Health systems 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.

Our approach is guided by three interconnected pillars

- Multi-dimensional, systems-focused problem identification,
- Rapid, iterative implementation with constant stakeholder feedback, and
- Quantifiable measurement of health systems gains to ensure intended impact and country ownership.

Our capabilities

- Strengthening local policies and systems to improve health outcomes,
- Applying governance approaches to the health sector,
- Assessing the health financing landscape to improve the equity, efficiency, and quality of health service delivery, and
- Pioneering innovative technologies and tools to maximize impact.
Strengthening Local Policies, Services, and Systems to Improve Health Outcomes

RTI works with national and local health leaders to ensure health system interventions respond to the root causes of system challenges, incorporate bottom-up health service planning and budgeting, and improve government and citizen relations through social accountability.

Through the ReachHealth project in the Philippines, RTI works to reduce unmet needs for family planning services, decrease teen pregnancy rates, and improve newborn morbidity and mortality by expanding access to quality family planning and MNCH services. We also support the Philippines Department of Health to roll out a universal health care (UHC) package in 33 project sites. Our work builds on the LuzonHealth project, which expanded access to high-quality, integrated family planning, MNCH, and nutrition services in Luzon, the largest island region in the Philippines.

RTI leads Act to End Neglected Tropical Diseases | East, a global project working with ministries of health and national neglected tropical diseases (NTD) programs in 13 countries to control and eliminate neglected tropical diseases. We promote and build capacity for strong health systems that help ensure sustainable NTD programming by strengthening data reporting and management, bolstering NTD government planning, and facilitating advocacy for domestic resource mobilization. This builds on the ENVISION project, which worked in 19 countries and achieved impressive global progress in controlling and eliminating NTDs.

The Nepal Health for Life project improved 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 supported local-level health officials and committees to create, finance, and implement evidence-based plans that improve health service quality.

RTI worked to improve access and quality of care for people with acute cardiovascular disease (CVD) through the HeartRescue Global project. Working with local partners in India, Brazil and China, we trained community residents and healthcare providers how to recognize early signs and symptoms of acute CVD; helped expand access to effective treatments; disseminated quality improvement methods; and developed patient registry data collection systems to track performance and improvement across all sites of care.

Key Impacts

Nepal: Health for Life (H4L)
In communities deemed high-priority by H4L, 92% of health facilities have expanded services and 96% have upgraded quality of services.

Philippines: LuzonHealth
From 2013 to 2016, deliveries attended by a skilled birth attendant increased from 58% to 75%. Individuals receiving family planning services increased from 1.5 million in 2013 to 2.1 million in 2017.

Global: ENVISION
1.4 billion NTD treatments have been provided in countries supported through USAID’s ENVISION project, with more than 214 million people treated over the life of the project. Through the work of many committed stakeholders, more than 208 million people are no longer at risk for lymphatic filariasis and more than 73 million are no longer at risk for trachoma in ENVISION-supported countries.
Applying Governance Approaches into the Health Sector

We promote collaboration between government, civil society, and the private sector to ensure government responsiveness and to maximize the use of resources.

RTI supported health governance interventions in ten countries under the Health Policy Project and the Health Policy Plus Project. Under HP+, we lead the design and implementation of community engagement strategies in Nigeria, reaching over 100,000 community members with health coverage information. We support the roll-out of health sector reform in Guatemala. Past activities include conducting an assessment to identify how to ensure Malawi’s community by-laws support the government’s Sexual and Reproductive Rights Policy; scaling up a country-driven tracking mechanism for Family Planning 2020 commitments in East Africa; aligning roles and responsibilities of county and national governments following decentralization reforms in Kenya; and supporting collaborative governance and strengthening quality of care to fight discrimination of people living with HIV and other key populations in Ghana, Jamaica, and Tanzania.

In Senegal, we strengthen the participation of communities in health service management and the ability of local municipalities to provide services through the Governance for Local Development (GOLD) program. In partnership with the Government of Senegal, including the Ministry of Health and the National Program against Malaria, we build a culture of collaboration and openness among all stakeholders focused on building the capacity of local governments to respond to citizen demands, mobilizing and improving the use of public resources to improve basic health services, and increasing community capacity to advocate for better health services and to participate in managing local health systems services.

Through the Nigeria Leadership, Empowerment, Advocacy, and Development (LEAD) project, RTI built partnerships between state and local governments, civil society, and the private sector to improve state and local governance capacity to respond to national health goals. LEAD enhanced health budgets and improved human resources for health planning as part of its efforts to improve health outcomes.

The Kinerja Local Governance Service Improvement project in Indonesia supported the national government to expand access to quality health services with an emphasis on MNCH. Interventions empowered communities and strengthened complaint mechanisms, particularly by encouraging the district-level use of data to advocate for political, budgetary, and community support for health.

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.

**Indonesia: Kinerja**

216 new district-level regulations were passed to improve governance and services in the health, education, and business sectors.

**Senegal: GOLD**

Support to local government to improve resource mobilization and participatory budgeting and planning has resulted in significant increases in funding for health services. For example, using its own resources, the municipality of Koumpentoum equipped a new surgery block and a held a vaccination campaign.
Assessing the Health Financing Landscape to Improve Health Service Delivery

RTI assesses the health financing landscape to identify trends, gaps, and opportunities to improve the equity, efficiency, and quality of health service delivery and to address financial barriers to health services. We work closely with governmental and other partners to assess the unique factors in a country’s health financing landscape, including analyzing financial barriers to delivering noncommunicable disease (NCD) health services.

In Zambia, the Accountable Governance for Improved Service Delivery (AGIS) project is helping to strengthen public financial management (PFM) in the health and education sectors. RTI supports the Government of Zambia in linking central level PFM reforms to target districts in the Lusaka, Eastern and Muchinga provinces and building capacity of district personnel in core PFM functions such as procurement, internal control, internal audit, and public access to fiscal information.

In Indonesia, the Kinerja Project worked with partner districts to calculate the financial gaps between annual central government funding and the operational expenditures required to meet nationally mandated minimum service standards for health service delivery.

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.

In Ethiopia we support the Ethiopian Federal Ministry of Health (FMOH)'s NTD program to integrate with the national health management information system, helping them build the technology infrastructure required to allow sub-national data entry and access to data to drive programmatic decisions.

Since 2012, Zanzibar has used an RTI-developed open source software, Coconut Surveillance, to conduct malaria surveillance and reactive case management in low prevalence settings, effectively tracking and responding to more than 8,000 malaria cases. RTI is adapting this tool to fight other infectious diseases, including Ebola and Zika.

Key Impacts

Tanzania Vector Control Scale-Up Project
The RTI-developed Coconut Surveillance tool helped ensure Zanzibar’s remarkable achievement of reducing malaria prevalence from more than 35% in 2000 to less than 1% currently.

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

The Maternal and Neonatal Directed Assessment of Technology (MANDATE) tool is an interactive, computer-based, quantitative model that helps investors, donors, and researchers estimate the impact of technology development on maternal, fetal, and neonatal mortality.

We are adapting MANDATE to deliver a model for family planning in the Philippines, which helps government and local partners prioritize and cost family planning interventions.

Select Publications


