

The Christian Health Association of Lesotho

The Christian Health Association of Lesotho provides 40 per cent of health care in Lesotho and works closely with the government and international donors. Some groundbreaking practice has been developed to retain and motivate health workers and improve the practice environment. Rosinah Lebina, Grace Nchee and Erika Pearl share this experience.

Africa has 11 per cent of the world's population, 24 per cent of the global burden of disease, and only three per cent of the world's health workers. In Lesotho, according to Médecins Sans Frontières for a population of 1.8 million people, there are just 89 doctors (80 per cent of these are foreigners) and only 1,123 nurses. Only six of the 171 health centres in the country have the minimum required staffing. Lesotho and many of its sub-Saharan neighbours are unable to meet the World Health Organization's minimum health care professional requirement of 20 doctors, 100 nurses and 228 health providers per 100,000 people.

Established in 1974, the Christian Health Association of Lesotho (CHAL) has a membership affiliation of six Churches – the Anglican Church of Lesotho, Assemblies of God, the Bible Covenant, Lesotho Evangelical, the Roman Catholic Church, and the Seventh Day Adventist Church. Combined, this faith-based community provides 40 per cent of health care and 57 per cent of health care professional training institutions in the country. However this is not stemming the tide of the human resources for health crisis in Lesotho, since the total number of health care workers required is much more than the country can train annually.

Eighty-one per cent of the Lesotho population lives in the rural areas. In Lesotho, as in many sub-Saharan African countries, the faith-based community provides a significant portion of health care to the rural populations, since as with many other countries, government employees are reluctant to live and work in rural areas.

To address the health care worker issues, the government and CHAL have developed partnership programmes. In March 2003, CHAL began receiving funding through the Ministry of Health and Social Welfare's (MoHSW) Supplementary Emergency Funding Facility. Four years later, in 2007, a Memorandum of Understanding was signed between the Government of Lesotho and CHAL eliminating the salary discrepancies between health care professionals who worked for the Government and CHAL. This helped to lessen the incentive for individuals to leave the faith-based health care facilities in favour of government health care facilities.

In addition, the Lesotho HIV and AIDS Directorate occasionally provides monetary incentives to all health care professionals.

Lesotho has a significant number of nurses from Kenya providing health care. These nurses are helping alleviate the workload of the Lesotho nurses at the health centres. The Clinton Foundation is paying the salaries of these individuals and it is also funding the mountain allowance to all nurses working in mountainous areas. This assistance contributes to the retention of nurses in hard-to-reach rural areas.

CHAL and its affiliated facilities have participated in IntraHealth International sponsored workshops focusing on the development of policies and guidelines for human resources (HR) as well as curriculum review for its four health care professional training schools.

Many facilities do not have a Human Resource Information System (HRIS) which hampers the collection of HR information for better advocacy. Also, many facilities do not have HR Officers or HR policies and guidelines for their staff. CHAL has established a human resources office which is responsible for guiding the development of policies and guidelines related to HR at the national and facility levels. This office works closely with the human resource officers at the affiliated facilities. The CHAL HR Officer is also the organisational representative on the National Human Resources Technical Workshop Group.

Maluti Adventist Hospital is benefiting from the Lesotho Boston Health Alliance (LeBOHA). LeBOHA is providing the hospital with wireless Internet and continuing education for the doctors and nurses at that facility. This is a great example of incentive, motivation, and mentorship. Multiple individuals in the LeBOHA programme – both from Boston and Maluti Adventist Hospital - participated in the development of the Lesotho Nursing Policy and Procedure Manual. Approved by the Lesotho Nursing Council, this ground breaking document was officially launched in August 2009.

CHAL is a recipient of financial support from the Millennium Challenge Corporation (MCC). This support is used to provide continuing education to nurses employed by its affiliated facilities. The Government of Lesotho also receives MCC funding for the continuing education of nurses.

CHAL has been working to improve the conditions for its affiliated members through its relationship with the Government as well as with other partners. They are taking advantage of the learning opportunities and ensuring that the knowledge does not stay at national level, but is implemented at facility level with the ultimate goal of benefitting the clients of the health care facilities.

Although CHAL has made significant strides in improving its HR issues, there is still much to be done, at the national level as well as at facility level. Nationally, CHAL continues to advocate with the Government and MoHSW for maintaining equitable numbers of government and CHAL health care professionals, as well as for facilities' staff to be included on MoHSW-led health care professional training courses. CHAL also needs to work with its affiliated facilities to develop strategic plans.

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