

# The Impact of the Lesotho Health Reform in the Re-structuring of the Village Health Workers Program



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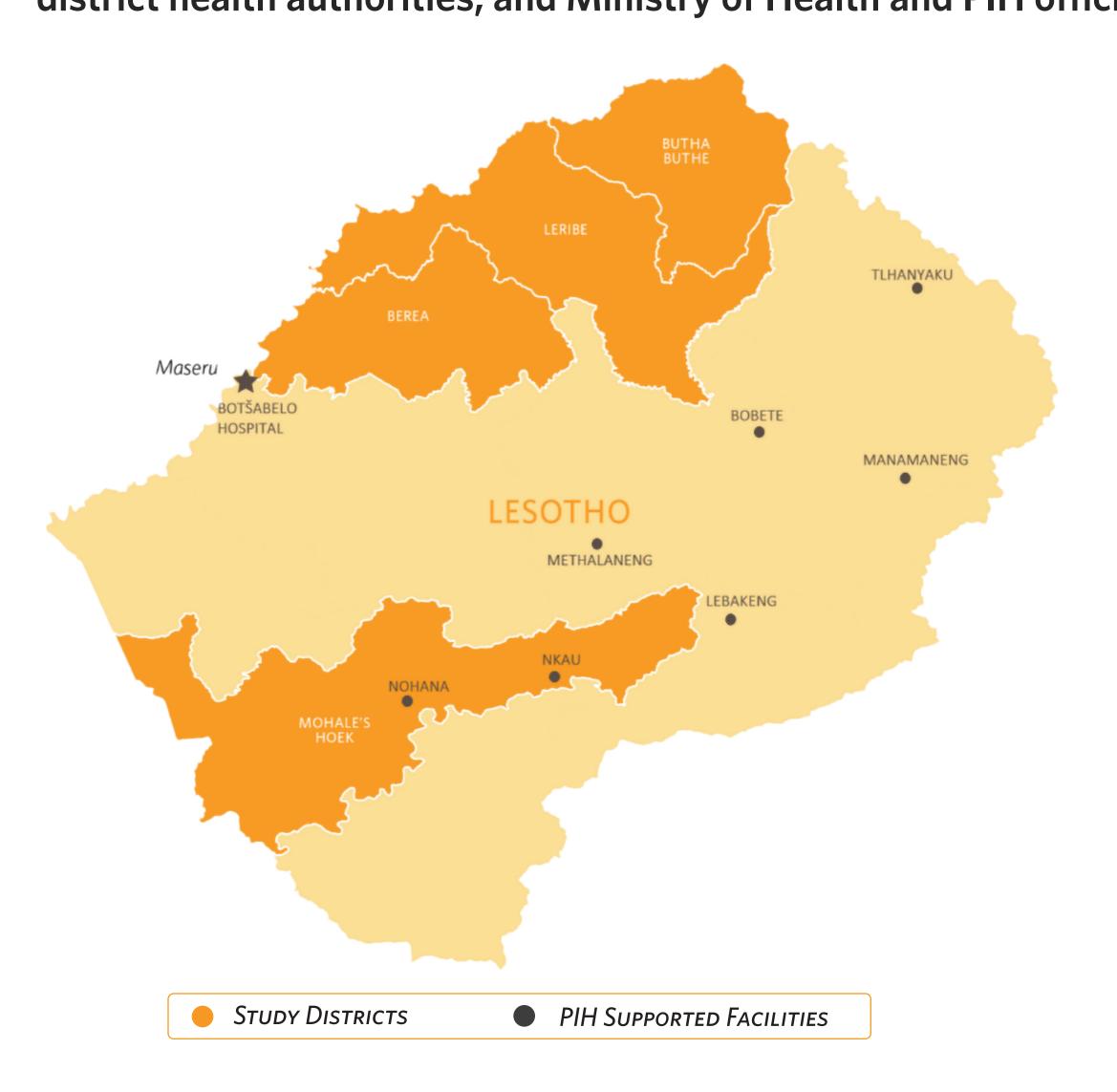
Lesotho Prime Minister office, Maseru,

# BACKGROUND

Community Health Workers locally known as Village Health Workers (VHW) in Lesotho are key members of the primary health workforce, and has been playing a significant role in building primary health systems in many countries and they can fill significant gaps in human resources as low and middle income countries work towards universal health coverage in the era of Sustainable Development Goals (SDGs). The 2014 Lesotho health reform restructured the VHW program to compensate, professionalize, and integrate VHWs into primary care services. We sought to document the ways in which the VHW program changed as a result of the health reform and the perceived impact of those changes.

## METHODS

In 2018, we conducted a qualitative research study with an inductive content analysis approach in the four pilot health reform districts of Lesotho. We conducted 26 in-depth interviews with health workers practicing in the community and in primary health facilities, as well as district health authorities, and Ministry of Health and PIH officials.



# RESULTS

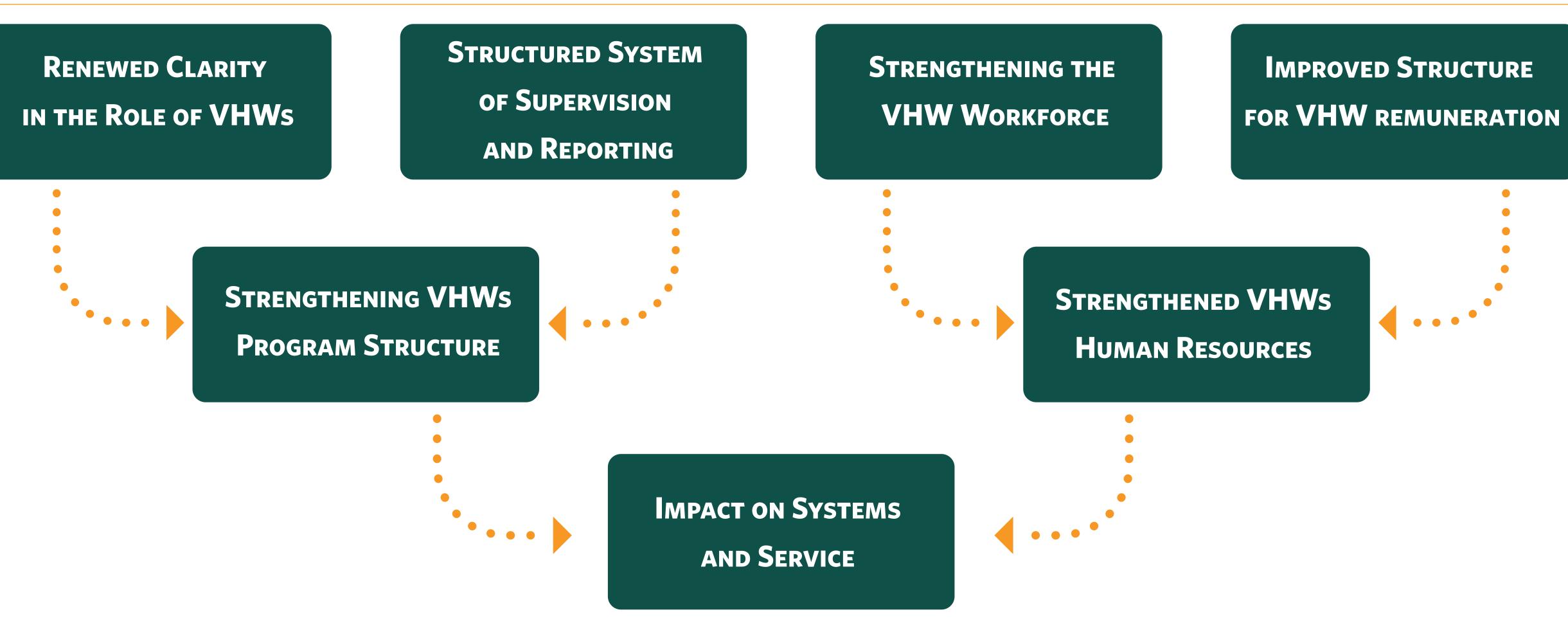
We found that the Lesotho health reform program was observed that it helped to professionalize the VHW program by introducing clear roles and responsibilities, regular monitoring, and supervision. The initiation of performance-based payment of VHWs and regular monitoring and reporting was thought contribute to overall improvement; in performance, strengthened links between communities and facilities, and promoted uptake of services.

#### THEMATIC CATEGORIES WITH QUOTES

### THEMATIC CATEGORY 1: STRENGTHENING THE VHW WORKFORCE

#### **ELECTRONIC PAYMENT** PERFORMANCE BASED INCENTIVES **UPDATE VHWS ROSTER INCREASED COVERAGE DELIVERY SYSTEM** In the old village health worker model that we The incentive which was tracking some indicators, because their They started by dividing VHWs into HIV/TB Yeah, like I said, initially, we were reports are based on the indicators in TB and HIV and maternal had, there were some members that were and MMR [maternal mortality reduction] paying them cash. But then we and child. It depends on what they are reporting, how they are already inactive, but were still being paid by cadres one could see that the division into realized it wasn't safe. This is why now reporting it, now they get their incentive. So the incentive [is] government. Some were even dead, but they these two cadres would help us achieve our we introduced M-Pesa. Partners In performance-based incentive actually is one of the things that were still getting the money. District Health rotation goal which was a Millennial Goal. Health staff member #04 has made it worthwhile. Central Ministry of Health official #15 Management Team member #10 Health center, Nurse #09 THEMATIC CATEGORY 2: STRENGTHENING THE VHWS PROGRAM STRUCTURE **RENEWED CLARITY IN SUPERVISORS PROVIDE COORDINATORS COMPLETE THE** THE ROLE OF VHWS **COMMUNICATION LOOP FROM VILLAGE TO DISTRICT DIRECT OVERSIGHT** The village health workers have clear roles and Particular supervisor will supervise the VHWs in We bring reports to her [the Coordinator] and this makes those villages to make sure that they do... their responsibilities, have a monitoring framework in the nurses jobs much easier because they get the reports activities as expected. They can even do spot checks place, which actually can tell if a village health from the different villages from the coordinator I think to assess whether they are still doing their activities worker is active or not. In the past, we used this is a success because there is no congestion brought as expected, they are ones who take the report from never to have that. Central Ministry of Health about by bringing reports one by one.VHW #08 the VHWs they supervise. Health center, Nurse# 09 official #15 THEMATIC CATEGORY 3: IMPACT ON SYSTEM IMPROVEMENT AND SERVICE UPTAKE VHWs have been introduced in different villages and have brought about a change because sick people are now able to come to the clinic for different services better than they did before. District Health Management Team member #07

## Figure 1 shows a visual representation of our thematic categories that illustrate relationships across our findings.



# INTERPRETATION

The Lesotho Health Reform program was felt to be highly effective in re-structuring the VHW program in Lesotho, suggesting that when VHWs are well-incentivized, monitored, and supervised they can better fulfil their essential role as the backbone of the primary health workforce.

# CONTACT

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