



USAID
FROM THE AMERICAN PEOPLE

Key Reflections – Integration of PSBI into IMCI

Troy A. Jacobs, MD, MPH, FAAP
August 28, 2019

Key Points – Implementation Science Capacity Development with PSBI

- Some implementation issues discussed are familiar packages and platforms but in changed context; Addressing increasing system complexity while isolated elements may seem more streamlined (see H. Nsona & O Lincetto ppts)
 - FAMILIAR: IMNCI/IMCI, EPI (streamlining example – 13 danger signs in 1997 to 7 danger signs in 2019)
 - CHANGED/NEW: evolving referral networks & systems; HIV; newborn including PSBI integration! Addressing increasing system complexity while parts of system may be getting simpler
 - Appreciation of “complexity-aware” methods used in implementation research for real-world problem solving
- “Build capacity of health staff” (see O Lincetto ppt) includes technical, management, learning system, and research domains:
 - Adopting “implementation research” or “implementation science” mindset –not just an academic pursuit but key for program managers, health workers to adopt (IRDS Handbook, WHO Alliance & HRP training materials, others)
 - Helps with systematic, evidence-based problem identification and problem solving of local problems
 - Merging pre-service and in-service training;
 - Supporting needs of career pathways of health staff (that may include some transitioning to roles in advocacy, management, leadership, policy, academia)