

# Lesotho Progress Updates

Dr. Tarumbiswa Tapiwa
HIV & AIDS program manager
Ministry of Health, Lesotho

## **Presentation Outline**

- Where are we now?
  - Progress towards 95:95:95 targets
  - Treatment: capability maturity model (CMM) self-staging results
  - DART model mix and MMD
  - AHD: CMM self-staging results
  - dHTS: CMM self-staging results

#### How did we get here?

- Stakeholder coordination and prioritization processes
- Engagement with CQUIN
- Update on Country Action Plans
- Update on Integrating Non-HIV and HIV Services
- Program sustainability efforts and opportunities
- Successes and Challenges
- 2025 Priorities



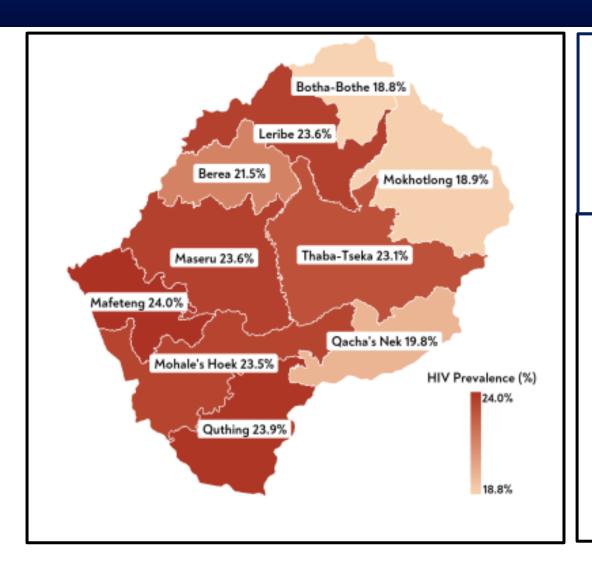
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#### Progress towards 95:95:95





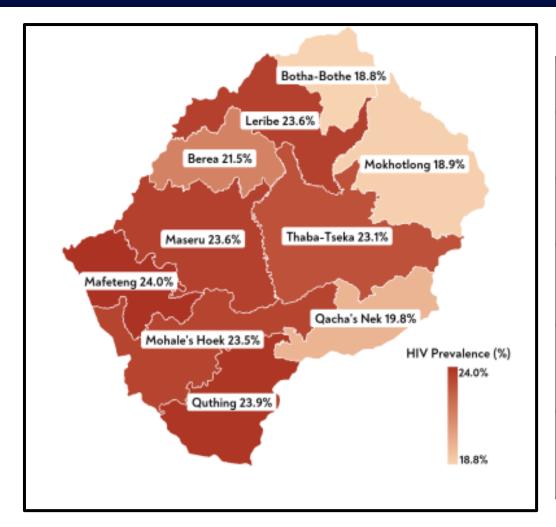


Population of 2.1 million people of which 49.9% are males and 51.1% are females 1:1 ratio.

- MTCT- 5.1%
- Adult HIV prevalence is 20.5%1
- PLHIV in Lesotho include an estimated:
  - 264,918 adults<sup>1</sup>
  - 6,479 children < 15 years<sup>1</sup>



#### Progress towards 95:95:95



#### 95:95:95, Spectrum estimates,

	Female	Male	Total
• 1 <sup>st</sup> 95	96%	93%	95%
• 2 <sup>nd</sup> 95	97%	90%	94%
• 3 <sup>rd</sup> 95	99%	98%	99%
<ul> <li>HIV prevalence (15+ Years)</li> </ul>	24.5%	16.2%	20.3%
<ul><li>HIV incidence 15+ Years)</li></ul>	0.56%	0.32%	0.44%



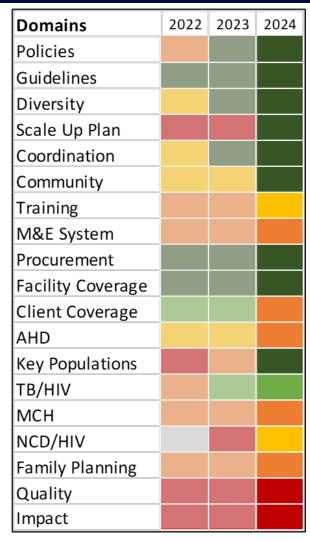
#### Lesotho Treatment CMM Results: 2024

Policies				
Guidelines				
Diversity				
Scale Up Plan				
Coordination			M&E System	
Community			Client Coverage	
Procurement			AHD	
Facility Coverage		Training	МСН	Quality
<b>Key Populations</b>	TB/HIV	NCD/HIV	Family Planning	Impact
Most mature				Least mature

- Maturity was achieved in 9 domains
- Integration domains are generally immature and are a focus for 2025



### Lesotho Treatment CMM Results: Change Over Time 2022-2024



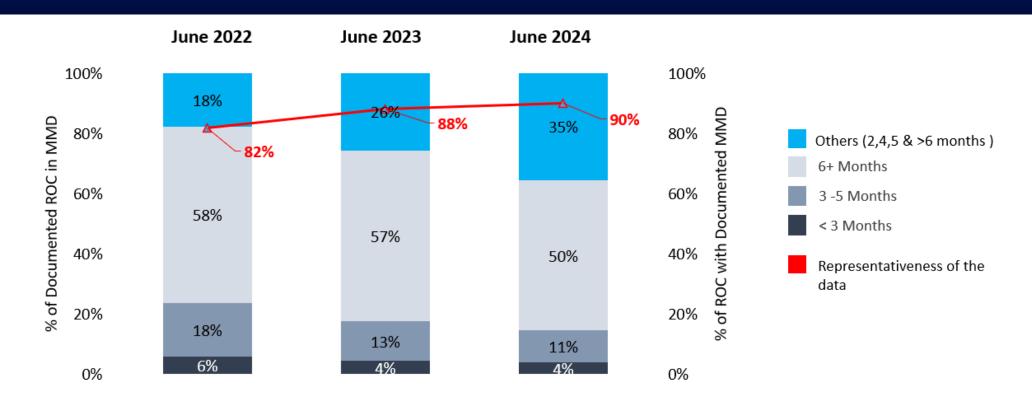
#### **Observations**

Progressive improvement over time

- Improved in 4 domains
  - **○Community**
  - **○Training**
  - $\circ$ KP
  - ONCD/HIV
- Regression in Client Coverage and AHD, is attributed to an improved M&E system that can consistently report data at national level



#### Lesotho Differentiated Treatment: Multi-month Dispensing



- Majority of clients are receiving MMD refills of 4 months and above
- The M&E system is customized to capture 1, 3 and 6 MMD, but not MMD for 2,4,5,or >6 months hence "Others"
- M&E system to be harmonized to reflect these OTHER categories within 2, 4,5, and 6+ icap Hobel MMD

#### Lesotho AHD CMM Results 2024

Polices				
Guidelines				
AHD Scale-up Plan				
SOPs				
Coordination				
ROC Engagement		Facility Coverage		
Diagnostic Capability 1		Client Coverage 2		
Diagnostic Capability 2		Supply Chain		
Client Coverage 3		M&E System		
Client Coverage 4	Training	Quality	Client Coverage 1	Impact
Most mature				Least mature

Lesotho still faces challenges with Facility and Client coverage, Supply Chain, and M&E of AHD



#### Lesotho AHD CMM Results – Trend over time 2022-2024

Domains	2022	2023	2024
Policies			
Guidelines			
AHD Scale-up Plan			
SOPs			
Coordination			
ROC Engagement			
Training			
Supply Chain			
M&E System			
Diagnostic Capability 1			
Diagnostic Capability 2			
Facility Coverage			
Client Coverage 1			
Client Coverage 2			
Client Coverage 3			
Client Coverage 4			
Quality			
Impact			

# Improvements observed in the following domains:

- SOPs
- RoC engagement
- Client coverage 3
- Quality domain

## Stagnation observed in the following domains:

- Training
- Facility coverage 1&2
- Supply chain
- M&E



## Lesotho Differentiated Testing CMM – 2024

Domains	2023	2024
Policy: Strategic Model Mix		
Policy: Optimizing HIV		
Policy: Linkage		
Finance/Resource Allocation		
SOPs		
Scale-up Plan		
Community Engagement		
Private Sector Engagement		
Coordination		
dHTS Training		
M&E		
Procurement/Supply Chain		
Population Coverage		
Linkage to Tx: Timely Linkage		
Linkage to Tx: Verification		
Linkage to Prevention		
EQA/IQC		
Proficiency Testing		
Clinical Services		
Impact: Knowledge of Status		
Impact: Linkage to Tx		
Impact: Linkage to Prevention		

#### **Observations**

- Improved in 7/21 domains such as financing, scale up plan, private sector engagement, supply chain, and linkage to Rx: verification
- Regression in the coordination domain from Light Green to Yellow caused by a reduction in the number of coordination meetings attended by community representatives
- Quality domains: EQA/IQC, Proficiency testing, Clinical testing were mature
- 2024 action planning will tackle linkage, M&E, and population coverage domains



Lesotho						
dHTS		DART			AHD	
Domains	2024	Domains	2024		Domains	2024
Policy: Strategic Model Mix		Policies			Policies	
Policy: Optimizing HIV Testing □		Guidelines			Guidelines	
Policy: Linkage		Diversity			AHD Scale-up Plan	
Finance/Resource Allocation		Scale Up Plan			SOPs	
SOPs		Coordination			Coordination	
Scale-up Plan		Community Engagement			ROC Engagement	
CommunityEngagement		Training			Training	
Private Sector Engagement		M&E System			Supply Chain	
Coordination		Procurement			M&E System	
dHTS Training		Facility Coverage			Diagnostic Capability 1	
M&E		Client Coverage			Diagnostic Capability 2	
Procurement/Supply Chain		AHD			Facility Coverage	
Population Coverage		KeyPopulations			Client Coverage 1	
Linkage to Tx: Timely Linkage		TB/HIV			Client Coverage 2	
Linkage to Tx: Verification		MCH			Client Coverage 3	
Linkage to Prevention		NCD/HIV			Client Coverage 4	
EQA/IQC		Family Planning			Quality	
Proficiency Testing		Quality			Impact	
Clinical Services		Impact				
Impact: Knowledge of Status						
Impact: Linkage to Tx						ĺ
Impact: Linkage to Prevention		<del>.</del>				

## Overview of HIV Program 2024 CMM Results

- Observations on the enabling domains across the three CMMs
  - Optimizing testing particularly for KPs is lagging behind
- Program areas that need to be prioritized
  - Linkages to prevention and care and treatment as well as quality
  - Facility &Client coverage
  - Integration of HIV/NCD, FP
  - M&E System
  - Quality & Impact Domains
- Plans to ensure outcome domains are addressed in an integrated manner
  - Joint planning as a team to prioritize resource allocation
  - O Joint integrated supportive COUIN Supervision

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## Stakeholder coordination and prioritization processes-1/2

- Platforms used for planning and coordinating DSD activities
  - HIV/TB TWG
- Recipient of care organizations represented in co-ordination meetings
  - LENEPWA and Care 4 Basotho
- Action items funded by PEPFAR
  - Scale up of HIVST targeting men
  - dHTS guidelines review
  - Development of a digital supportive supervision tool
  - Procurement of BP machines, Glucometers and its accessories for clinics in 8 districts



## Stakeholder coordination and prioritization processes-2/2

- Action items funded by WHO
  - WHO-HTS Guidelines review
  - WHO- Development of a comprehensive integrated package of services for men
- Process of securing buy-in for funding prioritization
  - COP22 joint planning (MOH, PEPFAR, and CSOs)
  - National HIV/TB TWG meetings



## Update on Country Action Plans from 2024 Meetings

- Activities that have been successfully completed include:
  - dHTS guidelines review and validation
  - Development of a digital supportive supervision tool
- Activities that are still ongoing include:
  - Review of dHTS M&E tools
  - Review of the DSD manual
  - Standardizing tools for monitoring of key population indicators
  - Development of a comprehensive service package for men
- Activities that were dropped include:
  - Develop/disseminate DSD messages on radios, TV and social media by Q2
  - Develop DSD knowledge online polls among ROC (Men, AGYW,KP) by Q3



## Update on Integrating Non-HIV and HIV Services

# Key program policy and implementation approaches adopted since the integration meeting in April 2024

#### **Defining integration:**

- Conducted study tours in the Southern Africa region (Tanzania, Malawi, Zambia) to explore different models of integration
- Revised client care card and reporting tools to include NCDs indicators
- Conducted capacity building of providers on screening and management of NCDs, and Mental Health
- Procured BP machines, Glucometers and its accessories
- Appointed NCD mentors as focal points at DHMT level, for program monitoring and reporting



## Update on Integrating Non-HIV and HIV Services -2

#### **Establishing a coordinating mechanism**

 Initiated discussions with key program managers and stakeholders to develop TORs for the integration TWG

#### **Community Engagement:**

- Involvement of LENEPWHA during design, planning, implementation and monitoring of the program
- Ongoing community engagement with recipients of care and community gatekeepers (Facility-community feedback meetings) through the VHW program

#### **Defining integration metrics:**

Pending finalization of the TORs



## Program sustainability efforts and opportunities

#### **Sustainability of DSD activities**

- DSD activities initiated by CQUIN that have been adopted by in-country funding mechanisms to ensure they are sustained
  - Assignment of HIV Treatment and Care Officer as DSD Coordinator, with additional TA support from EGPAF
- Adaptations/modifications made to these initiatives to enable their sustainability
  - Developed national DSD scale-up plan, currently developing DSD manual, and to plan to include DSD indicators in the national EMR
- Other plans in place to ensure country DSD programs are sustained
  - Included DSD within the HIV/TB Health Sector Strategic Plan
  - DSD and integration are among priorities for the MOH



## Program sustainability efforts and opportunities

#### **National sustainability roadmap**

- DSD and ongoing national sustainability planning in country
  - Included in the National Sustainability Roadmap as the country reaches epidemic control, and undergoes transitions from INGOs to LIPs
- Integrated service delivery and ongoing national sustainability planning in country
  - Integration is a priority of the national sustainability planning with the shrinking resource envelope

### **DSD Implementation Successes in 2024**

- Development of DSD scale-up plan
- Development of AHD SOPs
- Development of a digital supervision tool
- Decentralization of Point of Care (POC) testing (CD4 Visitect, TB LAM, CrAg)
- DSD manual in draft version, awaiting endorsement
- Scale up AHD package services provision to Phase III sites (remaining 155 medium and low volume facilities)



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### DSD priorities for 2025

- DSD-related goals for 2025
  - Completion of the National DSD Manual, dissemination, HCW trainings and implementation and roll-out
- Lessons learn from other countries in the CQUIN network over the coming year
  - Best practices on cost effective integration models



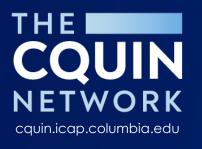


#### Acknowledgements

- Ministry of Health
- PEPFAR
- ICAP CQUIN
- Global Fund
- MOH IPs and TWGs







## Thank You!

