**THE CHALLENGE**

Many public health programmes in low- and middle-income countries are “data rich but information poor”: too often, data that is relevant for improving public health is left on the shelf or lies unused in electronic servers.

**THE SORT IT SOLUTION**

The Structured Operational Research and Training Initiative (SORT IT) seeks to make countries “data rich, information rich and action rich,” thereby improving health care delivery and outcomes. SORT IT is a global partnership-based initiative coordinated by TDR, the Special Programme for Research and Training in Tropical Diseases, and implemented with partners.

Participants conduct operational research on various topics such as multidrug-resistant tuberculosis, malaria, HIV/AIDS, neglected tropical diseases, maternal and child health, outbreaks and emergencies, antimicrobial resistance and non-communicable diseases. Scaled up to 92 countries over 8 years (with approximately 900 participants), SORT IT has proven to be adaptable to various geographic contexts, thematic areas and research methodologies.

**THE SORT IT APPROACH**

SORT IT targets implementers and front-line workers such as doctors, nurses, paramedical officers, and data analysts, often with little or no prior research experience. The approach combines research training with research implementation. Participants are supported with hands-on mentorship provided by experienced mentors.

The SORT IT training cycle runs over 10 to 12 months and is comprised of four modules:

- **Module 1**: Protocol writing
- **Module 2**: Quality assured data capture and analysis
- **Module 3**: Manuscript writing for publication
- **Module 4**: Evidence-informed decision making

For more information on SORT IT, please visit: https://www.who.int/tdr/capacity/strengthening/sort/en/
Or contact Dr Rony Zachariah at TDR (zachariahr@who.int)
**EXAMPLES OF IMPACT**

69% of SORT IT publications have shown an impact on policy and practice. For example:

**INFLUENCE OF THE 2014-2015 EBOLA OUTBREAK ON THE VACCINATION OF CHILDREN IN RURAL GUINEA**


**STUDY FINDING**
- Vaccine administration declined significantly during the outbreak, and the decline persisted into the post-Ebola period. (Figure below.)

**IMPACT**
- Ministry of Health conducted mass community awareness and education campaigns on vaccination.
- A safety net of vaccine stocks was introduced as a stop-gap measure for future outbreaks.

*Figure:* Trends in vaccine administration for children before, during and after the 2014-2015 Ebola outbreak, Macenta district, Guinea.

**ENGAGING PEOPLE WHO INJECT DRUGS AND THEIR PEERS IN HIV TESTING AND HARM REDUCTION IN UKRAINE: DO THEY MAKE A DIFFERENCE?**


**STUDY FINDING**
- HIV testing increased by over 300% (from 164,417 to 639,685) and significantly more HIV-positive individuals were identified and referred for harm-reduction services.

**IMPACT**
- Active engagement of people who inject drugs and their peers makes a real difference in improving access to HIV prevention and harm reduction.

**MINISTRIES OF HEALTH AND OTHER PARTNERS**

In all 92 participating countries, we collaborate with ministries of health and disease control programmes.

**SORT IT PERFORMANCE INDICATORS**

<table>
<thead>
<tr>
<th>Performance Indicator</th>
<th>Target</th>
<th>Progress as of July 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants’ satisfaction scores</td>
<td>80%</td>
<td>100%</td>
</tr>
<tr>
<td>Participants completing all course milestones</td>
<td>80%</td>
<td>93%</td>
</tr>
<tr>
<td>Papers published within 18 months of submission</td>
<td>80%</td>
<td>92%</td>
</tr>
<tr>
<td>Papers assessed for impact on policy and practice</td>
<td>80%</td>
<td>90%</td>
</tr>
</tbody>
</table>

**TDR is co-sponsored by the following organizations**