

Population	Percentage of population living on less than \$2 a day	Ranking on the UN Human Development Index	Partner Country Since
2 million	62%	156 out of 182 countries	1975

Partner Country Lesotho

IMPROVING THE QUALITY OF RURAL HEALTH SERVICES



Lesotho made some progress in the areas of gender equality, enrolment in primary education and access to safe drinking water in 2009. However, challenges still remain in the battle against HIV and AIDS and other diseases. High levels of child mortality and maternal mortality continue to give cause for concern.

The impact of the global economic crisis began to be felt in Lesotho in 2009, with a sharp decline in demand for key exports such as textiles and diamonds, which resulted in GDP growth of less than 2% for the year. Loss of revenue from the Southern Africa Customs Union was of particular concern. This income, from which Lesotho benefited through a long standing customs and tax agreement with its southern African neighbours, is expected to decline significantly in the coming years as a result of the downturn.

The Country Strategy Plan 2008-2012 represents a new approach in strengthening Ireland's long-term relationship with the government of Lesotho. Under this plan, Irish Aid will take a "whole of government" perspective, assessing systemic weaknesses affecting the implementation of programmes.

The new approach focuses on four outcome areas: health, education, water and sanitation to promote more effective delivery of much-needed basic services.

As part of a drive to encourage more efficient allocation and use of resources, Irish Aid has supported the Government in the management of the public finances.

This approach has yielded excellent results. Better planning enabled the country to qualify for Education-For-All Fast Track Initiative funding of \$30 million over three years, from 2010.

A joint donor approach to the staffing crisis in the health sector was agreed, while the development of a two-year plan assisted the Ministry of Natural Resources to prepare for European Commission and Irish Aid sector budget support in 2010/11 and 2011/12. The shortage of skilled personnel has been particularly acute in the health sector. Irish Aid agreed to assist the sector's Human Resources Operational Plan for 2009/10, through backing for a HR Management Information System, and the funding of some key strategic positions for the Health Ministry and the Christian Health Association of Lesotho.

As part of its support for the provision of better access to improved HIV and AIDS services, Irish Aid worked in partnership with the Clinton Foundation and the Ministry of Health and Social Welfare to improve rural health services. By the end of 2009, seven of the nine mountain clinics supported through the partnership were operational, while almost every clinic in the country

benefited, either through the provision of nurses, the availability of antiretroviral treatment, or mentoring. Another partnership with Catholic Relief Services on food security complemented the activities being undertaken in some of these mountain clinics.

The main focus in encouraging enhanced Government accountability to citizens, was on rolling out a joint programme with the United Nations Development Programme in support of the Parliament, the Independent Electoral Commission and human rights institutions in Lesotho.

Achieving results:

- **Net enrolment for primary education increased from 60% in 1999 to 80% in 2009, and 500 teachers graduated through the Distance Teacher Education Programme.**
- **The percentage of people with advanced HIV who received antiretroviral treatment increased from 25% in 2008, to 52% in 2009.**
- **Improvements in democratisation and governance have enabled Lesotho to receive an additional 25% of funding from the European Union's Development Fund.**

Case Study

Lesotho

MDG 6 SUPPORT FOR COMBATING HIV AND AIDS



Matšoanelo Khasipe working in her keyhole garden.
Photo: Thomas Geoghan

Lesotho is a rugged, beautiful country. Many people live in remote areas, especially the mountainous highlands, where droughts are common, food supplies insecure and roughly one-quarter of the population is living with HIV and AIDS.

Matšoanelo Khasipe from Nohana in Mohale's Hoek District, lost her husband some years ago as a result of an AIDS-related illness. Since then, the 37-year-old has struggled to keep herself and two daughters, aged five and eleven, happy and healthy.

"My husband was a carpenter. After he died, I tried to take over the business but I was not skilled enough and could not make it work. I had some savings which I used to buy food, but we couldn't eat as much as we did before. I became ill and I was worried for my children."

Fortunately, through a project by Catholic Relief Services (CRS), supported by Irish Aid, Matšoanelo was provided with seeds, fertiliser, homestead farming techniques and a 'keyhole garden' - a specially designed vegetable bed, raised high to ensure easy access, particularly for the elderly and those living with HIV and AIDS. "Now I have vegetables

throughout the year, even in winter. The garden produces so much; I have even been able to sell food to buy other things for the family, like chickens, which I keep in the yard."

Matšoanelo, who is HIV positive, also benefits from the nearby mountain clinic, where she and others can access free medical care, medication and counselling services daily. This is one of the clinics, built through a partnership with the Ministry of Health and Social Welfare, the Clinton Foundation and Irish Aid, to bring high quality medical treatment to vulnerable mountain communities.

Patients must be well nourished to benefit from AIDS antiretroviral treatment, and the CRS projects and partnership clinics are located near each other, so that improved food security and nutrition will assist those living with AIDS to live longer, better lives.

"I'm much happier and healthier now," says Matšoanelo. "As a single parent, I did not know how to cope with raising my children and doing household work, but with the help I get from CRS and the clinic, I feel much stronger - I can live like other people in the village."