

The Centers for Disease Control and Prevention (CDC) in Lesotho has been collaborating with the Ministry of Health (MOH) and implementing partners since 2007 to support improvement in public health policies, services, and capacity development. CDC plays a pivotal role in the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) program in Lesotho; in collaboration with other U.S. government agencies and implementing partners, CDC signed the PEPFAR Partnership Framework with the government of Lesotho in 2009. This document guides the implementation of PEPFAR funding in Lesotho. CDC's work focuses on HIV counseling and testing, HIV treatment, laboratory services, and strategic information. CDC initiatives have improved access to HIV treatment, bolstered prevention efforts, and strengthened health systems.



CDC STAFF

- **4** U.S. Assignees
- 5 Locally Employed Staff
- 1 Contractor
- 1 ASPPH Fellow



AT A GLANCE

Population: 1,924,381 Per capita income: \$3,260

Life expectancy at birth: W 46/M 43 yrs Infant mortality rate: 59/1,000 live births



TOP 10 CAUSES OF DEATH

- 1. HIV/AIDS & TB
- 2. Cardiovascular diseases
- 3. Diarrheal diseases
- 4. Neoplasms
- 5. Neonatal disorders
- Diabetes/urological/blood/ endocrine disorders
- 7. Self-harm & violence
- 8. Chronic respiratory diseases
- 9. Transport injuries

Source: Population Reference Bureau Fact Sheet, 2015 Source: GBD Compare (http://viz.healthmetricsandevaluation.org/gbd-compare/), 2015



HIV/AIDS

In Lesotho 24.6% of the population between 15-49 years old is infected with HIV. The government of Lesotho adopted universal treatment of persons with HIV (Test and Start) in April 2016. The country is committed to achieving the UNAIDS goal of 90-90-90 by 2020 (90% of all people living with HIV will know their HIV status, 90% of all people with diagnosed HIV infection will receive sustained treatment, and 90% of all people receiving treatment will have viral load suppression).

Through PEPFAR, the CDC Lesotho office provides assistance to help the MOH implement an effective national HIV program. This has contributed to saving the lives of men, women, and children through HIV treatment and a comprehensive combination prevention strategy. Using a data-driven approach, this strategy is tailored to the unique characteristics of the epidemic in Lesotho for maximum health impact.



CDC is responsible for all community-based testing for HIV counseling and testing, under the PEPFAR program. It is also responsible for provider-initiated testing in health facilities in two of the country's ten districts. Efforts are focused on identifying all people living with HIV so that they can be linked to treatment services. A variety of approaches are used to ensure that testing is available to all, including groups that have been traditionally hard to reach.

In 2016 CDC supported 46 health facilities (4 hospitals and 42 health centers) for HIV treatment in the districts of Berea and Leribe. Support was focused on providing clinical staff (doctors, nurses, counselors, pharmacists, record clerks, etc.) who delivered HIV services, including integrated HIV/TB treatment and preventing-mother-to-child transmission of HIV. CDC-supported staff and implementing partners worked side-by-side with MOH personnel to deliver clinical care to those in need.

CDC provides support in a variety of ways for laboratory services: purchasing laboratory reagents, upgrading existing laboratory facilities, hiring staff to support district and national laboratories, providing mentoring and training to laboratorians, and offering technical assistance to the MOH. Recent activities have focused on scaling-up viral load testing for persons receiving HIV treatment as well as on early infant diagnosis for children born to mothers with HIV. In addition, CDC provides support for diagnosing TB.

CDC provides support for strategic information to the MOH to build the country's capacity for epidemiology, surveillance, health information systems, and program monitoring and evaluation through various means. Technical and financial assistance is provided for national surveys including the Population HIV Impact Assessment, a national survey of HIV drug resistance, a national survey of TB drug resistance, and the Violence Against Children Survey. Programmatic decisions are made based on the best available data.



IMPACT IN LESOTHO



The first national HIV survey, the Population HIV Impact Assessment (PHIA), will be completed in 2017.



Treatment coverage for persons living with HIV is now approximately 54%.



Scale-up of laboratory capacity will provide viral load testing to all persons on HIV treatment.



Over 800,000 HIV tests were conducted in Lesotho in 2016.

For more information please contact

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