Themes from 2020 CCIS Action Groups

	Community Participation (CP)	Technology (T)	Context & Equity (CE)	Complex/ Multilevel Interventions (CMI)	Policy (P)	Learning Healthcare Systems (LHCS)	Study Designs (SD)	Global Health (GH)
Theme 1	Training and capacity building experiences for implementatio n scientists and stakeholders (CP)	generated/reported	Methods and measurement for equity in IS (CE, SD)	Article (thought piece) that serves as an introduction to the implementation of multilevel interventions (CMI)	Include more stakeholder engagement with policy makers throughout the dissemination and implementation (D&I) research process, especially at the stage of conceptualizing research questions (P, CP)	LHCS is a continuum—a process rather than a destination (LHCS)	Stakeholder engagement: What study designs engage stakeholders in identifying/tailoring strategies/intervention s while maintaining rigor? (SD, CP)	Build capacity (GH)
	Promoting best practices in engaged IS (CP)	implementation	Revisiting theories/framewor ks with an equity lens (CE)	Resources and tools to help researchers conduct studies related to the implementation of multilevel interventions and complex cancer control interventions (CMI)	Increase knowledge and skills about policy research in the D&I field (P)	IS offers tools to facilitate and operationalize LHCS activities. (LHCS)	Adaptation: How do research designs address adaptations of strategies or interventions during the study? (SC)	Demystify dissemination and implementation science (D&IS) (GH)
Theme 3	centering	-	Theory linkages to IS (CE)	Case studies to illustrate best practices for planning and implementing multilevel interventions and complex interventions (CMI)	Provide examples and tools for policy D&I research (P)	There is a need to develop bidirectional communication and true partnerships (LHCS, CP)	Methods/Measures to study equity-based implementation and proximal indicators (SD, CE)	Provide guidance on "context" in diverse settings (GH, CE)

	Community Participation (CP)	Technology (T)	Context & Equity (CE)	Complex/ Multilevel Interventions (CMI)	Policy (P)	Learning Healthcare Systems (LHCS)	Study Designs (SD)	Global Health (GH)
Theme 4	Strategies to address mistrust and history of negative experiences (CP)	Equity/Disparities (T, CE)	Equity/Disparities (T, CE)		Develop a research agenda for policy D&I research (P)		Methods/Measures to study equitable sustainability and proximal indicators (SD, CE)	Engage stakeholders/implement ers/ policy makers/practitioners (GH, CP)
Theme 5	Conflict management and resolution when working with stakeholders (CP)	Telehealth (T)	Community engagement approaches (CE CP)		Enhance the understanding of the roles of policy makers at different levels (e.g., elected, administrative, "street-level bureaucrats" who implement policy) among D&I researchers (P)		Role of team science in developing and applying equity based IS designs (SD, CP, CE)	Identify research needs related to technology- driven strategies for D&IS in LMICs. (GH, T)
Theme 6	Institutionalizin g engaged IS and ensuring that operational supports are in place (e.g., Clinical and Translational Science Awards [CTSA] Community Outreach and Engagement [COE] in NCI Cancer Centers) (CP)	Applying technology components to IS	Values orientation (CE)		Synthesize/Integrate conceptual frameworks from other disciplines (e.g., political science, sociology) to inform policy D&I research (P)		Ideas for public goods: (SD)	Identify opportunities to expand D&IS research in LMICs, particularly research on methods for sustaining and scaling evidence-based interventions (EBIs) in LMICs (GH)
Theme 7			Advance adaptation within IS (CE)				Are "usual care" comparisons acceptable from an	

	Community Participation (CP)	Technology (T)	Context & Equity (CE)	Complex/ Multilevel Interventions (CMI)	Policy (P)	Learning Healthcare Systems (LHCS)	Study Designs (SD)	Global Health (GH)
							ethical standpoint? (SD)	
Theme 8			How a focus on policy can promote equity (CE, P)				How do quasi- experimental/ observational designs incorporate potential mechanisms and contribute to health inequities and social determinants of health? (SD, CE)	
Theme 9							Types 2 and 3 hybrids: What minimal level of evidence is adequate? (SD)	
Theme 10							Vulnerable populations are disproportionally affected by large-scale social, public health, and economic events. There is conflict with fixed IS designs (SD, CE)	
Theme 11							Identifying potential public goods to help guide the field (and the review process) (SD)	
Theme 12							Collaboration with other groups (SD, CP, T, CE, CMI, P, LHCS, GH)	