



Photo: Eric Bond/EGPAF, 2017



**Elizabeth Glaser  
Pediatric AIDS Foundation**  
Fighting for an AIDS-free generation

# THE LESOTHO PROGRAM

Working with Women, Children, and Families to End Pediatric AIDS

## EGPAF IN LESOTHO

HIV is the leading cause of death in Lesotho, affecting nearly a quarter of the population. TB is the nation's second leading cause of death and a dangerous opportunistic infection for people living with HIV. The Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), seeks to end pediatric HIV and AIDS and support delivery of high-quality and comprehensive health services to women, men, and children through implementation of HIV prevention, care, and treatment programs, advocacy of supportive health policies, and operations research to inform better health service delivery. EGPAF began collaborating with Lesotho's Ministry of Health in 2004.

The most recent Lesotho Population-based HIV Impact Assessment showed that Lesotho reached the UNAIDS 90-90-90 targets by 2020, with 90% of the population aware of their HIV status, 97% of those aware of their HIV status on treatment, and 92% of those on treatment virally suppressed.

EGPAF contributed to this accomplishment, using a national-, district-, and site-level approach to deliver HIV services and provide technical assistance to the Ministry of Health. We continue to support the national program with robust technical assistance platforms, we also implement a comprehensive package of HIV and TB services and district and facility levels, and advocate at the national level to inform health policies, and conduct research to inform improved programming.

## KEY PROGRAM ACCOMPLISHMENTS\*\*

### Currently EGPAF-Lesotho supports:



Testing nearly **163,000 individuals for HIV** this year to date



Access to lifesaving antiretroviral therapy among more than **205,000 individuals**, including over **5,000 children**



Prevention of mother-to-child transmission (PMTCT) services of more than **5,500 women per year**



Early Infant testing and diagnostics provision to almost **5,000** HIV-exposed infants within their first 8 weeks of life this year, to date

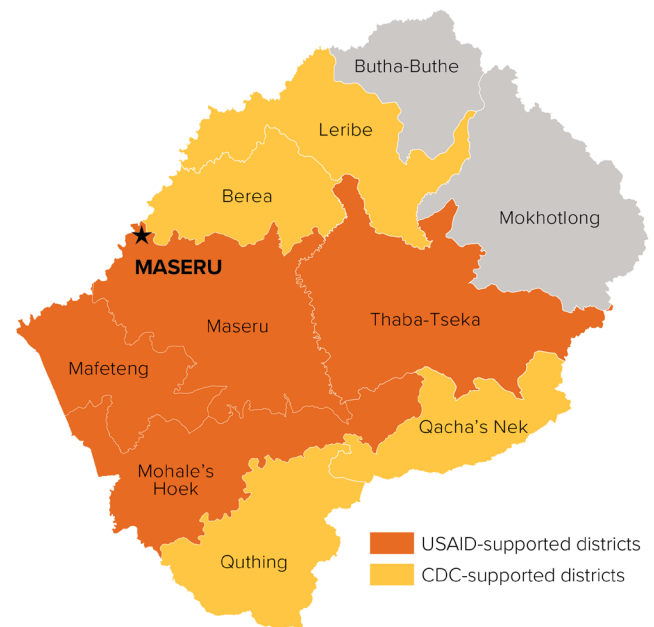
\* Sources: Lesotho Population-based HIV Impact Assessment (2017), Joint United Nations Programme on HIV and AIDS (UNAIDS), Lesotho 2019 HIV and AIDS estimates and projections; and World Bank population estimates (2021)

\*\* Data as of January 2022

## COUNTRY PROFILE\*

Population	2,125,268
HIV prevalence for adults (15-49 years)	21%
Adults (15-49 years of age) living with HIV	280,000
Children (0-14 years) living with HIV	8,700
Women 15 years and older living with HIV	170,000
New annual HIV infections among adults and children	7,700
Antiretroviral treatment (ART) coverage among HIV-positive adults	82%
ART coverage among HIV-positive children	83%
Prevalence of HIV/TB co-infection	72%

## EGPAF-LESOTHO PROGRAM GEOGRAPHIC COVERAGE



USAID-supported districts  
CDC-supported districts

## PROGRAM IMPLEMENTATION

### Implementation of Comprehensive and Differentiated HIV/AIDS Services

Funded by PEPFAR through the U.S. Centers for Disease Control and Prevention (CDC)-funded Accelerating Lesotho's Progress to Epidemic Control (ALPEC) Project (2021-2025) enables EGPAF to directly provide a comprehensive package of HIV/AIDS services in 8 districts, while providing technical assistance to the Ministry of Health and local implementing partners at a national level. The ALPEC package under includes: HIV testing services (including recency testing); PMTCT and early infant HIV diagnosis (EID) and treatment; pediatric and adult ART initiation and retention support; pediatric and adult TB treatment; management of TB/HIV co-infection; sexual and reproductive health care (including cervical cancer screening and treatment); post-gender-based violence clinical care, nutrition assessment, counseling, and support; community engagement; community-clinic linkages; quality improvement; strategic information and evaluation; and health workforce capacity building.

EGPAF-Lesotho has worked with the Ministry of Health to introduce and scale-up differentiated HIV care models, which individualizes patient care and optimizes retention of clients in care, enabling progress towards the UNAIDS 95-95-95 targets. Differentiated approaches currently in use include: multi-month ART scripting and refills; community ART groups; extended clinic hours; community-based ART distribution; and integrated community outreach. EGPAF is also using innovative strategies to reach priority populations traditionally underserved by the health system, such as children, adolescents, migrant populations, and factory workers.

### COVID-19

The MOH, in collaboration with EGPAF and other implementing partners, has put measures in place to enable the country to screen, test, and treat COVID-19 cases. EGPAF participates in the COVID-19 technical working group and supports the MOH task team to ensure development of guidelines, SOPs, and reporting tools. We've staffed up and implemented country border COVID-19 testing, increased access to COVID-19 vaccines, and created greater access to COVID-19 treatment.

### Capacity-Building and Direct Service Delivery

To expand coverage of critical HIV/AIDS services, EGPAF implements a combination of approaches. EGPAF provides direct service delivery, mentorship, and supportive supervision to ensure quality service provision. At district-level, EGPAF provides technical assistance to the Ministry of Health District Health Management Teams. Trainings are provided on comprehensive HIV, TB, and related topics and support provided for data collection, analysis, and use for programmatic decision-making.

EGPAF supports the revision and adaptation of national policies, guidelines, and tools to create an enabling environment for the elimination of pediatric HIV and improved clinical outcomes for all people living with HIV. We also provides significant human resource support, with a variety of staff cadres directly providing a wide range of services and currently have a staff complement of more than 700 employees, including doctors, nurses, counselors, provider-initiated HIV testing and counselling officers, pharmacy staff, and M&E staff across the 8 districts. In 2020, we trained and mentored more than 3,000 health providers and over 400 local partner staff.

### Increasing Identification of HIV-positive and TB-suspected Children and Adolescents and Strengthening Their Access to Treatment

EGPAF has supported scale-up of integrated and innovative HIV testing for infants, children, adolescents and adults to increase HIV and TB case-finding and treatment coverage through ALPEC and other projects. We've also supported integration of rapid and equitable testing of HIV-exposed infants through placement of point-of-care diagnostic machines throughout the country.

EGPAF also scaled up access to and coverage of TB diagnosis and new child-friendly treatments for both active and latent TB under the Unitaid-funded Catalyzing Pediatric TB Innovation (CaP TB) project and we are also scaling up virtual pediatric case management with Gilead funding.

In response to limited availability of second- and third-line pediatric and adolescent treatment options, Johnson & Johnson, EGPAF, and the Partnership for Supply Chain Management, launched New Horizons, which includes a donation program for third-line ART pediatric formulations to increase access to third-line ART for children and adolescents failing second-line treatment. To increase the availability and quality of adolescent-friendly health services, EGPAF has supported establishment of an adolescent health program under ALPEC

that includes recruitment and deployment of trained staff, including pediatricians, nurses, social workers, psychologists, counselors, and youth ambassadors. These staff provide adolescent-friendly services at selected health facilities, while also training other service providers on the provision of adolescent- and youth-friendly services.

## ADVOCACY

By advocating for implementation of evidence-based, globally-recommended policies through the active participation in all national HIV-related technical working groups and advisory committees, EGPAF provides technical assistance and serves as a key partner to Lesotho's Ministry of Health. We played a central role in supporting Lesotho to become the first country in sub-Saharan Africa to implement the World Health Organization's 'Treatment for All' guidelines EGPAF also supported establishment of a modern "see and treat" cervical cancer prevention program in Lesotho, introduced recency testing to map out "hot spots" for HIV infection, and introduced innovative POC viral load monitoring for pregnant and breastfeeding women. EGPAF has a seat in the Lesotho Country Coordination Mechanism of The Global Fund, where we advocate for continued prioritization of pediatric HIV and TB. We advocate also for pediatric ART optimization and have supported the MOH in adopting new formulations of ART for children.

## RESEARCH

EGPAF-Lesotho is dedicated to advancing operations research to strengthen the effectiveness of the global HIV and AIDS response.

### Current Research Activities

POC: EGPAF is now using POC technology to test for recent infection among individuals newly diagnosed with HIV infection. This surveillance of recent infection is helping to inform and target HIV prevention services, and will be scaled up to include additional districts in the next year.

Maternal and Child Health: EGPAF conducted a randomized trial of a facility-based intervention to improve the quality and coordination of care for pregnant and postpartum women and their infants. This "IMPROVE" intervention included creation of multidisciplinary management teams at health facilities, as well as training/support for patient-centered care. The study assessed a number of outcomes including maternal adherence and viral suppression, and repeat testing for HIV.

TB: Lesotho is one of several EGPAF programs participating in the evaluation of the CaP TB project, designed to improve diagnosis and management of pediatric TB.

Care and Treatment for Children and Adolescents: Clinical outcomes are measured in this cohort of children and adolescents on ART; a subset of participants under age 15 contribute data to an assessment of clinical and pharmacovigilance outcomes of new pediatric ART formulations.

### Prior Research Activities

Determining the population-based, 18-24 month HIV-free survival among HIV-exposed children, as well as factors associated with child HIV infection, death, or HIV-free survival through community-based surveys (PLOS One, 2020)

Assessing multi-month community distribution of ART among stable patients (JAIDS, 2020)

Use of POC beyond EID: A retrospective case review in Lesotho (JAIDS, 2020)

Comparison of 6-week PMTCT outcomes for HIV-exposed and HIV-unexposed infants in the era of lifelong ART: Results from an observational prospective cohort study (PLOS ONE 2019)

HIV Incidence among pregnant and postpartum women in a high prevalence setting (PLOS ONE 2018)

Differentiated Care: EGPAF evaluated differentiated HIV care and treatment for people with advanced HIV disease and supported the development of a national advanced HIV disease manual and the roll out and implementation of advanced HIV disease care in all hospitals across the country.

Piloting very EID of HIV in Lesotho: Acceptability and feasibility among mothers, health workers and laboratory personnel (PLOS, 2018)

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