



Photo: Eric Bond/EGPAF, 2017



**Elizabeth Glaser
Pediatric AIDS
Foundation**

THE LESOTHO PROGRAM

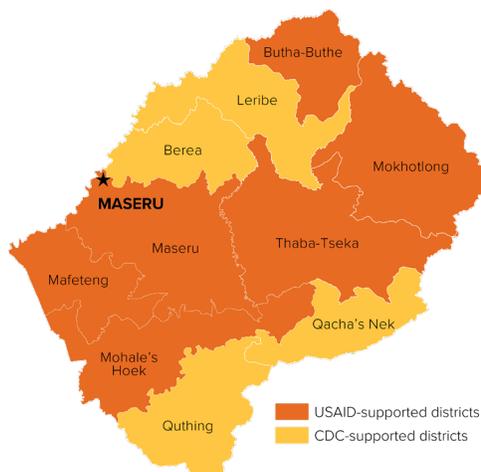
Working with Women, Children, and Families to End Pediatric AIDS

EGPAF IN LESOTHO

HIV is the leading cause of death in Lesotho, affected more than 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. Women are disproportionately affected by HIV/AIDS, with prevalence exceeding those of men in almost every age group under 40 years. The Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), seeks to end pediatric HIV and AIDS and enhance maternal, neonatal, and child health through implementation of HIV prevention, care, and treatment programs, advocacy, and research. EGPAF began collaborating with Lesotho's Ministry of Health in 2004.

Through leadership from the Government of Lesotho and support from the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), Lesotho significantly scaled-up access to comprehensive HIV services across the country. In June 2016, the country adopted World Health Organization guidelines recommending Treatment for All, allowing anyone diagnosed with HIV an opportunity to be immediately initiated on treatment for life. EGPAF has used a national-, district-, and site-level approach to deliver HIV services and provide technical assistance to the Ministry of Health. EGPAF-Lesotho currently supports 175 sites in 10 districts to implement a comprehensive package of TB/HIV services, advocates at the national level to inform health policies, and conducts research to inform improved HIV and AIDS programming.

EGPAF-LESOTHO PROGRAM GEOGRAPHIC COVERAGE



COUNTRY PROFILE*

Population	2,204,000
HIV prevalence for adults (15-49 years)	25.6%
Adults (15-49 years of age) living with HIV	306,000
Children (0-14 years) living with HIV	13,000
Women 15 years and older living with HIV	180,000
New annual HIV infections among adults and children	21,000
Antiretroviral treatment (ART) coverage among HIV-positive adults	53%
ART coverage among HIV-positive children	56%
Prevalence of HIV/TB co-infection	72%

KEY PROGRAM ACCOMPLISHMENTS**

Since 2004, EGPAF-Lesotho has supported:



More than 1,489,000 HIV tests, resulting in the identification of 89,000 HIV-positive individuals



Initiation of more than 209,000 individuals on ART, including more than 10,700 children



Prevention of mother-to-child HIV transmission (PMTCT) services to more than 278,000 women



Provision of HIV services to more than 22,200 new and relapsed TB cases (since October 2014)

* Sources: Lesotho Population-based HIV Impact Assessment (2017), Joint United Nations Programme on HIV and AIDS (UNAIDS), Lesotho 2016 HIV and AIDS estimates and projections; and World Bank population estimates (2016)

** Data as of March 2018

PROGRAM IMPLEMENTATION

Implementation of Comprehensive and Differentiated HIV/AIDS Services

Funded by PEPFAR through the U.S. Agency for International Development (USAID), the Providing Universal Services for HIV/AIDS in Lesotho (PUSH) Project (2016-2021) and the U.S. Centers for Disease Control and Prevention (CDC)-funded Strengthening the TB and AIDS Response in Lesotho (STAR-L) Project (2014-2019) enables EGPAF to provide a comprehensive package of HIV/AIDS services in 10 districts while providing technical assistance to the Ministry of Health. This comprehensive package offered under PUSH and STAR-L includes: HIV 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; reproductive health care; nutrition assessment 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 use of health care resources, enabling effective scale-up of Treatment for All. Differentiated approaches currently in use include: multi-month ART refills; community ART groups; extended clinic hours; community-based ART initiation; and community outreach. EGPAF is also using innovative strategies to reach priority and key populations traditionally underserved by the health system, such as children, adolescents, migrant populations, factory workers, commercial sex workers, men (including men who have sex with men), and prisoners.

Capacity-Building and Direct Service Delivery

To expand coverage of critical HIV/AIDS services, EGPAF implements a combination of capacity-building approaches and direct service delivery. At the health facility level, EGPAF provides direct service delivery, mentorship, and supportive supervision to ensure quality service provision. EGPAF's district staff also provide technical assistance to the Ministry of Health District Health Management Teams. EGPAF supports national-, district-, and site-level trainings on comprehensive HIV, TB, and related topics.

At the national level, EGPAF supports the revision and adaptation of national policies, guidelines, and tools to create an enabling environment for the elimination of pediatric HIV. EGPAF also provides significant human resource support, with a variety of staff cadres directly providing a wide range of services. EGPAF has hired, trained, and mentored more than 700 medical doctors, nurses, counselors, HIV testing officers, pharmacists and pharmacy technicians, nutritionists, program performance improvement officers, strategic information and evaluation officers, and records assistants across 10 districts.

In addition, the Strengthening High Impact Interventions for an AIDS-Free Generation (AIDSFree) Project, a collaboration between multiple international HIV/AIDS agencies, works in Lesotho to build the technical and leadership capacity of Lesotho civil society organizations to improve access to, and quality of, PMTCT, HIV service delivery, and adherence and retention support for HIV-positive mothers, their infants, and their families.

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 services for infants, children, and adolescents to increase HIV and TB case finding and treatment coverage through PUSH, STAR-L, and several other projects.

Through Unitaid funding, EGPAF-Lesotho is integrating rapid, site-level point-of-care (POC) EID technology to expand affordable, effective, and equitable testing of HIV-exposed infants in Lesotho (2015-2019). EGPAF is also scaling-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 (2017-2021), which was launched in Lesotho in 2018.

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 darunavir/etravirine donation program 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 PUSH and STAR-L that includes recruitment and deployment of staff trained in adolescent care, including pediatricians, nurses, social workers, psychologists, counselors, and youth ambassadors. These staff are providing adolescent-friendly services at selected health facilities across the country.

ADVOCACY

EGPAF works hand-in-hand with Lesotho's Ministry of Health to develop informed policies supporting all persons affected by HIV. 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. EGPAF 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, also advocating for scale-up of viral load monitoring and differentiated service delivery models. With funding from AIDSFree, EGPAF is also supporting local civil society organizations to increase their advocacy role and encourage demand creation for services.

RESEARCH

Current Research Activities

EGPAF-Lesotho is dedicated to advancing operations research to strengthen the effectiveness of the global HIV and AIDS response. EGPAF-Lesotho's ongoing research activities include:

- Evaluating the effectiveness of Option B+ by measuring sero-incidence, HIV transmission, and HIV-free survival rates among cohorts of HIV-negative and HIV-positive pregnant women and infants
- Evaluating programmatic efforts and service delivery outcomes for HIV-infected infants, following the introduction of POC EID testing
- Assessing community-focused interventions to increase service uptake and retention among a cohort of HIV-positive and HIV-negative women in pregnancy through 24 months postpartum
- Evaluating differentiated HIV care and treatment for people with advanced HIV disease
- Evaluating pre-exposure prophylaxis among sero-discordant couples
- Assessing food security and nutritional status of people living with HIV

Prior Research Conducted

- 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 (manuscript in submission)
- Piloting very EID of HIV in Lesotho: Acceptability and feasibility among mothers, health workers and laboratory personnel (PLOS, 2018)
- Accessing very EID turnaround times: Findings from a birth testing pilot in Lesotho (AIDS Research and Treatment, 2017)
- Towards getting more HIV positive infants on life-saving treatment; a review of the early infant diagnosis system, results and outcomes in selected sites in Lesotho (PLOS, 2017)

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