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

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

EGPAF IN LESOTHO

COUNTRY PROFILE*

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

KEY PROGRAM ACCOMPLISHMENTS**

Since 2004, EGPAF-Lesotho has supported:

- More than 1489,000 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)


** Data as of March 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.

**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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