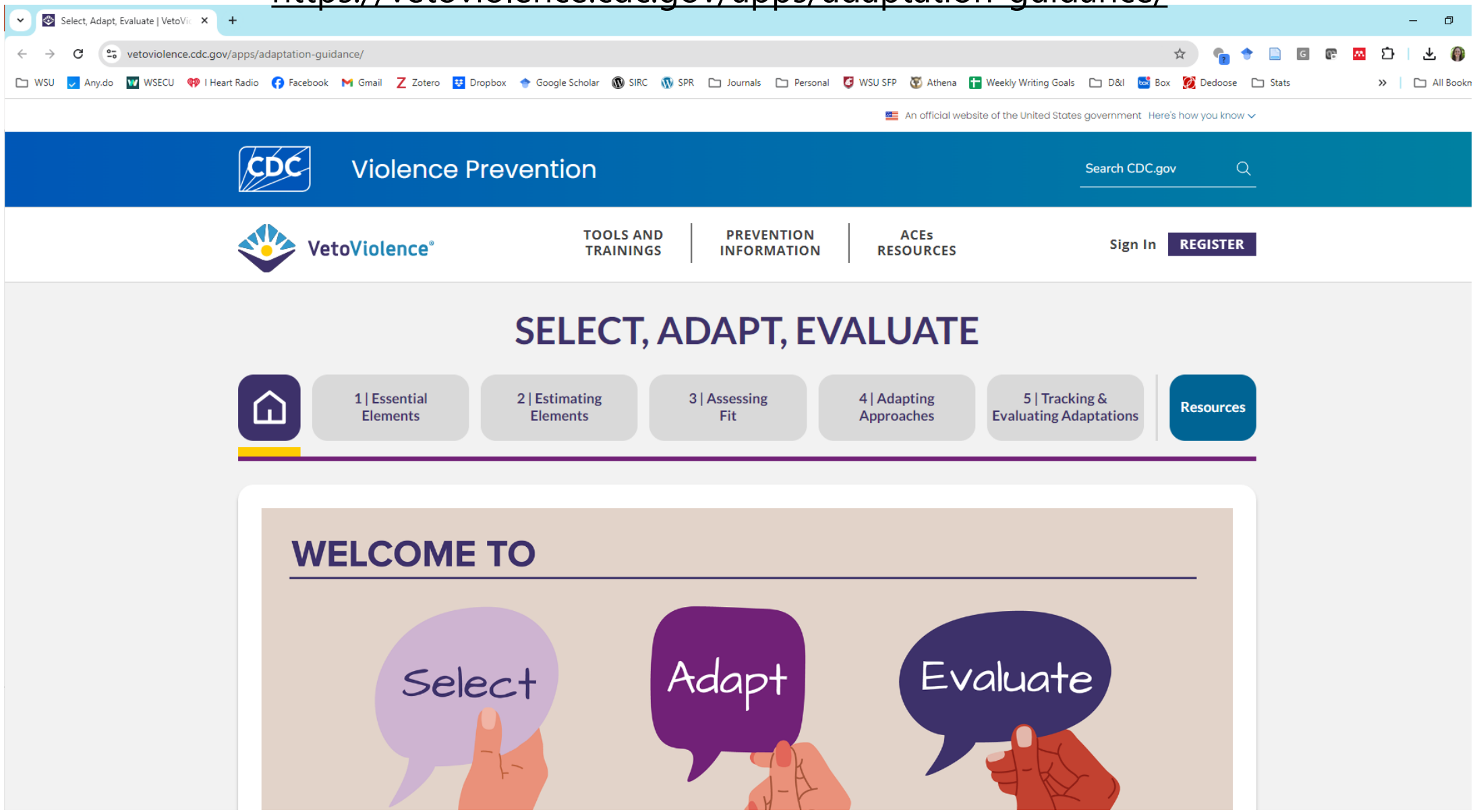
2: Determine key program elements

- Ideally, you can get this info from the program developer/trainer
- Gather program materials
- Statement of goals, summary of underlying theory, facilitator guide
- Develop program logic model

The **CDC's SELECT, ADAPT, EVALUATE!** offers tools for how to identify the essential elements of your program. https://www.cdc.gov/violence-prevention/media/pdf/resources-for-action/adaptationguidance.pdf

The **University of Kansas's Community Toolbox** offers excellent resources for developing a program logic model. http://ctb.ku.edu/en

https://vetoviolence.cdc.gov/apps/adaptation-guidance/



The **CDC's SELECT, ADAPT, EVALUATE!** provides a worksheet for 'estimating essential elements' of violence prevention programs. https://www.cdc.gov/violence-prevention/media/pdf/resources-for-action/adaptationguidance.pdf

	ELEMENTS	QUESTIONS TO CONSIDER
What	• Knowledge, skills, and messages delivered through program activities	1. What messages will be communicated? 2. What knowledge will be increased? 3. What skills will be developed?
How	• How it should be delivered • Instructional methods, setting, timing	1. What are the recommended teaching methods? 2. How many sessions should be delivered, for how long, and over what period of time? 3. What setting will best support learning?
Who	• Characteristics of who should ideally deliver the program	1. What skills and experiences will help facilitators deliver essential content? 2. What other characteristics (e.g., credibility) will help a facilitator successfully deliver program?



3: Assess the need for adaptation

- Identify & categorize mismatches
  - Program goals/objectives
  - Characteristics of target population
  - Characteristics of implementing agency
  - Characteristics of community
- In consultation with developer & using best-practice guidelines, decide if adaptation is necessary

The **CDC's SELECT, ADAPT, EVALUATE!** offers tools for how to select and adapt an EBP to fit your community. https://www.cdc.gov/violence-prevention/media/pdf/resources-for-action/adaptationguidance.pdf

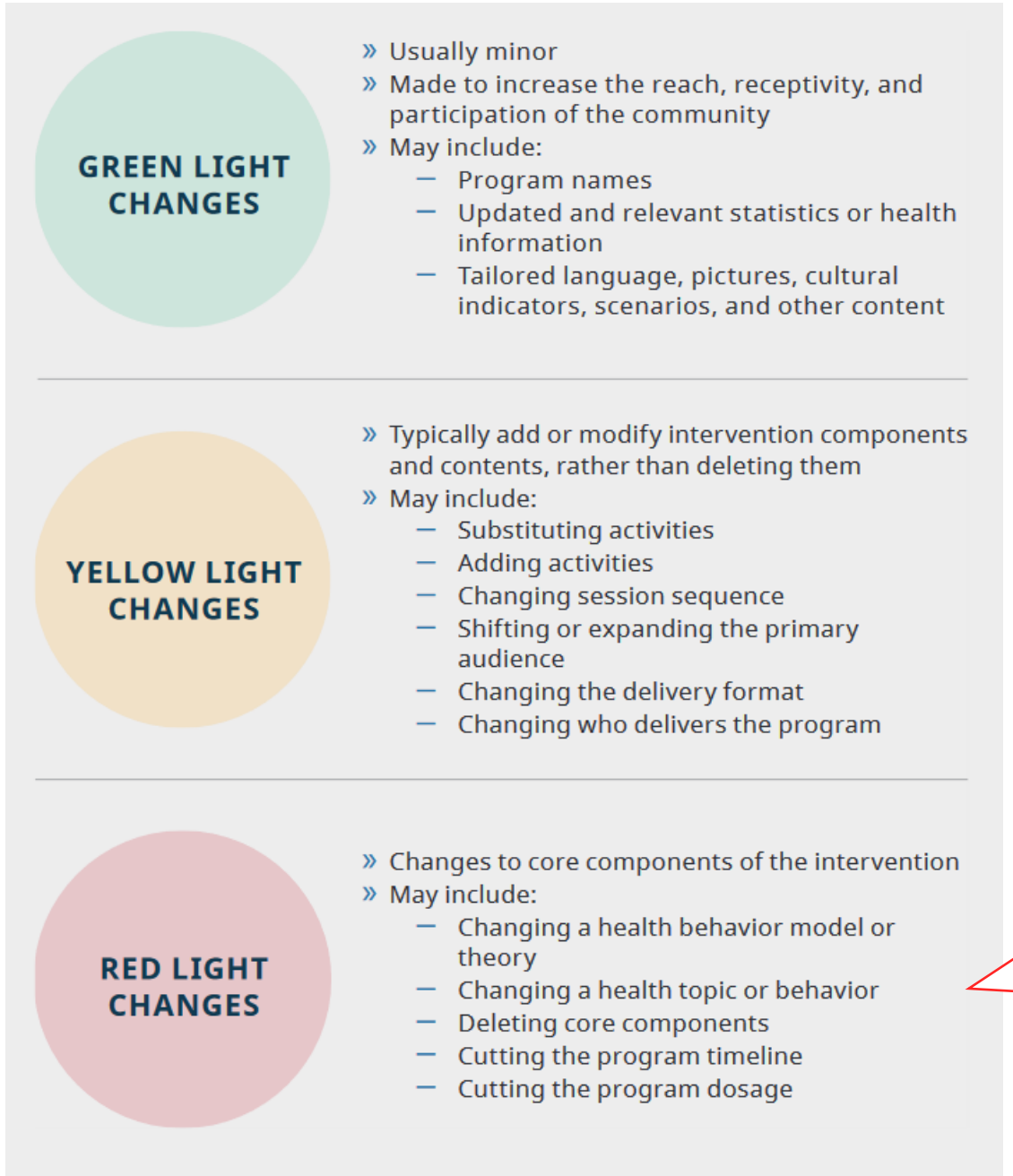


4: Adapt the program using best practices

- If needed, make adaptations in consultation with program developer/trainer
- Acceptable ('green light') vs. risky ('red light') adaptations
- Stay true to duration, intensity, and key elements of the program

The **CDC's SELECT, ADAPT, EVALUATE!** offers guidance on "green light" and "red light" adaptations. https://www.cdc.gov/violence-prevention/media/pdf/resources-for-action/adaptationguidance.pdf

The **MADI Decision-Making Guide** offers questions to consider when making adaptation decisions. https://doi.org/10.1186/s13012-020-01021-y



Proceed with minor adaptations to improve fit for your community, setting, target population.

Proceed with caution if adaptations do not interfere with program theory/core components.

Unacceptable adaptations can come from the developers themselves, which means that providers and implementation teams must be vigilant and understand the theory of change for their program before adopting new versions of programs, even if they come from trusted sources.

Implementation Science At A Glance: A Guide for Cancer Control Practitioners: https://thecenterforimplementation.com/toolbox/nci-implementation-science-at-a-glance

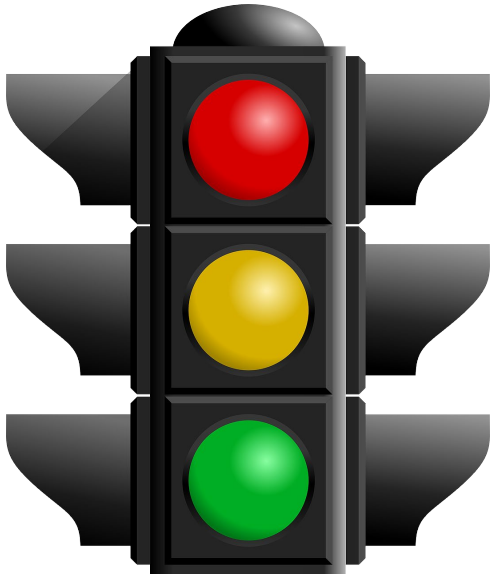
The **CDC's SELECT, ADAPT, EVALUATE!** offers guidance on "green light" and "red light" adaptations. https://vetoviolence.cdc.gov/apps/adaptation-guidance/

What

- Knowledge, skills, and messages delivered through program activities

The essential element: The session should increase understanding that drug use affects adolescent and young adult brain development.

Possible adaptation: Implementer changes a brief lecture about adolescent drug use and brain development into a group conversation.



Is this a green light or red light adaptation?

This may be **red light** if…participants talk over one another and key messages and activities are contradicted.

This may be **green light** if…key messages and activities about adolescent drug use and brain development are delivered and discussion is well managed.

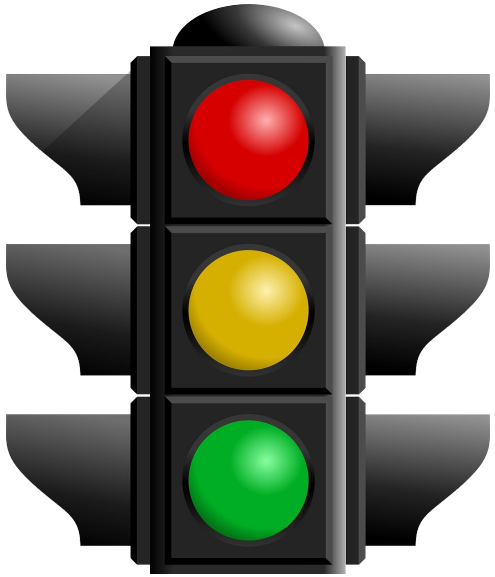
The **CDC's SELECT, ADAPT, EVALUATE!** offers guidance on "green light" and "red light" adaptations. https://vetoviolence.cdc.gov/apps/adaptation-guidance/

How

- How it should be delivered
- Instructional methods, setting, timing

The essential element: Each session should be delivered for 60 minutes.

Possible adaptation: To develop rapport with participants, the implementer delivers for 90 minutes.



Is this a green light or red light adaptation?

This may be **red light** if…Participants express disinterest and discomfort.

This may be **green light** if…Participants are engaged in activities and become more comfortable with implementer.

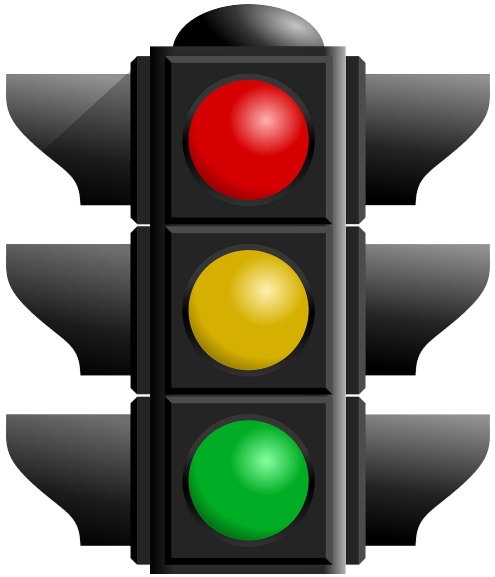
The **CDC's SELECT, ADAPT, EVALUATE!** offers guidance on "green light" and "red light" adaptations. https://vetoviolence.cdc.gov/apps/adaptation-guidance/

Who

- Characteristics of who should ideally deliver the program

The essential element: The implementer should be at ease discussing content and facilitating discussion.

Possible adaptation: A substitute delivers a session.



Is this a green light or red light adaptation?

This may be **red light** if…The substitute does not believe in the key messages of the session and reads the curriculum verbatim.

This may be **green light** if…The substitute understands and buys into the key messages and delivers them in an engaging manner.



5: Document, monitor, & improve

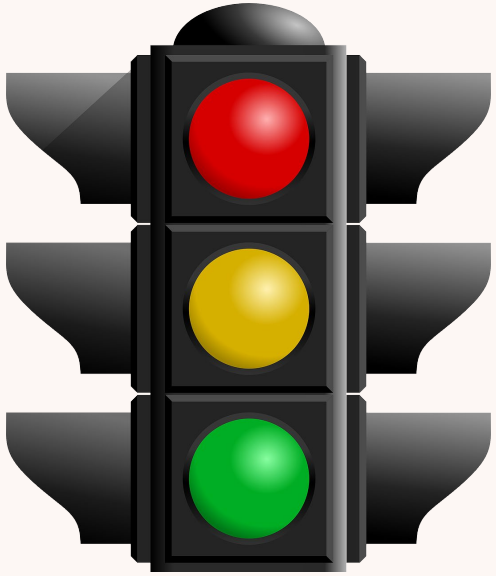
- Document and discuss progress regularly
  - Fidelity
  - Adaptations
  - Participant engagement
  - Participant outcomes
- Use implementation monitoring tools
- Stay up to date on program revisions

The **CDC's SELECT, ADAPT, EVALUATE!** offers tools for tracking and evaluating adaptations.
https://vetoviolence.cdc.gov/apps/adaptation-guidance/

The **Active Implementation Hub** offers tools for developing improvement cycle processes.
https://implementation.fpg.unc.edu/implementation-practice/improvement-cycles/

Case Study: Adapting the Good Behavior Game

- Review the case study with your tablemates.
- Discuss each adaptation and determine if each is an example of a green, yellow, or right light adaptation.
- We will also review and discuss as a large group.



#1: "Let's Make the Examples More Relevant"

- **Is this green, yellow, or red-light adaptation?**

- **Why?** The adaptation is an example of a **green light adaptation** because it is a relatively minor change and is intended to improve students' receptivity and engagement. It changes how the content is represented, rather than changing the GBG core components.

#2: "We Don't Have Enough Time"

- **Is this green, yellow, or red-light adaptation?**

- **Why?** The adaptation is an example of a **red light adaptation** because the proposed change substantially reduces the dosage and timeline of the intervention, which alters GBG's core components.

#3: "Let's Change How the Game Works"

- **Is this green, yellow, or red-light adaptation?**

- **Why?** The adaptation is an example of a **yellow light adaptation** because changes like substituting activities, adding activities, changing the delivery format, and changing who delivers the program may improve fit, but they should be approached cautiously because they could affect how GBG produces its intended outcomes.

Debrief & Closing

What is the most valuable thing you learned today?



THINK



PAIR



SHARE

Sources for Additional Support

- Join Community of Practice with Center for CTC staff on November 16th (10am) or December 14th (10am)
  - See Athena Form Calendar for details: https://theathenaforum.org/training/calendar

- If you haven't already, join the Northwest PTTC email list for upcoming training opportunities. They also have recorded webinars and other tools available on their website.
  - https://pttcnetwork.org/center/northwest-pttc/

Objectives



Apply concepts of effective implementation using the Implementation Stages Planning Tool.



Engage with peers to identify solutions to common implementation barriers.



Explore tools and resources that support effective implementation to achieve program outcomes.

We value your feedback! Let us know how we did by completing this brief survey.

Scan the QR code and enter your responses.



https://www.surveymonkey.com/r/97998B7

Links to Tools & Resources

- DBHR Identifying Adaptations: A Tool for Prevention Providers: https://theathenaforum.org/sites/default/files/2025-09/Identifying Adaptations_ A Tool for Prevention Providers FINAL_0.pdf
- Active Implementation Hub: https://implementation.fpg.unc.edu/implementation-practice/
- Implementation Stages: https://implementation.fpg.unc.edu/implementation-practice/stages/
- Implementation Teams: https://implementation.fpg.unc.edu/implementation-practice/teams/
- Implementation Stages Planning Tool: https://implementation.fpg.unc.edu/wp-content/uploads/Implementation-Stages-Planning-Tool.v9-NIRN-only-Fillable_060126.pdf
- NIRN Hexagon Tool: https://implementation.fpg.unc.edu/resource/the-hexagon-an-exploration-tool/
- CDC's Select, Adapt, Evaluate: https://vetoviolence.cdc.gov/apps/violence-prevention-practice/adaptation/
- DBHR Adaptation Tool: https://theathenaforum.org/sites/default/files/2025-09/Identifying%20Adaptations_%20A%20Tool%20for%20Prevention%20Providers%20FINAL_0.pdf
- University of Kansas's Community Toolbox: http://ctb.ku.edu/en
- CDC Worksheet 'estimating essential elements' of violence prevention programs: https://www.cdc.gov/violence-prevention/media/pdf/resources-for-action/adaptationguidance.pdf
- MADI Decision-Making Guide: https://doi.org/10.1186/s13012-020-01021-y
- Implementation Science At A Glance: A Guide for Cancer Control Practitioners: https://thecenterforimplementation.com/toolbox/nci-implementation-science-at-a-glance
- Implementation Improvement Cycles: https://implementation.fpg.unc.edu/implementation-practice/improvement-cycles/
- Northwest Prevention Technology Transfer Center (NW PTTC): https://pttcnetwork.org/center/northwest-pttc/