

LINKAGES LESOTHO

Summary of Achievements

October 2017–September 2020

The LINKAGES across the Continuum of HIV Services for Key Populations Affected by HIV (LINKAGES) project was implemented in Lesotho in partnership with the Ministry of Health (MOH) and three local civil society organizations (CSOs): Care for Basotho (CBA), The People's Matrix Association (Matrix), and Phelisanang Bophelong (PB), with support from the U.S. Agency for International Development (USAID) and the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). The project increased access to high-quality HIV prevention, treatment, care, and support services for key populations (KPs) through different strategies that included community-based outreach, online outreach, and a one-stop-shop service delivery model at community-led drop-in centers (DICs). The project introduced several innovations to improve case finding, including a risk assessment screening tool (RAST), HIV self-testing (HIVST), the enhanced peer outreach approach (EPOA), and outreach and mobilization for testing using online platforms. The LINKAGES Lesotho team also contributed to an enabling policy environment for KP programming in Lesotho, supporting the government to establish a KP Technical Working Group and informing development of the national HIV service package.

BACKGROUND

Lesotho has committed to the UNAIDS 95-95-95 goals to achieve epidemic control and has laid out key priorities in the National HIV and AIDS Strategic Plan (NSP) 2018/2019–2022/2023. One of the commitments in the NSP is the need to address the high HIV prevalence among KPs in Lesotho. The NSP specifically emphasizes scaling up provision of a differentiated and comprehensive HIV prevention, care, and support service package for female sex workers (FSWs), men who have sex with men (MSM), and transgender people, with the goal of reaching at least 6,000 FSWs, their regular clients and stable sexual partners, and at least 14,000 MSM and transgender individuals and their sexual partners by end of 2023. The NSP further highlights the need to address the structural barriers that KPs face in accessing HIV services, through strengthening the capacities of FSW, MSM, and lesbian, gay, bisexual, transgender, intersex (LGBTI) networks to contribute actively to programming for HIV, tuberculosis (TB), and sexually transmitted infection (STI) prevention and treatment as well as contribute

Highlights

- Diagnosed 413 FSWs out of 2,903 tested for a case-finding rate of 14.2% and initiated 371 (89.8%) on ART
- Tested a total of 8,430 MSM and trans individuals over three years, and 329 (91.4%) of the total 360 (4.3%) newly diagnosed were successfully linked to clinical partners and initiated on ART
- Increased the case-finding rate among MSM from between 1% and 2% to 15% through a successful EPOA campaign for MSM
- Helped establish the MOH-led national KP Technical Working Group (TWG) in 2018, supporting the development of the terms of reference and holding a secretariat role
- Contributed to building a strong monitoring and evaluation system for Lesotho—one that is inclusive of KP-specific data
- Developed the risk assessment screening tool to assist in segmenting and prioritizing KPs for different HIV services based on their level of risk, and piloted and validated it with MSM

to reduction of gender-based violence (GBV) toward KP members, including violence by law enforcement agents. The NSP also outlines the importance of strengthening the national data reporting system to be able to track performance on the KP response through District Health Information System (DHIS2) and the Lesotho Output Monitoring System for HIV and AIDS (LOMSHA).

Between October 2017 and September 2020, the LINKAGES project in Lesotho addressed the HIV epidemic among KPs in Lesotho. Implemented through a subgrant to Pact, with technical leadership, direction, and support from FHI 360, the project was designed to reduce HIV risk and transmission among FSWs, MSM, and transgender people, and improve HIV care and treatment outcomes and quality of life for people living with HIV (PLHIV).

The project was implemented in Maseru and Leribe, the two districts with the highest HIV burden among KPs.¹ LINKAGES partnered with the MOH and three local CSOs: CBA, Matrix, and PB. The project also collaborated with Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), Jhpiego, Population Services International (PSI), and the Lesotho Planned Parenthood Association for the delivery of clinical services, including antiretroviral therapy (ART) and pre-exposure prophylaxis (PrEP).

KEY PROGRAMMATIC ELEMENTS

LINKAGES Lesotho subpartners delivered a comprehensive package of interventions designed to increase access to high-quality HIV prevention, treatment, care, and support services for KPs (Table 1). These services were delivered in an integrated manner using a one-stop-shop model during mobile outreach sessions and at KP-friendly DICs. With this model, the CSO implementing partners and other USAID-supported ART and PrEP partners collaborated to provide a full package of services in one location. The DICs, established and managed by the CSOs with support from Pact, became safe spaces where KP members could access stigma-free services. They were linked to nearby health facilities where the CSOs accessed prevention commodities (e.g., HIV test kits, condoms, and lubricant) and reported on usage. Strategic partnerships were critical to delivery

of the comprehensive package of services to KPs in Lesotho. The project collaborated with PSI on HIVST implementation, which expanded convenient and private HIV testing services (HTS) options for KPs. LINKAGES collaborated with Jhpiego on the delivery of PrEP, and EGPAF on the delivery of ART services. The CSO partners created demand for PrEP during outreach and made referrals in locations where the one-stop-shop model was set up with the two partners. HIV-positive KP members were directly linked to EGPAF for ART services, and HIV-negative members were directed to Jhpiego for further PrEP screening and initiation. As part of this collaboration, Jhpiego assigned nurses to directly provide daily PrEP services to KPs in the two districts with DICs. The Jhpiego nurses also provided other sexual and reproductive health services, including family planning, screening and management of STIs, cervical and breast cancer screening and referrals, TB screening, and treatment of minor illnesses.

In addition to work at the community and facility level to expand access to and uptake of services, LINKAGES Lesotho collaborated with stakeholders at the national level to achieve specific strategic milestones. In 2018, LINKAGES Lesotho helped establish the MOH-led national KP Technical Working Group (TWG), supporting the development of the terms of reference, proposing TWG membership, and holding a secretariat role. The TWG represents KP organizations and KP-supported implementing partners, providing a platform to discuss program-related achievements, progress, and challenges; in turn, strengthening and building government support for KP programming. Through the meetings, LINKAGES contributed to the development of the national HIV service package, ensuring responsiveness to the needs of KPs in the country.

LINKAGES also contributed to building a strong monitoring and evaluation system for Lesotho—one that is inclusive of KP-specific data. The LINKAGES Lesotho team advocated with the MOH that KP indicators be incorporated into the national strategic information system so that KP data and programmatic achievements can be generated and available to inform policy and decision-making.

Last, over the life of project, the LINKAGES team provided ongoing organizational and technical capacity development support to the three local implementing partners.

1. Ministry of Health Lesotho. Integrated bio-behavioral surveillance survey (IBBS) report for key populations (2017/2018) in Lesotho. Maseru: Ministry of Health Lesotho; 2019.

Table 1. LINKAGES Lesotho core package of services for FSWs, MSM, and transgender people

Prevention services	Services	Partners
Reach, Test, and Prevent	<ul style="list-style-type: none"> Peer-led outreach and education Risk assessment and segmentation, counseling, risk reduction planning Condom use promotion; distribution of condoms and lubricant HIV testing services (HTS), including HIV self-testing Violence screening, first-line response, and referral 	<ul style="list-style-type: none"> Care for Basotho Phelisanang Bophelong The People's Matrix Association PSI
Prevention Services (in collaboration with clinical partners)	<ul style="list-style-type: none"> Post-exposure prophylaxis (PEP) services; referral to medical, psychosocial, and legal services Family planning and other reproductive health services for FSWs Screening and treatment of sexually transmitted infections (STIs) Cervical cancer screening Pre-exposure prophylaxis (PrEP) services 	<ul style="list-style-type: none"> Jhpiego Lesotho Planned Parenthood Association (LPPA) Elizabeth Glazer HIV/AIDS Foundation (EGPAF)
Care and Treatment (in collaboration with clinical partners)	<ul style="list-style-type: none"> Link to care and treatment services, including same-day ART initiation and re-initiation Peer navigation to support treatment initiation and adherence Viral load testing and monitoring Tuberculosis (TB) screening and referral for treatment Assessment for STIs and other opportunistic infections (OIs) and referral Referral for prevention of mother-to-child transmission (PMTCT) services for FSWs who are pregnant Index testing 	<ul style="list-style-type: none"> Elizabeth Glazer HIV/AIDS Foundation (EGPAF)

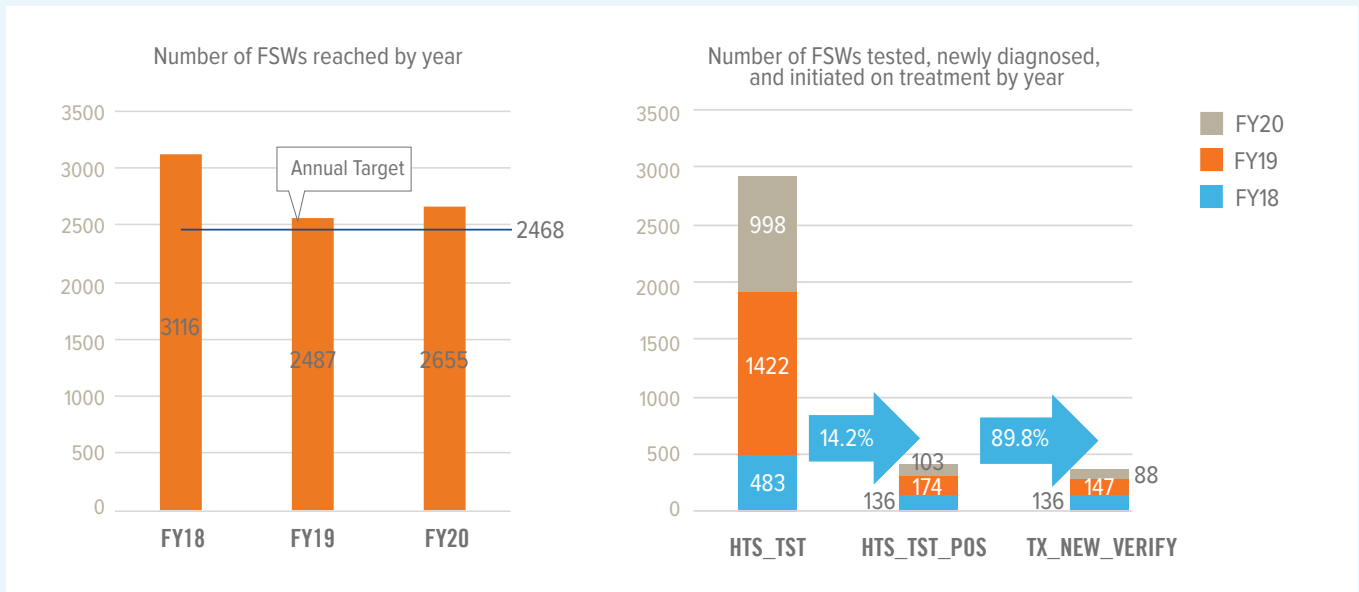
SERVICE DELIVERY IMPACT

Implementation of the LINKAGES Lesotho program focused on increasing reach, scaling up HIV testing to increase case finding, and ensuring effective linking to treatment among those diagnosed. The following interventions were conducted:

- Scaling up direct HTS at DICs and through community-based events, including by MOH-certified lay counselors, to increase the proportion of KP members tested for HIV
- Following up with KP members who declined to get tested for HIV to ensure they were provided with motivational counseling to increase uptake of HIV testing, as well as promotion of HIV self-testing
- Increasing follow-up of KP members who were recently tested for HIV to ensure they routinely test for HIV in line their risk vulnerabilities and per national HTS guidelines
- Introducing targeted HIV testing activities including EPOA, index testing/voluntary partner referrals (VPR), and risk network referrals (RNR)
- Having peer navigators accompany newly diagnosed KP members to health facilities

Each year, the project surpassed its annual reach and testing targets for FSWs. Over the three-year period of performance, the project newly diagnosed 413 FSWs out of 2,903 tested (a case-finding rate of 14.2%), of whom 371 (89.8%) were initiated on ART (Figure 1). For all KPs accompanied to health facilities by peer navigators, referral slips were signed and stamped by the clinical providers to confirm ART initiations.

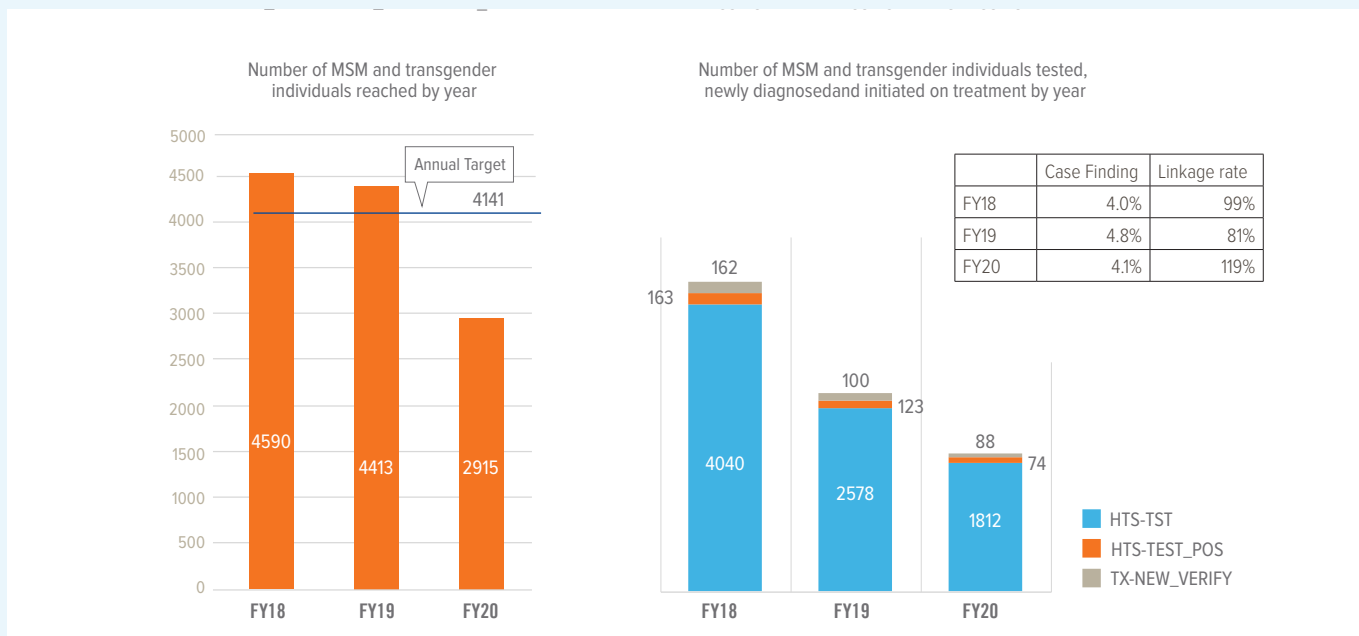
Figure 1. Prevention and treatment cascade for FSWs in Lesotho by year



The project surpassed its reach targets for MSM and transgender people in years one and two. In year three, the targets were not met because of COVID-19-related restrictions. A total of 8,430 MSM and trans individuals

were tested for HIV over the three years, and a total of 360 (4.3%) were newly diagnosed. Of these, 329 (91.4%) were successfully linked to clinical partners and initiated on ART (Figure 2).

Figure 2. Prevention and treatment cascade for MSM and transgender people in Lesotho by year





Hally Mahler, LINKAGES project director (third from left), with LINKAGES Lesotho project director, program officer, monitoring and evaluation advisor, and Phelisanang Bophelong (PB) team at the PB drop-in center in Maputsoe, Leribe, November 2018. Photo credit: LINKAGES Lesotho.

The LINKAGES team worked closely with Jhpiego for mobilization of KP members for enrollment on PrEP services. A total of 1,155 FSWs and 769 MSM initiated PrEP between FY18–FY20. These individuals were also enrolled in the peer navigation system and provided counseling for continuation of PrEP.

TECHNICAL HIGHLIGHTS

EPOA

One of the major achievements of LINKAGES Lesotho was the successful implementation of EPOA. EPOA² is a peer-led, coupon-based referral network approach used to access hard-to-reach networks of KPs to offer HIV prevention, testing, and treatment services in ways that ensure their privacy. LINKAGES Lesotho team provided support to the PB team to pilot the first EPOA campaign with MSM in Maputsoe, Leribe. Launched at the DIC, the campaign was implemented in Q1 FY19 and ran for a period of three weeks. The activity was specifically introduced to reach hidden pockets of MSM, particularly older MSM, whom the program was still struggling to reach, and to increase HIV case identification. This was also based on the observation that younger MSM, whom the program was reaching well through traditional outreach strategies, were engaging in sexual relationships with older MSM who were not presenting in the program sites. Small monetary incentives were given to MSM who successfully mobilized and referred other MSM for testing.

Figures 3 and 4 show the success of the EPOA campaign in reaching hidden networks of MSM who had not previously accessed services, as well as notably increasing the HIV case-finding rate for MSM within the area; from between 1% and 2% in the previous year to 15% by end of the campaign. This round of the campaign was also successful in using younger “seeds” and “peer mobilizers” aged 20–29 to mobilize older MSM and bisexual partners aged 30 to older than 50, at the coupon return rate of 93% for week 1, 53% for week 2, and 99% for week 3.



Staff from Phelisanang Bophelong (PB) participate in a project training, January 2018. Photo credit: LINKAGES Lesotho.

2. For more information about EPOA, please see the LINKAGES [Enhanced Peer Outreach Approach Implementation Guide](#).

Figure 3. HIV case finding among MSM through the EPOA campaign in Maputsoe, Q1 FY19

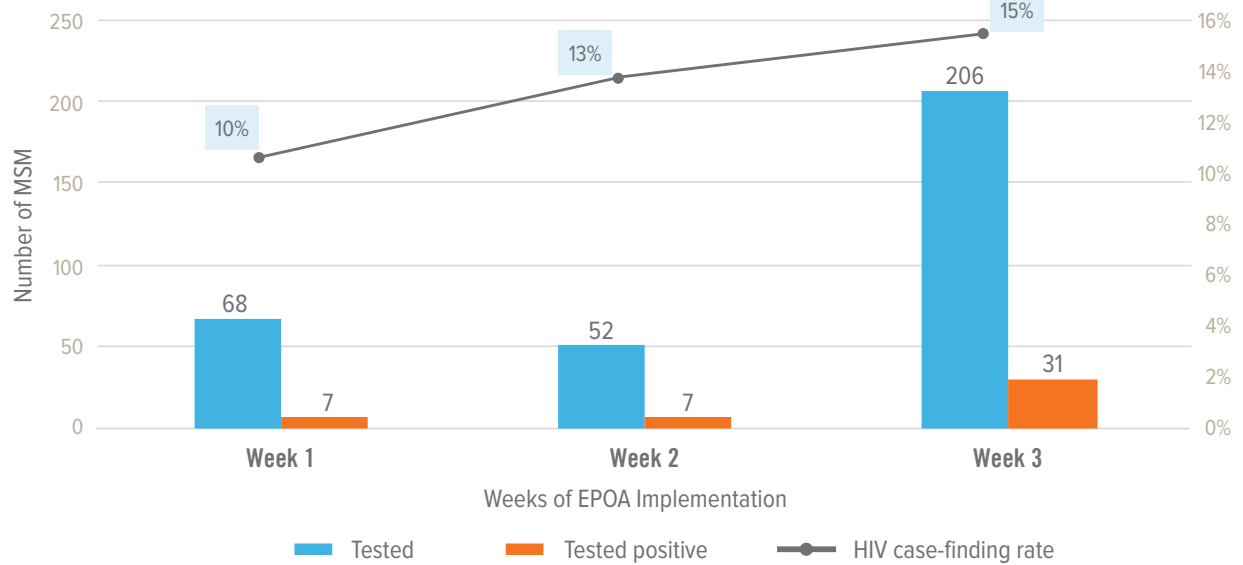
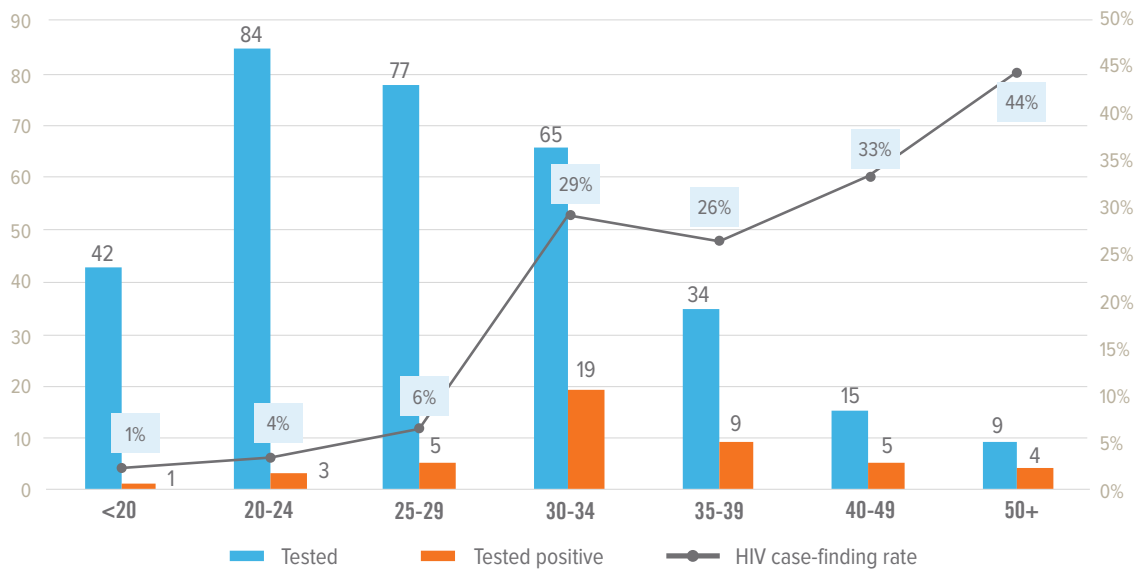


Figure 4. HIV testing and case finding among MSM through the EPOA campaign, disaggregated by age, Q1 FY19

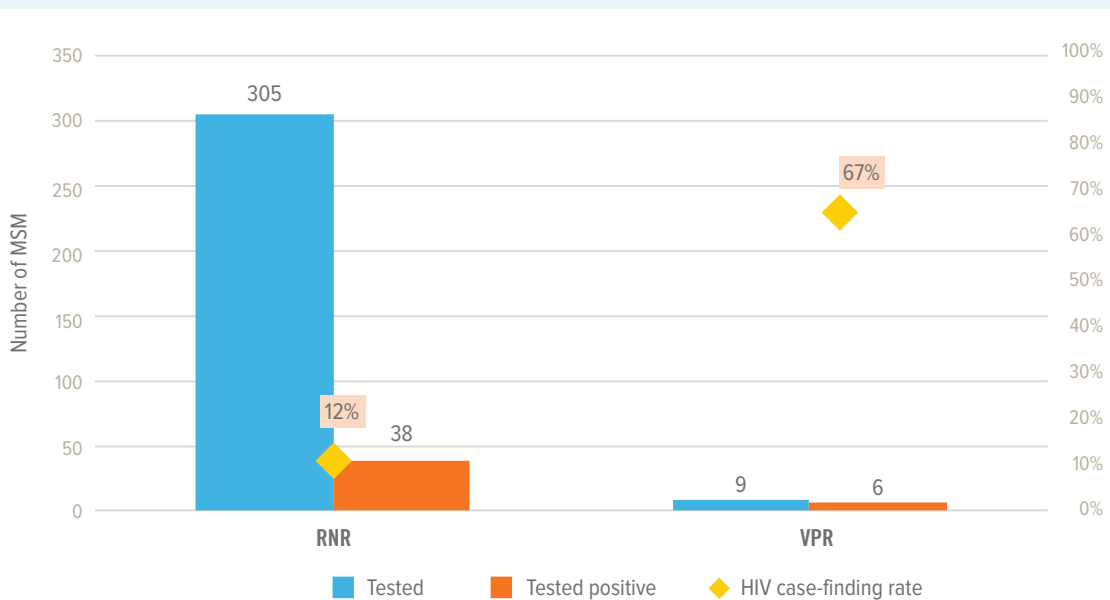


INDEX TESTING

The LINKAGES team also implemented index testing (also called VPR and RNR) as a targeted testing strategy for increasing case identification. VPR entailed working with MSM living with HIV to mobilize and bring their partners for HTS using client-led referrals and provider-initiated referrals. RNR was incorporated into the EPOA campaign implemented in Maputsoe and entailed recruiting newly and previously diagnosed HIV-positive MSM as “seeds” or “peer mobilizers” to

distribute coupons/referral slips to members of their social networks to invite them to come for HIV testing and other HIV prevention services at the DIC located in Maputsoe. As a result, HIV case finding for MSM in Leribe through VPR was recorded at 67% (six positives out of nine tested), while RNR was able to identify 12% of the MSM tested within the risk networks (38 positives out of 305 tested). The combination of VPR and RNR increased the average HIV case finding among MSM in Leribe from 2% in the previous quarter to 9% in Q1 FY19 (Figure 5).

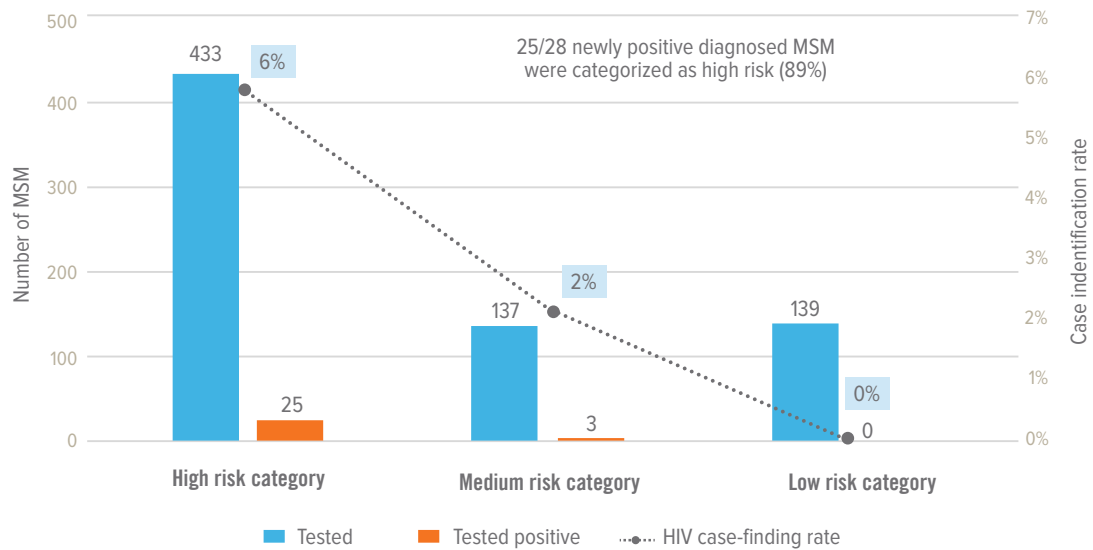
Figure 5. Results for RNR and VPR among MSM in Leribe, Q1 FY19



RISK ASSESSMENT SCREENING TOOL (RAST) IMPLEMENTATION AND RESULTS

LINKAGES Lesotho developed a RAST in FY19 in response to over-testing and low case identification in the program. The tool was developed to assist the program in segmenting and prioritizing KP for different HIV services based on their level of risk. The tool was piloted and validated with MSM between February and March 2020. A total of 709 MSM eligible for testing were screened using RAST and tested for HIV. Of those, 433 (61%) were categorized as high risk, 137 (19%) as

medium, and 139 (20%) as low. Of the 28 (4%) new HIV cases identified, 89% (25/28) were from the high-risk group, 11% (3/28) from medium, and none from low risk (0/28). The case-finding rate was 6% (25/433) in the high-risk category, 2% (3/137) in medium risk, and 0% (0/139) in low risk ($p=0.001$) (Figure 6). The variables likely to improve segmentation of MSM for prioritized testing were: (1) age 30-plus, contributing 82% (23/28) of new HIV cases; (2) time since last HIV test: if longer than a year, 7% positive (18/270); and (3) inefficient condom use where 6% of those who reported condom breaking or not used were diagnosed positive (Table 2).

Figure 6. Case finding by risk segmentation categories among MSM in Lesotho**Table 2.** Risk categorization variables and associated HIV case identification

Risk prioritization variable	Positive	Negative	Total	% cases identified	Statistically significant (Fisher's exact test)
Age					
<18	1	13	14	7%	P<0.001
18–29	4	411	415	1%	
30+	23	257	280	8%	
Time since last HIV test					
Three to six months	4	321	325	1%	P= 0.001
Seven to 12 months	6	104	110	5%	
More than 12 months	18	252	270	7%	
Condom breaking during recent use or not used					
Condom not used well	27	443	470	6%	P= 0.001
Condom used well	1	215	216	0.5%	
Refused to answer	0	23	23	0%	

FUTURE DIRECTIONS

LINKAGES was a flagship project for KPs in Lesotho, enabling increased access to HIV services among FSWs, MSM, and transgender people. Additionally, the project advocated for greater recognition of KP needs in national HIV policies and guidelines and provided the national HIV program with quality KP program data. However, more work remains to be done toward achieving epidemic control. Work completed under LINKAGES will continue under the USAID and PEPFAR-supported Meeting Targets and Maintaining Epidemic Control (EpiC) project, implemented by FHI 360 and partners. Through EpiC, direct service delivery for prevention interventions including PrEP will be expanded, and CSOs will continue to be mentored to develop technical capacity and increase preparedness to receive direct funding from USAID.

Linkages across the Continuum of HIV Services for Key Populations Affected by HIV (LINKAGES)

is a global cooperative agreement funded by USAID through PEPFAR. Led by FHI 360 with partners Pact, IntraHealth International, and the University of North Carolina at Chapel Hill, LINKAGES has worked in more than 30 countries since 2014 to reduce HIV transmission among key populations — sex workers, men who have sex with men, transgender people, and people who inject drugs — and to improve their enrollment and retention in care.

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