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Health Systems Strengthening

Partner with us

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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.
- 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.
- Pioneering innovative technologies and tools to maximize impact.



Photo: Patrick Adams

Key Impacts

Senegal: USAID Owod

In one year alone, 458 advanced integrated strategies were implemented, making it possible to offer 3,943 prenatal consultations and provide 2,638 pregnant women with iron/folic acid.

Philippines: ReachHealth

Enabled 433 healthcare facilities to access public health insurance financing by facilitating their accreditation as family planning and maternity care providers.

Global: Neglected Tropical Diseases Programs

15+ years' experience supporting governments to control and eliminate NTDs. In RTI-supported countries 2.2 billion treatments have been delivered, resulting in 295 million people no longer at risk for lymphatic filariasis, 150 million people no longer at risk for trachoma, and 14 million people no longer at risk for onchocerciasis.

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 USAID's **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 prior RTI-led **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 USAID's **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 **USAID Owod** project supports the Government of Senegal to improve health outcomes for women and children by addressing the key drivers of maternal, neonatal, and child morbidity and mortality in five priority regions. USAID Owod strengthens the capacity and commitment of Senegal's health system at the district and regional levels to provide improved malaria; reproductive, maternal, newborn, child, and adolescent health; nutrition; and water, sanitation, and hygiene (WASH) services by strengthening health systems, improving access to services and quality of care, and increasing community engagement.

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.



Photo: Nelson Gonzales

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 USAID's **Health Policy Project** and the **Health Policy Plus Project**. Under HP+, we led the design and implementation of community engagement strategies in Nigeria, reaching over 100,000 community members with health coverage information. We supported the roll-out of health sector reform in **Guatemala**. We conducted an assessment to identify how to ensure **Malawi's** community by-laws support the government's Sexual and Reproductive Rights Policy; scaled up a country-driven tracking mechanism for Family Planning 2020 commitments in East Africa; aligned roles and responsibilities of county and national governments following decentralization reforms in **Kenya**; and supported 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 strengthened 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 built 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 USAID/Nigeria's **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.

USAID's **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 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.

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)** 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.

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, USAID's **Accountable Governance for Improved Service Delivery (AGIS)** project helped strengthen public financial management (PFM) in the health and education sectors. RTI supported 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 supported 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 subnational 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.

Select Publications

Brinkerhoff, D. W., et al. (2019). Stewardship and health systems strengthening: An overview. *Public Adm Dev*, 39: 4–10. <https://doi.org/10.1002/pad.1846>

Meier, S., et al. (2018). Developing policy evaluation frameworks for low- and middle-income countries. International Development Working Paper No. 2018-01. RTI International. <https://www.rti.org/publications/id/b6707e2f-8367-471f-b00b-12bf607199e2>

Nugent, R., et al. (2018). Costs and cost-effectiveness of HIV/noncommunicable disease integration in Africa: From theory to practice. *AIDS* 32 (Suppl 1): S83–S92. <https://doi.org/10.1097/QAD.0000000000001884>

Trisolini, M., et al. (2023). Improving the quality of family planning services in the Philippines: Barriers and opportunities. *Int. J. Health Plan.* (Early view): 1–15. <https://doi.org/10.1002/hpm.3683>

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