The global health community recognizes that strong, resilient health systems are fundamental to achieving the Sustainable Development Goals. Yet more than 1 billion people globally cannot access basic health services because these services remain unreachable, unavailable, unaffordable, or of poor quality. Ending maternal and newborn deaths, achieving an AIDS-free generation, and eradicating malaria in our lifetime require that health systems address these fundamental challenges.

Health system strengthening has been at the heart of RTI International’s mission for 60 years. A dynamic blend of innovation, research, and project implementation enables us to foster supportive policies and systems that improve access to, and demand for, quality health services. We prioritize country-owned participatory processes, recognizing that sustainable health outcomes depend on resilient and adaptable local health systems.

Our approach is guided by four interconnected pillars: multi-dimensional, systems-focused problem identification; responsive and participatory problem-solving that targets the root causes of poor performance; continual learning and adapting through testing and iteration; and the setting of context-specific goals that promote country ownership.
Strengthening Local Policies and Systems to Improve Health Outcomes

We build government capacity to design, manage, and deliver high-quality services. RTI works with national and local health leaders and managers to ensure health system interventions respond to the root causes of system challenges, incorporate bottom-up health service planning and budgeting, and build government credibility through social accountability.

In the midst of Nepal’s decentralization process, the Health for Life project (USAID, 2012–2017), works to improve delivery of high-quality family planning and maternal, newborn, and child health (MNCH) services. In addition to supporting the testing and roll-out of national policies, our team supports local-level health officials and committees to create, finance, and implement evidence-based plans that will improve health service quality.

In Luzon, the largest island in the Philippines, the LuzonHealth project (USAID, 2011–2016) aims to improve family health by expanding access to high-quality, integrated family planning, MNCH, and nutrition services. RTI provides technical assistance to the Department of Health—as well as regional and local health offices—to support increased demand for (and supply of) services; enhance supportive policies and guidelines; and strengthen the health workforce through a massive capacity building rollout.

We manage high-impact health service delivery projects at global, regional, and bilateral levels. Recognizing that a strong health system requires the delivery of essential medical supplies, as well as technologies that support local governments, our efforts have improved the quality and delivery of MNCH, family planning, malaria, HIV, and neglected tropical diseases (NTDs) services.

RTI leads ENVISION (USAID, 2011–2019), a global project working to strengthen ministries of health and national NTD programs in 19 countries—in part by increasing the reach of mass treatment campaigns to all people at risk and by strengthening key national systems, such as those for data reporting and management.
Applying Governance Approaches into the Health Sector

Our health governance interventions prioritize country-owned participatory processes, strengthen civil society knowledge and participation, and enhance government transparency and accountability.

We promote collaboration among government, civil society, and the private sector to ensure government responsiveness and to maximize the use of resources. RTI supports health governance interventions in 8 countries under the Health Policy Project and Health Policy Plus projects (USAID/Palladium Group, 2010–2020). Specifically, RTI aligned roles and responsibilities of county and national governments in Kenya; supported government and civil society to work together against the discrimination of people living with HIV and key populations in Ghana; and improved accountability for Family Planning 2020 commitments through an innovative, country-driven tracking mechanism in East Africa.

Through the Nigeria Leadership, Empowerment, Advocacy, and Development (LEAD) project (USAID, 2009–2017), RTI builds partnerships among state and local governments, civil society, and the private sector to improve state and local governance capacity to respond to national health goals. LEAD enhances health budgets and improves human resources for health planning as part of its efforts to improve health outcomes.

We enhance civil society’s role in advocacy and oversight to encourage transparent and effective use of public resources. In Indonesia, the Kinerja Local Governance Service Improvement project (USAID, 2009–2017) supports the national government to expand access to quality health services with an emphasis on MNCH. Interventions empower communities and strengthen complaint mechanisms, particularly by encouraging the district-level use of data to advocate for political, budgetary, and community support for health.

We strengthen the capacity of government and nongovernmental organizations (NGOs) to deliver key services. In Guinea, the Multi-Sectoral Interventions to Advance Democratic Governance (Faisons Ensemble) project (USAID, 2006–2013) strengthened the capacity of health NGOs and health insurance organizations, and supported the ability of more than 100 community health management committees to oversee the operations of community health centers as well as voluntary counseling and testing centers.

Key Impacts

Nigeria, LEAD
Through a participatory budgeting process, the project helped Bauchi and Sokoto become the only two states in Nigeria to allocate 15% of their state budget to health.

Guinea, Faisons Ensemble
Greater involvement by health management committees in Guinea resulted in increased local revenue for health, prevention of theft in the operations of some centers, and greater transparency (e.g. through the posting of fees for health services).

Indonesia, Kinerja
216 new district-level regulations were passed to improve governance and services in the health, education and business sectors.
Pioneering Innovative Technologies and Tools to Maximize Impact

RTI expands the use of cutting-edge information and communication technology (ICT) applications to meet health needs. Our ICT experts ensure technologies—such as mobile phones and open source software—serve transformational purposes on cost-effective and sustainable in-country platforms.

Since 2012, Zanzibar has used an RTI-developed open source software, *Coconut*, to help district-level surveillance officers effectively track and respond to more than 8,000 malaria cases. RTI is adapting this tool to fight other infectious diseases, including Ebola and Zika.

In Indonesia, RTI led the development of an electronic referral system (*SijariEMAS*) that midwives, community health centers, and hospitals use to coordinate care for pregnant women and women in labor. The system was developed as part of the *Expanding Maternal and Neonatal Survival* project (USAID/Jhpiego, 2011–2016).

RTI develops and deploys flexible and adaptable health financing tools for planning and costing health programs.

- **TIPAC**: The *Tool for Integrated Programming and Costing* (TIPAC) is a Microsoft Excel-based tool that enables users to plan activities, estimate costs, determine financial gaps, and monitor activities and expenditures against inputs provided. The TIPAC was endorsed by the World Health Organization as the preferred planning and costing tool for NTD programs.

- **RETA**: The *Resource Estimation Tool for Advocacy* (RETA) supports civil society groups to estimate resources needed to scale up HIV prevention programming for men who have sex with men (MSM) and transgender people.

RTI is a driving force behind technology-based decision support tools that turn data into action. Using predictive analytics, modeling, and data visualization, our data scientists analyze historic and real-time data to predict future events, inform decisions, and classify new observations to guide actions and interventions. For example, the *Maternal and Neonatal Directed Assessment of Technology (MANDATE)* tool includes an interactive, computer-based, quantitative model that compares the potential number of lives saved across the full gamut of maternal and neonatal technologies.

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**Tanzania Vector Control Scale-Up Project**

Coconut played a key role in implementing top-notch malaria surveillance in Zanzibar, ensuring the island’s remarkable achievement of reducing malaria prevalence from more than 35% in 2000 to less than 1% currently.

**Indonesia, Expanding Maternal and Neonatal Survival**

From October 2014 through September 2015, SijariEMAS facilitated more than 33,000 maternal and neonatal referral cases—an increase from 14,774 in the previous year.

**RETA Tool**

The RETA has been used to advocate for increased funding for under-budgeted HIV prevention activities in the Greater Mekong Region and China.

RTI International is an independent, nonprofit research institute dedicated to improving the human condition. Clients rely on us to answer questions that demand an objective and multidisciplinary approach—one that integrates expertise across the social and laboratory sciences, engineering, and international development. We believe in the promise of science, and we are inspired every day to deliver on that promise for the good of people, communities, and businesses around the world. For more information, visit www.rti.org.

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