



Implementation Science and Provision of Better Health Care in Latin America: Challenges and Opportunities

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Implementation science plays a key role in effectively translating scientific knowledge into tangible and sustainable evidence-based health practices. By making it possible to adapt strategies and interventions to cultural, social, and economic complexities, studies conducted in this field offer insights that help optimize resource use, improve the quality of health care, and promote equity. In a context of rapid demographic, epidemiological, and technological changes, implementation science offers methods and strategies to address the growing needs of health programs and systems.

However, the capacity for the development of implementation-informed studies and interventions varies immensely between the different countries and regions of the globe. Implementation science emerged in the global north, where a robust infrastructure of research, funding and resources enabled its development. However, methods and strategies formulated in these settings might not be suitable for low and middle-income countries where there are substantial cultural, socio-economic, and structural disparities.

In this context, learning from implementation science-informed programs in low and middle-income countries is crucial to addressing health inequalities and ensuring that interventions are effective and sustainable in resource-limited settings. This requires a sensitive approach to local realities and considering factors such as resource availability, infrastructure and health.

In this special issue, we present implementation-informed studies developed in Latin America to stimulate discussion about the particularities and opportunities for this type of research in

the global south. The special issue includes original articles and commentaries addressing implementation in different service sectors in several nations. In addition, initiatives aimed at improving the skills of professionals in the implementation of evidence are addressed, along with reflections and guidelines for the development of this field in Latin America.

Specifically, the Breastfeeding and Feeding Brazil Strategy (EAAB) is presented in two articles that discuss the barriers and facilitators for implementation of the program at the national level, and the strategies used to enable its implementation. The special issue also includes an evaluation of the Triple P-Positive Parenting Program in Chile that examined six implementation outcomes (acceptability, adequacy, adoption, feasibility, fidelity and sustainability), as well as implementation of a Task-Shifting program for individuals with psychosis in Rio de Janeiro, Brazil, and in Santiago, Chile. Additionally, the special issue presents an article discussing efforts to promote evidence-based practices through training of nurses in Latin America's largest hospital complex which is located in Brazil.

Two commentaries offer important reflections and insights for the advancement of the field in Latin America. One reflects on the affinities between implementation science and the field of Collective Health in Brazil while assessing the usefulness of two prominent frameworks that have been translated and adapted for the country (CFIR and RE-AIM). The second suggests actions to strengthen Latin American initiatives including the need for collaboration between researchers from the global north and south to boost innovation, capacity building and equity to achieve sustainable development goals.

International collaboration, the sharing of best practices, and the development of culturally sensitive knowledge are ways to ensure that the benefits of implementation science reach all populations, regardless of their location, economy, infrastructure or capacity. In doing so, we can create more adaptive, effective and equitable health systems around the world. The wealth of experiences in this special issue reflects and contribute to these efforts. We welcome your thoughts and encourage sharing your implementation lessons and experiences in this journal.

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