

Faith-Based Organizations: Using HR Management to Support Health Workers

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Dr. Samuel Mwenda (Photo courtesy of Christian Health Association of Kenya)

Faith-based organizations play a key role in global health care. According to the [World Health Organization](#), an estimated 30% to 70% of the health infrastructure in Africa is owned by FBOs. They also provide education and training for a significant portion of health workers, especially nurses and midwives.

Christian Health Associations working together

The [Africa Christian Health Associations Platform \(ACHAP\)](#) facilitates communication and advocacy among FBOs that are part of the Christian Health Association network. Its secretariat is hosted by the [Christian Health Association of Kenya](#).

One way [CapacityPlus](#) is helping strengthen the Platform, says Dr. Samuel Mwenda, ACHAP chairman and Christian Health Association of Kenya general secretary, is by “providing technical expertise through a human resource specialist who is available to provide technical support to countries on human resource management policies, guidelines, [and] tools.”

[Doris Mwarey](#) is ACHAP’s regional HR specialist, a position supported by [CapacityPlus](#). She “continues to be very, very helpful for countries that require expertise in human resource management,” says Dr. Mwenda.

What does HR management mean for faith-based organizations?

Mwarey defines HR management as “all the practices and procedures that you put in place to attract, maintain, and develop an employee. It includes all the activities surrounding hiring an employee, how you’re going to keep them there through pay and motivation, and how you develop them in terms of training and building their skills.”



Vaccinating a baby at Friends Kaimosi Hospital, Kenya (Photo by Trevor Snapp)

“Effective HR management is critical to ensure that FBO facilities have adequate numbers of motivated and skilled health workers.”



Doris Mwarey (Photo by Adam Buzzacco)

She adds that “effective HR management is critical to ensure that FBO facilities have adequate numbers of motivated and skilled health workers in each location.”

Dr. Mwenda explains that through assistance from Mwarey, “we got support to go through a very consultative process in identifying some of our challenges in human

resource management. We identified the need to have a comprehensive policy, and we were supported to develop a generic HR management policy, which has several very useful tools – from the process of recruitment, orientation, placement, job description, appraisal, exit management, salary structure, and so on.”

Learning from other countries

ACHAP members are learning from each other. Mwarey gives an example: “The Christian Health Association of Malawi decided that they wanted to see a difference in the way health workers are being managed in their own health facilities through the development of HR management guidelines and policies. They see this as a way of improving the current situation, and are learning from their counterparts in Kenya who had previously undertaken a similar exercise.”

After a week-long visit of “very helpful exchange and learning,” according to Dr. Mwenda, the Malawian

team returned home “feeling confident that they can also do it.”

Mwarey helped the team take the next steps, and the Christian Health Association of Malawi is currently working on HR management policies and guidelines to support its member facilities. This exchange is “a good example of how countries can learn from each other and replicate good human resources for health practices and processes that support health workers in their own country,” she notes.

Adds Dr. Mwenda, “We’re seeing a lot more attention being paid to human resource management.”

Accessing the policy

The Kenya HR management policy manual is available on the Christian Health Association of Kenya’s website at <http://bit.ly/hrm-policy>. Countries and organizations are welcome to adapt it to their own contexts.

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