OHAfrica Lesotho Initiative – For Hope, Health and Healing

Hilary Short

At the Ontario Hospital Association’s (OHA) CEO Forum in September of 2003, Stephen Lewis challenged the hospitals of Ontario to twin with hospitals in sub-Saharan Africa – those hit with the HIV/AIDS pandemic and famine. Hearing that call for help from the UN Secretary General’s Special Envoy for HIV/AIDS in Africa struck a chord with many of those in the audience. A number came forward to me that day and volunteered to assist if the OHA would respond. After some time of discussion and reflection, we invited hospitals to attend a preliminary meeting with Mr. Lewis in May of last year. With a response from more than 25 hospitals, we realized that there is a strong groundswell of support in Ontario. There are a great many healthcare professionals who not only care deeply about the challenges facing the African continent, but who have also lived and worked in various African countries. In June, Mr. Lewis contacted us again after returning from the African Kingdom of Lesotho. We learned that Lesotho is a tiny, peaceful country completely surrounded by South Africa. The HIV/AIDS prevalence rate is more than 30% and in a population of 2,000,000, more than 70 die every day from AIDS. Mr. Lewis urged us to start our program there without delay, because during his visit, he had spoken about the opportunities and the government had been extremely responsive. It was at this time, in August 2004, that our mission was launched.

Accompanying me on a fact-finding mission to Lesotho in August 2004 was Joan Lesmond, President of the Registered Nurses Association of Ontario (RNAO) and Chief Nursing Executive & Director of Professional Practice at the HIV/AIDS treatment hospice, Casey House, and Hume Martin, President and CEO of Rouge Valley Health System. While the journey provided us with memories of some truly unforgettable experiences, it also allowed us a very significant opportunity to begin to shape how Ontario hospitals and other healthcare providers could help the government of Lesotho through the sharing of professional expertise.

We were greeted with enormous warmth and gracious hospitality by the Minister of Health and Social Welfare in Lesotho, his senior staff and United Nations aid officials, including the World Health Organization and UNICEF. We met with nurses and medical associations, and spent four days visiting healthcare organizations, including three hospitals and two clinics.

Anyone from the healthcare community in Canada who walked with us through the hospitals would have shared our feelings of shock and profound sadness.

A huge proportion of patients in Lesotho’s hospitals are suffering with HIV/AIDS. Most are also cross-infected with tuberculosis. We saw crowded wards hugely understaffed by Canadian standards. In the largest hospital we visited, Queen Elizabeth in Maseru, which is the capital of the country, there are 100 nurses working in a 400-bed facility. In comparison, a similar-sized hospital here in Canada would typically employ over 1000 full and part-time nurses, in addition to over 100 Registered Practice Nurses. We also saw a nursery containing 35 (mostly very fragile) newborns staffed by one nurse who is there for 12 hours on her own. The lack of staffing is desperate. With the conditions being so poor and the pay so low, nurses and doctors who train in Lesotho are “poached” with frequency, not only by African countries, but also by those in the United Kingdom.

We saw pregnant women having to share beds before giving birth. We saw a woman dying, alone, after a birth. Even the most basic needs are unmet – there are no sheets for the beds. Almost all of the equipment needed for a modern hospital is missing or is broken and cannot be fixed. Laboratory equipment needed for HIV testing is faulty. There is almost nothing by way of radiology equipment. Even the washing machines and dryers are broken and laundry is spread outside on the grass to dry.

Up to this point, there has been no treatment for those suffering from HIV/AIDS in Lesotho. The anti-retroviral therapy that has been available in North America for many years has been, until now, beyond the reach of poor countries like Lesotho. Thanks to assistance from the Clinton Foundation, an organization that is consistently evolving, the government has negotiated purchase of those drugs at an affordable price – $150 per patient per year. This is a critical step in being able to encourage people to come forward for testing and treatment. While in Lesotho, we also visited a new clinic that has been built to begin the first anti-retroviral treatments.

Toward the end of our week-long visit, Hume, Joan and I were invited to a de-briefing and wrap-up meeting. Stephen Lewis, who was present for most of our visit, was clear that we had seen, and knowing the strength of the interest in Ontario, we made a commitment at that meeting to have a small team of doctors, nurses and pharmacists in Lesotho by World AIDS Day on December 1, 2004. At that time we took a leap of faith, but we are all proud and grateful that our commitment has been met, through the significant efforts of so many people.
Shortly after reading the article by Stephanie Nolen in the *Globe and Mail* about the Lesotho mission, Dr. Philip Berger and Jeff Lozon, President and CEO of St. Michael’s Hospital, came forward to say that the hospital would support Dr. Berger, who had volunteered to go to Lesotho for six months. The remainder of the team was assembled following that through the efforts of Dale McMurchy, a healthcare consultant with experience that includes living and working in Lesotho and other parts of Southern Africa. The OHA Board expressed its strong endorsement of these moves, and established a Task Force under the leadership of Hume Martin. The Change Foundation, OHA’s related charitable foundation, provided a grant of $500,000, which enabled a solid launch of the project. We now have an outstanding team on the ground in Lesotho, helping the government to introduce anti-retroviral drugs into the country. This team is composed of Dr. Berger, Dr. Robert Birnbaum, Russell Armstrong, Sister Christa Mary Jones, Sally Simpson, Dr. Jane Wall, Marnie Mitchell and Dale McMurchy.

The initial team will focus on the following objectives during their stay in Lesotho:

- Building partnerships with government, organizations and healthcare providers to support treatment and care initiatives for those living with HIV/AIDS.
- Supporting initiatives that aid improved treatment and care of those living with HIV/AIDS in Africa.
- Helping to transition the integration of HIV/AIDS treatment and care into the community through hospital, clinic and existing networks.
- Assisting the Lesotho government in its efforts to foster antiretroviral therapy.
- Providing capacity building and teaming support to healthcare professionals providing HIV/AIDS treatment and care initiatives.

This is a great first step in responding to Stephen Lewis’s challenge. The overall challenge of the pandemic in Africa is enormous. This project is small and it is focused in one tiny African country, and on one aspect of the pandemic – treatment. However, as Stephen Lewis himself said in a speech at this year’s OHA Convention & Exhibition, this is about saving lives. It is about trying to contain the number of orphaned children.

We know that there are many healthcare professionals who would like to join in this endeavor. We are hoping that through this project, we will enable those who would like to do so to help. After the team that is now on the ground finishes its term, we hope to replace the team members with others to provide a continuous source of support to Lesotho.

One of the sights that was so unforgettable during our visit in August was a blackboard in a school classroom. It listed the dates of the funerals for the parents of students who had died of AIDS. There were three funerals in one week. The Principal of the school was delayed that day because he was attending one of them.

It is our hope that from this first, small step, we can join with others across Canada and find sources of support from both government and the private sector to continue to reach out and join the fight against what is surely the world’s biggest health challenge.

We are pleased to have the support of the *Healthcare Quarterly*, who will be publishing regular reports from Lesotho.

Hilary Short is CEO of the Ontario Hospital Association.