The International Training and Education Center for Health (I-TECH) partners with host country governments, universities, professional associations, non-governmental organizations, private sector groups, and funding agencies to strengthen local capacity, foster equitable partnerships, and build sustainable health systems. I-TECH follows a partnership model that guides the provision of technical services and technical assistance (TA) toward local ownership and sustainability, creating projects and programs that can be readily transitioned into national systems.

**The I-TECH Approach**

I-TECH takes a holistic, system-wide approach to building individual, local, and health system capacity to ensure sustainable outcomes. We work within existing national health systems, recognizing the multiple factors that affect health systems and those who work within it. We apply this approach to what we do, represented in the outer circles of the model (at right). The boxes in the outer ring represent an enabling environment that includes strong health leadership and governance; information systems that are accurate and accessible; effective and empowered regulatory bodies; and policies, standards, and guidelines that are aligned with innovations. I-TECH provides tailored technical assistance to advocate for, strengthen, and transfer these systems and processes to local governments to assure the success of the health workforce to deliver and improve access to quality health care services. For example, I-TECH provides leadership to the Government of Botswana to update and align cervical cancer guidelines to the World Health Organization (WHO) guidelines and inform the government’s cervical cancer sustainability.

**I-TECH capacity development activities include:**

- Developing and adopting national-level policies and guidelines to support scale-up of successful interventions
- Fostering leadership and management skills development at national and regional levels; I-TECH’s Leadership and Management in Health e-learning course has attracted more than 31,000 enrollees
- Strengthening workforce development by support of on-site and distance-based training, technical assistance, instructional design, advocacy, and policy development
- Creating and institutionalizing continuous quality improvement policies and approaches for effective HIV care and treatment
- Developing and supporting the implementation of national/regional clinical mentoring and supportive supervision standards
I-TECH Case Studies

Botswana’s National Monitoring and Evaluation (M&E) Cadre was introduced as a result of partnership among the CDC, I-TECH, the Botswana MOH, and the Ministry of Local Government. The cadre was recruited from new University of Botswana graduates with a background in demographics or statistics. I-TECH provided graduates with M&E training, mentoring, and distance-based consultation using the I-TECH training framework. The M&E Cadre responsibilities included strengthening data collection, guaranteeing steady and timely reporting and feedback, encouraging a culture of data use and evidence-based planning, and building M&E capability within the health system. The project was fully transitioned to the MOH in 2012, and CDC Botswana noted in a press release that it was “a true example of how a USG funded project can be successfully transitioned.”

Started in 2006, the I-TECH Namibia clinical mentoring program strengthened physician capacity to provide quality HIV care and treatment through concentrated clinical mentoring with experienced HIV physicians. Over the course of a two-year transition, I-TECH successfully transferred the program to the Ministry of Health and Social Services by 2015. The clinical mentoring program has now been integrated into the HIV treatment program in all regions of the country. This is just one of more than a dozen I-TECH clinical mentoring programs that have been adopted by countries in Sub-Saharan Africa, Asia, and the Caribbean Region.

What Makes Transition Viable?

I-TECH has been a PEPFAR implementing partner since 2003 and has transitioned more than 300 programs and products to local ownership to date. “Lessons Learned from Sustained Global Health Investments,” presented by former I-TECH Executive Director Ann Downer at IAS 2018, explored the degree to which six of I-TECH’s investments had been sustained by local partners, as well as the key elements of successful transition. The study concluded that long-term viability should include, in addition to the known elements of successful transition (e.g., stakeholder buy-in and participation), planning for TA and/or short-term emergency funding.

Launch of Independent Organizations Ensures Country Ownership

Since 2018, I-TECH’s offices in India, Haiti, Zimbabwe, Botswana, and the Caribbean Region have transitioned to locally registered, independent organizations. These new, independent offices remain within the I-TECH network as primary partners, continuing to build in-country capacity to respond to changing community and government needs. Together, these indigenous organizations have received more than $32 million in funding.

Roving HIV testers in Zimbabwe.

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