

LESOTHO

Report prepared by the Joint UN Team on AIDS

PROGRESS TOWARDS THE FAST-TRACK TARGETS

COUNTRY PRIORITIES/ TARGETS BY END OF 2021	STATUS	RESULTS, END OF 2020
By 2021, Lesotho attained 90-95-90 in the test and treat cascade.	ACHIEVED	Lesotho attained 90-97-92 for the test and treat cascade (LePHIA, 2020).
By 2021, 90% of people 15 years and over at risk of HIV infection have accessed combination of HIV prevention services.	ON TRACK	Only 28.3% of the young people aged 15-24 years have comprehensive knowledge of HIV (26.0% of young men and 30.7% of young women) indicating lack of knowledge and low risk perception (LePHIA, 2017).
By 2021, mother-to-child transmission of HIV is reduced to 7% and 90% of children aged 0-14 years living with HIV accessed antiretroviral treatment (ART).	WITHIN REACH	The rate of mother-to-child transmission of HIV in Lesotho decreased from 16% in 2010 to 2.8% in 2020 (LePHIA 2020); an estimated 83% of children aged 0-14 years living with HIV had access to treatment by the end of 2020 (GAM 2021).
By 2021, Lesotho has made progress to establish an environment that addresses gender inequalities, human rights violations and fully supports communities to attain their health needs in relation to HIV.	ON TRACK	The National Strategic Plan for HIV and AIDS (NSP) 2018-2023 was revised to prioritize gender equality and human rights in programme funding and implementation; gender equality and human rights were also prioritized in the Global Fund 2021-2025 grant proposal and President's Emergency Plan for AIDS Relief (PEPFAR) funding applications. Lesotho began the Stigma Index 2.0 implementation process to adequately measure the extent and forms of stigma and discrimination people living with HIV and key populations experience and monitor changes over time—the study is scheduled to be completed in 2021. Preliminary results show a significant decline in stigma and discrimination compared to 2014 levels.

<p>By 2021, the national monitoring and evaluation system is functional.</p>	<p>ON TRACK</p>	<p>Lesotho Output Monitoring System for HIV and AIDS (LOMSHA) was developed and launched to enhance to improve coordination of non-clinical data generated by all stakeholders providing HIV and TB services across Lesotho; national monitoring and evaluation systems, including the District Health Information System (DHIS 2) have been strengthened.</p>
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JOINT TEAM

UNICEF, WFP, UNDP, UNFPA, UNESCO, WHO, UNAIDS SECRETARIAT

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020

Lesotho is on track to achieve the UNAIDS 95-95-50 treatment targets by 2030 and control the AIDS epidemic. The Joint Team made valuable contributions to increase uptake of HIV testing, treatment and care services including expanding differentiated services and improving retention in care for people living with HIV. Support was also provided to build the capacity of facility- and community-based health workers around provision of ethical and quality care and support services, as well as the use of HIV eligibility assessment screening tools. Civil society organizations were assisted to expand community-led condom promotion and distribution initiatives. Bi-direction referral systems were implemented to ease referrals between the HIV, gender-based violence, sexual and reproductive health, child and social protection, and education services targeting adolescent and young people. The Joint Team is also strongly advocating and providing support for the adoption of bills on Domestic Based Violence and Child Marriage, towards creating an enabling environment for the HIV response.

HIV TESTING AND TREATMENT

UPSTREAM ADVOCACY; TECHNICAL SUPPORT; FOSTERING PARTNERSHIPS

HIV drug resistance among people living with HIV failing to adhere to ART is of increasing concern in Lesotho. In 2020, with guidance from the Joint Team, Lesotho launched the Approach to the Management of Advanced HIV Disease to expand differentiated healthcare services for people living with HIV with advanced disease. These include rapid screening, ART initiation, and/or prophylaxis for major opportunistic infections, and intensified adherence support programmes. As a result of technical support provided to the Ministry of Health, healthcare providers and laboratory workers received training improving their capacity on delivery of care for people living with HIV with advanced disease. Technical and financial support was also granted for the development of the HIV Drug Resistance Strategy, which will enable Lesotho to overcome AIDS-related morbidity and mortality and contribute to increased viral suppression.

The Joint Team has continued its support to facility and community-led programmes designed to improve treatment uptake, adherence, and retention, as well as nutrition and livelihood protection services for people living with HIV. Community-based ART groups were also supported in the five districts that experience drought with a focus on ensuring continuation of adherence support during humanitarian crisis.

The Joint Team conducted virtual capacity building sessions to all district health workers in 10 districts improving their knowledge and skills around safe and ethical index testing and utilization of the HIV Testing Eligibility Assessment Screening Tool.

Despite the notable progress made in the prevention of mother-to-child transmission of HIV (PMTCT) in Lesotho, efforts still need to be strengthened to eliminate vertical transmission. Technical support and guidance were provided for the development of various strategies and guidelines aimed at improving PMTCT coverage in Lesotho. These include the 2020 PMTCT Guidelines, the 2020 Differentiated Service Delivery Strategy, antenatal care guidelines and sexually transmitted infections care guidelines. Review of the Reproductive, Maternal, Newborn, Child and Adolescent Health & Neonatal Strategic Plan is also underway.

HIV PREVENTION

POLICY ADVICE; TECHNICAL SUPPORT; COMMUNITY ENGAGEMENT

Adolescent and young people are significantly affected by the AIDS epidemic in Lesotho. With the support of the Joint Team, increasing efforts have been made to provide integrated HIV, sexual and reproductive health (SRH), and gender-based violence (GBV) services for adolescent and young people across the country. For instance, during the Global Fund 2021-2025 grant proposal development, the Joint Team provided technical support to ensure that integrated HIV, tuberculosis, SRH, GBV prevention and treatment programmes targeted towards adolescent and young people, key populations were included and well-funded through this mechanism.

The National Social and Behaviour Change Communication Strategy for Sexual and Reproductive Health and Rights and HIV 2020/21-2022/23 was developed and rolled out to increase comprehensive knowledge of SRH and HIV and motivate behaviour change at the individual, community, and societal level. Various implementation activities were proposed in the strategy, including social media engagements, training of peer educators, and partnerships with mass media outlets to maximize outreach. Also, a bi-directional referral system framework, targeting adolescent and young people, was developed in 2020 to simplify referrals between the HIV, GBV, SRH, child and social protection, and education services. The framework will also build on existing systems and reinforce linkages between governmental, non-governmental and community-based organizations supporting adolescent and young people.

As adolescent girls and young women remain at risk of HIV infection, GBV and early and unintended pregnancy, the Joint Team provided technical and financial support for various community engagement initiatives focused on parent-child communication, girls rights to education, prevention of HIV, GBV, and early and unwanted pregnancies, male engagement, and linkages to HIV and SRH services. Additionally, engagement with faith-based organizations around HIV and GBV prevention among adolescent and young people resulted in religious leaders issuing a Statement of Commitment by Lesotho's Church Leaders on World AIDS Day 2020, pledging to raise awareness of their congregations about HIV, SRH and GBV prevention and treatment services.

A Total Market Approach survey was conducted to examine various issues around condom supply in Lesotho. These include analysis of pricing strategies, public and private condom supply and distribution programmes, and efficiency in use of public funds. Results from the survey were used to shape the HIV prevention interventions included in the Global Fund 2021-2025 grant proposal. Extensive support was also provided to civil society organizations to expand community-led condom promotion and distribution initiatives targeting young people.

GENDER EQUALITY, STIGMA, AND DISCRIMINATION POLICY DIALOGUE; TECHNICAL SUPPORT; PARTNERSHIPS

Ensuring that no one is left behind in terms of access to healthcare, the Joint Team provided technical and financial support to the Government of Lesotho to expand the community score card initiative, which gives individuals an opportunity to rate the services they receive in healthcare facilities. Feedback from the scorecards will be used to identify stigma and human rights violations and improve healthcare services in the country. In addition, the Joint Team provided technical and financial support for the introduction and utilization of innovative strategies, such as teleconsultations and referrals for pregnant adolescent girls and young women and key populations. Toll-free numbers to report gender-based violence are in place, gatekeepers and communities are continually being mobilized to act against human rights violations.

CONTRIBUTION TO THE COVID-19 RESPONSE

The Joint Team provided technical and financial support to ensure the continuity of SRH, gender-based violence, and HIV prevention and treatment services during the COVID-19 pandemic. This included efforts in the development of resource mobilization proposals to access COVID-19 specific funds from the Global Fund and the United Nations Secretary-General Multi-Partner Trust Fund Office (MPTF). A total of US\$ 18 391 668 was mobilized to overcome the impact of COVID-19 on the national HIV and tuberculosis responses and support the Government's efforts to effectively respond to the COVID-19 pandemic. Technical support was also provided to strengthen the national capacity around surveillance, reporting, risk communication, COVID-19 infection prevention, and pandemic control.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

The Joint Team continues to engage in high-level advocacy to enact the Domestic Violence Bill and amend the Children's Protection and Welfare Act, which are critical to ending gender-based violence, child marriage, and the HIV epidemic in Lesotho. Two round-table discussions were held with members of parliament and relevant ministries to secure an Initiation Bill for these amendments.

PERSISTING AND EMERGING CHALLENGES AND BOTTLENECKS	KEY FUTURE ACTIONS TO RESPOND TO CHALLENGES AND UNBLOCK BOTTLENECKS
<p>The COVID-19 pandemic has strained HIV service delivery and the overall implementation of HIV programmes in Lesotho. Several country support activities planned were delayed and moved to 2021.</p>	<p>Provide technical support to the Government and civil society to accelerate progress in HIV programmes that are affected by COVID-19 pandemic and mobilize resources from the Global Fund to address the impact of COVID-19 on these programmes.</p>
<p>Collection and utilization of quality data, particularly in identifying and reaching people left behind to develop and improve tailored HIV programmes remains a challenge in Lesotho.</p>	<p>Provide technical support around collection, analysis and use of quality data to ensure evidence-based HIV programme planning and implementation in Lesotho.</p>
<p>Women are disproportionately affected by HIV in Lesotho. There is also a high HIV prevalence among gay men and other men who have sex with men, and female sex workers. There is a slow progress in prevention particularly for men aged below 35 years and young women aged 19-24 years.</p> <p>Stigma and human rights violations remain barriers to HIV testing and treatment services, particularly among men and key populations.</p>	<p>Support the implementation of the Faith-Based HIV Strategy to reach wider communities with HIV prevention, care, and treatment messages; and support the implementation of the National Roadmap on HIV Prevention to accelerate work on prevention of HIV.</p> <p>Support implementation of comprehensive sexuality education in higher education institutes; and support an analysis on perception of recipients of comprehensive sexuality education in schools.</p> <p>Develop training module and organize training of trainers' workshops for health workers on the national comprehensive HIV services package tailored for key populations—package includes HIV testing, treatment, adherence, retention and nutritional support, tuberculosis and HIV co-infection, SRH, and more.</p>
<p>Poor coordination in programme implementation among Global Fund grant implementors leading to duplication of efforts and a general lag between the creation of demand and service provision.</p>	<p>Support the Global Fund grant making and implementation process to eliminate duplication of efforts and strengthen the HIV response.</p>

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