



LESOTHO's 2024 National HIV Estimates

Lesotho is on track in meeting the 95.95.95 targets

Dissemination Report

July 2024



Executive Summary

Introduction

The Lesotho 2024 National HIV Estimates Report provides an overview of the current status of and trends in HIV/AIDS in Lesotho. It synthesizes data collected from multiple sources—including surveillance systems, surveys, and routine program data—to present a comprehensive picture of the epidemic in Lesotho.

Key Outcomes / Results

Prevalence trends: The estimates provided in this report highlight a decreasing trend in HIV prevalence from 19.3% in 2022 to 18.5% in 2023. Variations in the geographic distribution of HIV prevalence were noted, with the highest prevalence recorded in Maseru at 20.1% and a lower prevalence recorded in Mokhotlong at 15.4%.

HIV incidence: The estimates also revealed a gradual decline in HIV incidence from 0.54 in 2022 to 0.50 in 2023 among adults 15-49 years old.

People living with HIV: It is estimated that the number of people living with HIV (PLHIV) for all ages is 270,000; of those, 6,400 are children 0-14 years old, and 160,000 are women ages 15+ years.

Progress on the UNAIDS 95-95-95 targets: The country has made significant strides towards the UNAIDS 95-95-95 targets with 95% of those infected aware of their HIV status, 94% accessing life-saving antiretroviral treatment (ART), and 98% of those on ART being virally suppressed.

New HIV infections: The estimated number of new infections has dropped by two-thirds in all ages since its peak of 24.5% in 2004. In 2023, 4,800 new HIV infections were recorded, highlighting a 6% decline from the 5,100 reported in 2022. The distribution of new infections shows that the majority of new HIV infections among 15- to 49-year-olds are women: 62% (2,800/4,500).

Treatment coverage: The number of PLHIV (all ages) on life-saving ART increased from 235,453 in 2022 to 241,462 in 2023. However, ART coverage remains low in some districts. The highest ART coverage is recorded in Mafeteng at 91.5%, Qacha's Nek at 91.1%, and Maseru at 90.5%. However, more efforts are needed to address the challenges in ART uptake in the following districts with lower ART coverage: Quthing at 79.8%, Mohale's Hoek at 82.8%, and Butha-Buthe at 86.9%.

Elimination of mother-to-child transmission (eMTCT): Lesotho's mother-child transmission rate has declined from 6.1% in 2022 to 5.1% in 2023. This means Lesotho has successfully reached the global target of 5.1%.

Vulnerability and key populations: Certain populations continue to bear a disproportionate burden of HIV. The overall national HIV prevalence is estimated at 18.5% in 2023 with the prevalence recorded among females at (23.5%), which is almost double that of males at (13.4%). The 2023 estimates also revealed that about 9,800 adolescents living with HIV require ART, and 57% (5,600) of these are adolescent girls. Among the 15- to 24-year-olds,

19,000 are living with HIV and 70% of these are women (13,000). Efforts to reach adolescents and young people with targeted prevention and treatment services will benefit overall epidemic control efforts in Lesotho.

AIDS-related deaths: The number of AIDS-related deaths has significantly decreased. Mortality among children has been reduced from 17% in 2005 to 13% in 2023. Mortality among women 15+ years old has decreased from 57% to 55%. Approximately 4,000 AIDS-related deaths occurred in Lesotho in 2023: of those, 13% were children, 3,800 were adults 15+ years old (2,100 were women 15+). The annual number of AIDS deaths decreased by more than 60% from 2008 to 2023.

Challenges

Despite progress, challenges remain, including high HIV incidence among adolescent girls ages 10-19, priority populations such as men lagging throughout the cascade, and low ART treatment coverage in some districts. These obstacles slow down the country's progress toward achieving the Joint United Nations Programme on HIV/AIDS (UNAIDS) 95-95-95 targets for HIV/AIDS control.

Recommendations

To address these challenges, it is recommended that the government of Lesotho and all relevant stakeholders focus on expediting the finalization of the National HIV Response Sustainability Roadmap. This will serve as a guiding tool towards strengthening and sustaining a strong and inclusive country leadership to maintain epidemic control. The country will also benefit from investments in specific strategies like improving community engagement, strengthening health systems, reducing inequalities, and increasing access to services for priority populations. These efforts are crucial for sustaining epidemic control, reducing inequalities, building a resilient health system, and ensuring sustainable funding for the HIV response.

Conclusion

The *Lesotho 2024 National HIV Estimates* Report underscores the progress made and the challenges that remain in the fight against HIV/AIDS in Lesotho. By leveraging data-driven strategies and targeted interventions, Lesotho can continue to advance towards achieving the goals outlined in the National Strategic Plan and a commitment to ending the HIV epidemic by 2030.

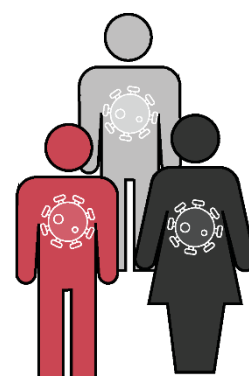


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Introduction

The Government of Lesotho under the National AIDS Commission (NAC) and the Ministry of Health (MOH) lead the generation of the national HIV estimates every year, with technical support from the Joint United Nations Programme on HIV/AIDS (UNAIDS). The aim of the national estimates is to track the HIV epidemic, using the best available epidemiological and programmatic data, to determine the number of people living with HIV (PLHIV), the number of people who are newly infected with HIV, the number of people who have died from AIDS-related causes, the number of pregnant women living with HIV, and other parameters that will enhance the government's ability to plan effectively to mitigate the impacts of HIV on Basotho. These estimates are also used for setting targets and measuring progress toward national strategic plans (NSP), applications to the Global Fund to Fight AIDS, Tuberculosis and Malaria, and donor reporting.

The 2023 national HIV estimates are generated by a team of experts, composed primarily of epidemiologists, demographers, monitoring and evaluation (M&E) specialists, and technical partners in Lesotho using the UNAIDS-approved Avenir Health's Spectrum software. Spectrum software is being used by about 170 countries, with support from UNAIDS, to produce estimates. Spectrum is an analytic modelling tool that support policymakers in the decision-making process. The entire analytic process is guided on a technical level with active quality assurance by the UNAIDS Reference Group on Estimates.

The input data used in these estimates include available epidemiological data. These typically consist of HIV prevalence results from surveillance among pregnant women attending antenatal care (ANC) clinics, a nationally representative population-based survey (Lesotho Population-based HIV Impact Assessment, or LePHIA), and 2023 programme data. Where representative data are limited, acceptable assumptions were used. These assumptions were based on systematic literature reviews and analyses of raw study data by technical experts. Demographic population data, including fertility estimates, derived from the latest revision of the United Nations Population Division's World Population Prospects, were also used.

The final results of the Lesotho 2023 national HIV estimates will be approved in July 2024. This report provides details for different HIV epidemiological trends by various disaggregates, including age, sex, and regions.

Our analysis found that HIV prevalence was 18.5% with 270,000 PLHIV; HIV incidence was 3.0 per 1,000 uninfected population, with 4,800 new infections; and there were 4,000 AIDS-related deaths. There has been continued progress in achieving the UNAIDS 95-95-95 targets: 95% of those infected know their status; 94% of those that know their status are on antiretroviral treatment (ART); and 98% of those on ART are virally suppressed.

At a Glance: HIV in Lesotho in 2023

Impact of the national AIDS response in 2023

In 2023, 221,868 deaths were averted among Basotho. Of those, 2,170 deaths averted were in children 0-4 years old and 18,178 were in mothers. As a result of the successful ART programme, 23,623 infections in adults and two infections among infants were averted due to the national elimination of mother-to-child transmission (eMTCT) programme.

Table 1: Impact of the national AIDS response in Lesotho

Year	Deaths averted by ART	Infections averted by PMTCT	Deaths averted by ART (0-4 years old)	Deaths averted by PMTCT (0-4 years old)
2010	13372	1864	304	882
2011	14071	2570	206	1235
2012	14216	2491	187	1372
2013	14440	2374	179	1452
2014	14629	2508	136	1527
2015	14947	2631	72	1637
2016	15632	2444	243	1496
2017	16396	1922	401	1233
2018	17136	2 104	210	1356
2019	17283	1 973	54	1331
2020	17434	1 919	3	1318
2021	17574	1726	12	1233
2022	17629	1610	108	1074
2023	17109	1483	55	1032
Total	221868	23623	2170	18178

HIV updates in 2023

- There were 270,000 [250,000-310,000] PLHIV of all ages. Of those, 6,400 were children 0-14 years old and 160,000 were women 15+ years old.
- Adult HIV prevalence decreased from 19.3% in 2022 to 18.5% in 2023.
- The HIV incidence rate decreased from 0.54 in 2022 to 0.50 in 2023 among adults 15-49 years old.
- HIV incidence (all ages) decreased from 3.2 in 2022 to 3.0 in 2023 (new HIV infections per 1,000 uninfected population).
- HIV infections in all ages decreased from 5,100 in 2022 to 4,800 in 2023.
- The number of PLHIV who know their HIV status decreased from 260,106 to 256,767 for all ages.
- The number of PLHIV (all ages) on life-saving ART increased from 235,453 in 2022 to 241,462 in 2023.

- The number of PLHIV (all ages) with suppressed viral load increased from 231,688 in 2022 for all ages to 238,346 in 2023.
- AIDS-related deaths in all ages decreased from 4,300 in 2022 to 4,000 in 2023 (a - 7% percentage change since 2022).

Progress towards 95-95-95

The current targets for HIV testing and treatment are called the **95-95-95 targets** and must be reached by 2025 in order to end AIDS by 2030. Thus, Lesotho's progress towards 95-95-95 is as follows:

- 95% – Percentage of PLHIV who know their HIV status (first 95% target of 95-95-95)
- 94% – Percentage of PLHIV who know their status and who are on ART (second 95% target of 95-95-95)
- >98% – Percentage of PLHIV on ART with suppressed viral load (third 95% target of 95-95-95)

Progress towards treatment cascade

- 95% – Percentage of PLHIV who know their HIV status (first 95% target of treatment cascade)
- 89% – Percentage of PLHIV who are on ART (second 90% target of treatment cascade)
- 88% – Percentage of PLHIV with suppressed viral load (third 86% target of treatment cascade)



Epidemiological estimates of HIV in 2023

HIV prevalence

Key findings from the 2023 National HIV Estimates show HIV prevalence at 18.5% in 2023, a decrease from 23% in 2004 (23% among females and 13.4% among males), which corresponds to approximately 271,378 PLHIV of all ages in the country, including 260,000 adults 15+ years old, 160,00 women 15+ years old living with HIV, and 6,400 children 0-14 years old.

The overall HIV incidence rate was 0.50 for adults ages 15-49 and HIV incidence (new HIV infection per 1,000 uninfected population) for all ages was 3.0. See Tables 1 and 2 for details.

Table 2: HIV prevalence among adults (women and men)

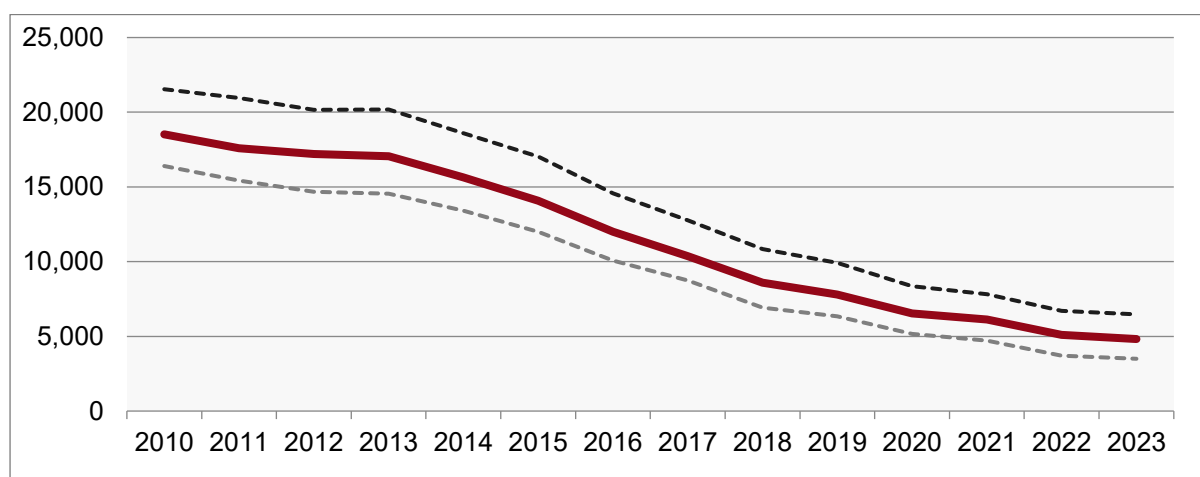
Year	HIV prevalence (%) (Adults, ages 15-49)	HIV prevalence (%) (Women, ages 15-49)	HIV prevalence (%) (Men, ages 15-49)
1990	2.2	2.4	1.9
1991	3.6	4.0	3.0
1992	5.6	6.3	4.7
1993	8.2	9.3	6.9
1994	11.2	12.8	9.3
1995	14.2	16.2	11.7
1996	16.7	19.1	13.8
1997	18.7	21.4	15.4
1998	20.1	23.1	16.5
1999	21.2	24.4	17.3
2000	21.9	25.3	17.9
2001	22.4	26.0	18.2
2002	22.7	26.4	18.5
2003	22.9	26.7	18.6
2004	23.0	26.9	18.6
2005	23.1	27.1	18.7
2006	23.3	27.3	18.8
2007	23.6	27.7	19.1
2008	24.0	28.1	19.4
2009	24.3	28.5	19.6
2010	24.4	28.8	19.6
2011	24.6	29.1	19.7
2012	24.7	29.3	19.6
2013	24.7	29.5	19.5
2014	24.5	29.5	19.2
2015	24.2	29.4	18.8
2016	23.8	29.0	18.3
2017	23.2	28.5	17.7
2018	22.5	27.8	17.0

2019	21.8	27.1	16.4
2020	21.0	26.2	15.6
2021	20.2	25.4	14.9
2022	19.3	24.4	14.1
2023	18.5	23.5	13.4

Trend of new infection patterns in Lesotho

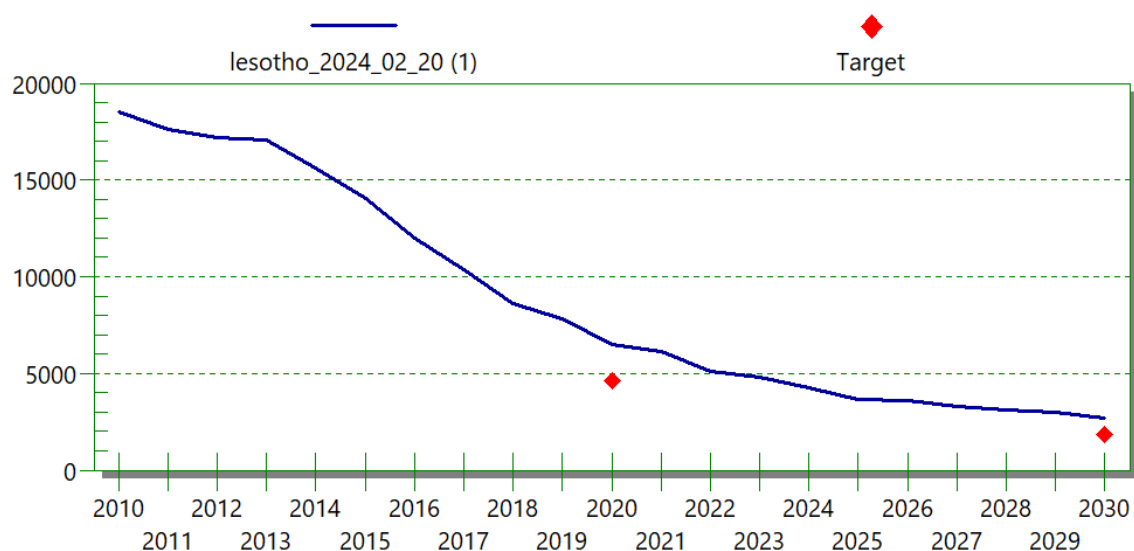
An estimated 4,800 Basotho were newly infected with HIV, a decrease from 35,000 annually in 1995 (all ages), of which fewer than 500 were children 0-14 years old, and 4,500 adults 15-49 years old (of which 2,800 were women ages 15-49). The estimated number of new infections dropped by two-thirds in all ages since its peak of 24.5 around 2004. See Table 2 above.

Figure 1: New HIV infections 1990–2023



Lesotho is responding well and making good progress with respect to the set target for reducing new HIV infections in the country. See Figure 2 for details.

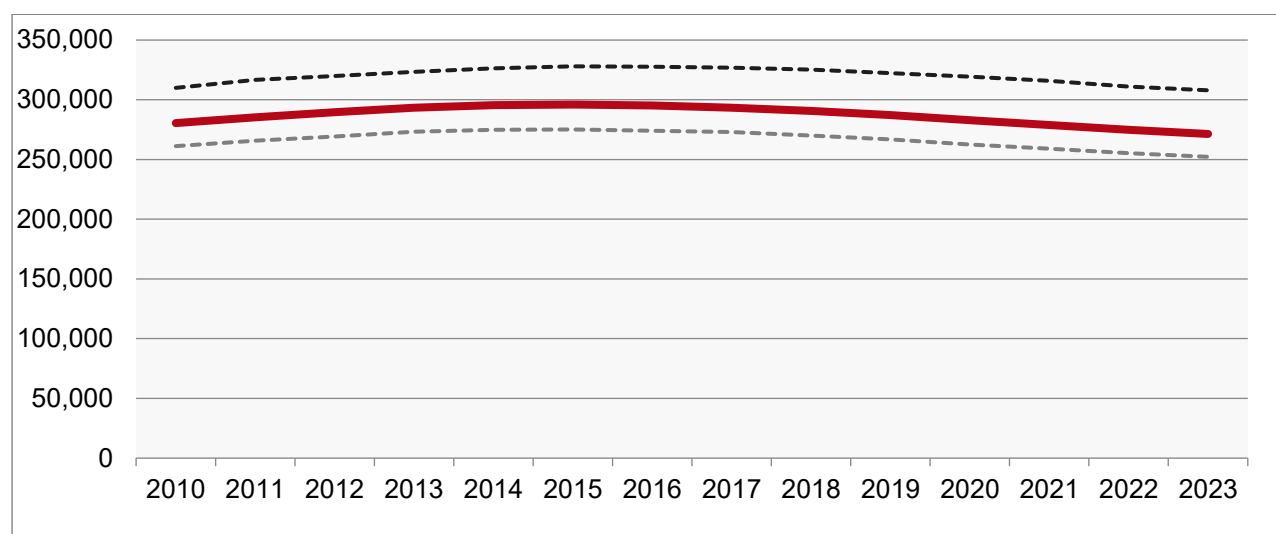
Figure 2: New infection pattern in relation to NSP targets



Trends of burden of HIV in Lesotho

Although the burden of HIV remains high among the Basotho, the HIV burden initially increased because of inadequate prevention interventions and high levels of new infections. Since the introduction of life-saving ART as a public health agenda in 2003, and the scale-up of prevention interventions, the number of PLHIV has stabilized, given fewer new infections and fewer PLHIV dying of AIDS-related causes. Most PLHIV are now living longer, due to life-saving medicines. However, Lesotho still needs sustained investment on treatment and care, particularly in efforts to reduce the burden of non-communicable disease.

Figure 3: Number of PLHIV 1990–2023



Number of AIDS -related deaths

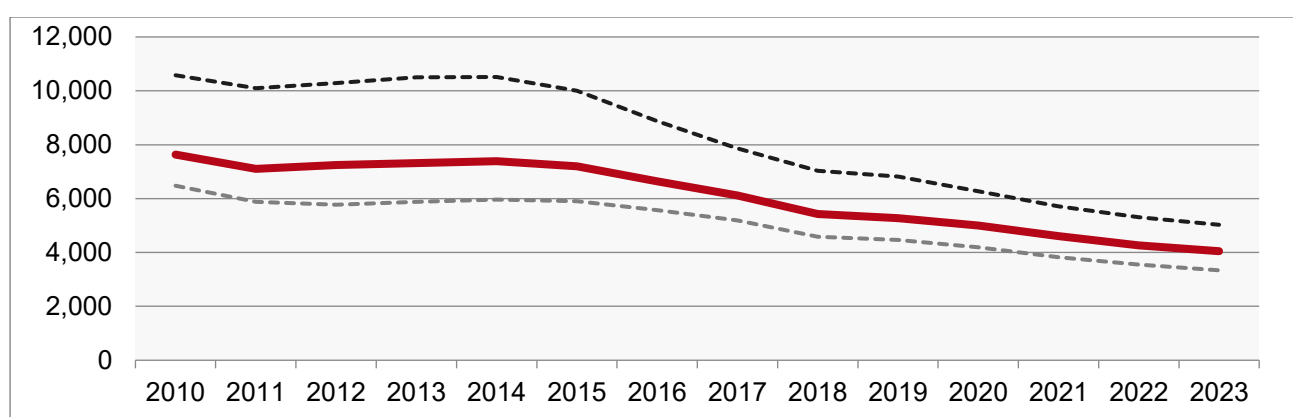
About 4,000 AIDS-related deaths occurred in Lesotho in 2023: 13% were in children, 3,800 were in adults 15+ years old (of which 2,100 were women). The annual number of AIDS-related deaths decreased by over 60% from 2008 to 2023. The number of new infections required to produce the estimated adult prevalence depends primarily on assumptions about the time from infection to AIDS-related death. The default assumption used by the UNAIDS Reference Group is nine years.

Table 3: Number of AIDS-related deaths, PLHIV, and new infections in 2023

Year	AIDS-related deaths	AIDS-related deaths (Children, ages 0-14)	AIDS-related deaths (Adults, ages 15+)	AIDS-related deaths (Women, ages 15+)
2005	18 000	3100	15 000	8500
2006	16 000	3100	13 000	7800
2007	13 000	2900	11 000	6300
2008	11 000	2700	7900	4600
2009	8700	1900	6700	3800
2010	7600	1500	6100	3200
2011	7100	1300	5800	3000
2012	7200	1100	6100	3100

2013	7300	970	6300	3100
2014	7400	870	6500	3100
2015	7200	730	6500	3100
2016	6600	590	6000	3100
2017	6100	570	5500	2900
2018	5400	<500	5000	2500
2019	5300	<500	4800	2500
2020	5000	<500	4600	2400
2021	4600	<500	4200	2300
2022	4300	<500	3900	2100
2023	4000	<500	3800	2100

Figure 4: Number of AIDS-related deaths



AIDS-related deaths have declined markedly. Mortality among children has decreased from 17% in 2005 to 13% in 2023. Mortality among women 15+ year old has decreased from 57% to 55%.

Figure 5: Trend of AIDS-related deaths 2019-2023 in Lesotho



HIV estimates for young people in Lesotho

HIV prevalence among young people 15-24 years old

HIV prevalence among young people ages 15-24 was 4.8%, a decline from 5.1%. It was higher in women (at 6.6%) than men (at 3.0%). The prevalence of HIV infection is declining more in young women than in young men. We need a scientific explanation for this finding and what we need to do better to prevent infection in young men.

Table 4: HIV prevalence among young people, young women and young men

Year	HIV prevalence (%) (Young people, ages 15-24)	HIV prevalence (%) (Young women, ages 15-24)	Adult HIV prevalence (%) (Young men, ages 15-24)
2010	9.2	13.8	4.3
2011	9.1	13.5	4.3
2012	8.9	13.3	4.3
2013	8.8	13.1	4.3
2014	8.6	12.8	4.3
2015	8.4	12.5	4.2
2016	8.0	11.9	4.0
2017	7.5	11.1	3.8
2018	7.0	10.3	3.6
2019	6.5	9.5	3.5
2020	6.0	8.6	3.3
2021	5.6	7.9	3.2
2022	5.1	7.2	3.0
2023	4.8	6.6	3.0

Number of young people and adolescent girls and women living with HIV

Analysis of the estimates among young people show that about 9,800 adolescents are living with HIV that require ART; of these, more than 50% (5,600) are adolescent girls. Among young people ages 15-24 years old, 19,000 are living with HIV; of these, 70% are women (13,000). Although the trend in HIV prevalence is decreasing, youth-friendly treatment programming needs to be scaled up and sustained in Lesotho.



Table 5: Number of young adolescents living with HIV compared with adolescent girls and women ages 10-19 and 15-24 years old

Year	PLHIV (Adolescents, ages 10-19)	PLHIV (Adolescent girls, ages 10-19)	PLHIV (Young people, ages 15-24)	PLHIV (Young women, ages 15-24)
2010	14 000	9600	35 000	27 000
2011	14 000	9800	35 000	27 000
2012	15 000	9900	34 000	26 000
2013	15 000	10 000	34 000	26 000
2014	15 000	10 000	34 000	25 000
2015	15 000	9900	33 000	25 000
2016	15 000	9500	31 000	24 000
2017	14 000	9000	30 000	22 000
2018	14 000	8400	28 000	20 000
2019	13 000	7900	26 000	19 000
2020	12 000	7300	24 000	17 000
2021	11 000	6700	22 000	16 000
2022	11 000	6100	21 000	15 000
2023	9800	5600	19 000	13 000

HIV incidence rate among young people

The overall incidence rate of HIV has decreased by 50% since 2017 in young people 15-24 years old and young women ages 15-24. The levels in 2013 are now 0.45% and 0.71%, respectively, from 1.00% in 2017 for young people of all genders and 1.6% for women.

Table 6: HIV incidence rate among young people irrespective of gender and young women 15-24

Year	HIV incidence rate (%) (Young, ages 15-24)	HIV incidence rate (%) (Young women, ages 15-24)
2010	1.9	2.9
2011	1.9	2.8
2012	1.9	2.8
2013	1.8	2.7
2014	1.7	2.5
2015	1.5	2.3
2016	1.3	2.0
2017	1.0	1.6
2018	0.86	1.3
2019	0.76	1.2
2020	0.63	1.0
2021	0.58	0.92
2022	0.48	0.76
2023	0.45	0.71

Number of new infections in adolescents and young people

About 630 new HIV infections occurred among adolescents 10-19 years old; of those, 560 were among adolescent girls. Among young people ages 15-24, 1,700 new infections occurred, of which 1,300 were in young women.

Table 7: Comparison of new HIV infections in adolescents by gender, adolescents girls and young people, and young girls

Year	New HIV infections (Adolescents, ages 10-19)	New HIV infections (Adolescent girls, ages 10-19)	New HIV infections (Young people, ages 15-24)	New HIV infections (Young women, ages 15-24)
2010	2600	2200	6700	4900
2011	2500	2200	6600	4800
2012	2500	2100	6500	4800
2013	2400	2100	6400	4700
2014	2300	1900	5900	4400
2015	2100	1800	5400	4000
2016	1700	1500	4500	3400
2017	1400	1200	3700	2800
2018	1200	1000	3100	2400
2019	1100	940	2800	2200
2020	890	780	2400	1800
2021	810	720	2200	1700
2022	670	590	1800	1400
2023	630	560	1700	1300



Treatment and prevention are saving millions of lives

The treatment and prevention programme is saving lives in Lesotho. In 2023, 256,767 Basotho were tested and knew their status as HIV positive. Of those, 6,118 were children 0-14 years old; 250,649 were 15+ years old; 157,932 were women; and 92,718 were men.

Table 8: Number of PLHIV with known HIV status in Lesotho

Year	Number who know their HIV status (All ages)	Number who know their HIV status (Children, ages 0-14)	Number who know their HIV status (Adults, ages 15+)	Number who know their HIV status (Women, ages 15+)	Number who know their HIV status (Men, ages 15+)
2010	193354	5285	188069	126855	61214
2011	205500	5667	199833	132504	67328
2012	217502	6003	211499	138083	73416
2013	237117	6077	231040	148262	82778
2014	254696	6647	248049	156682	91367
2015	267440	8519	258921	161794	97127
2016	278218	10312	267906	165965	101941
2017	281326	9649	271677	167726	103951
2018	280035	8977	271057	167364	103693
2019	278288	8988	269300	166602	102698
2020	271056	7563	263493	163715	99778
2021	264697	6976	257722	160821	96901
2022	260106	6798	253308	158931	94377
2023	256767	6118	250649	157932	92718

In 2023, of those living with HIV and knew their HIV status, 241,462 were enrolled on ART for all ages. Of those, 5,109 were children 0-14 years old; 236,353 were adults 15+ years old; 153,057 were women 15+ years old; and 83,296 were men. Nearly 10,000 new enrolments on ART were made within 12 months in the country.

Table 9: Number of people living with HIV on ART in Lesotho

Number of people living with HIV on ART					
Year	All ages	Children (ages 0-14 years)	Adults (ages 15+ years)	Women (ages 15+ years)	Men (ages 15+ years)
2010	94288	4812	89476	57505	31970
2011	98174	5028	93146	58026	35120
2012	109090	5246	103844	67076	36768
2013	120871	5201	115670	75317	40354
2014	132449	5687	126762	82784	43978
2015	153459	7466	145993	93527	52466

2016	181169	9175	171994	109203	62791
2017	201509	8629	192880	125214	67666
2018	206226	8427	197799	125422	72377
2019	220828	8292	212536	135458	77078
2020	227806	6733	221073	141677	79396
2021	232439	6239	226200	145066	81134
2022	235453	5738	229715	148019	81696
2023	241462	5109	236353	153057	83296

Lesotho has a successful viral load testing programme: in 2023, 223, 178 PLHIV benefited from viral suppression testing services. The number of Basotho who recorded a suppressed viral load as part of treatment for prevention was 238,346 for all ages, including 4,921 children 0-14 years old; and 233,424 adults 15+ years old, of which 151,380 were women and 82,044 were men. See details in Table 10. More Basotho have reported increased access to ART and as well increased suppression activities in the country.

Table 10: Number of PLHIV with suppressed viral load in Lesotho

Number of PLHIV with suppressed viral load					
Year	All ages	Children (ages 0–14 years)	Adults (ages 15+ years)	Women (ages 15+ years)	Men (ages 15+ years)
2018	192412	7456	184956	118985	65971
2019	206163	7086	199077	126570	72507
2020	221289	6167	215122	137868	77254
2021	227779	5779	222000	142778	79222
2022	231688	5356	226332	146366	79966
2023	238346	4921	233424	151380	82044

HIV testing and treatment cascade in 2023

Lesotho is progressing well towards achieving the 95-95-95 targets by 2025. The score card of the HIV testing and treatment cascade for all ages was 95.89.88. This was an improved treatment performance, compared to 2022.

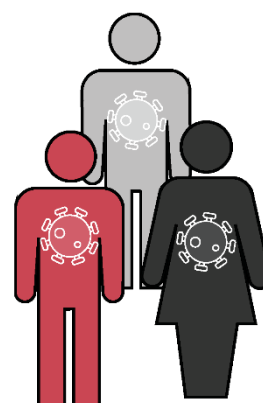
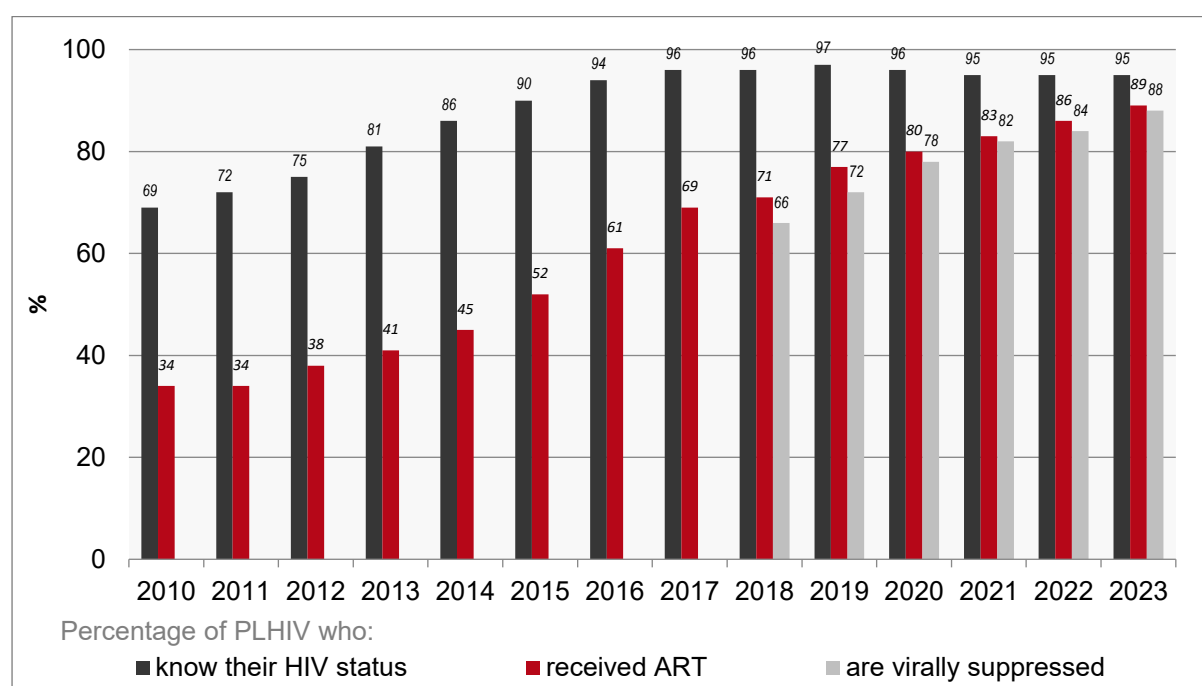
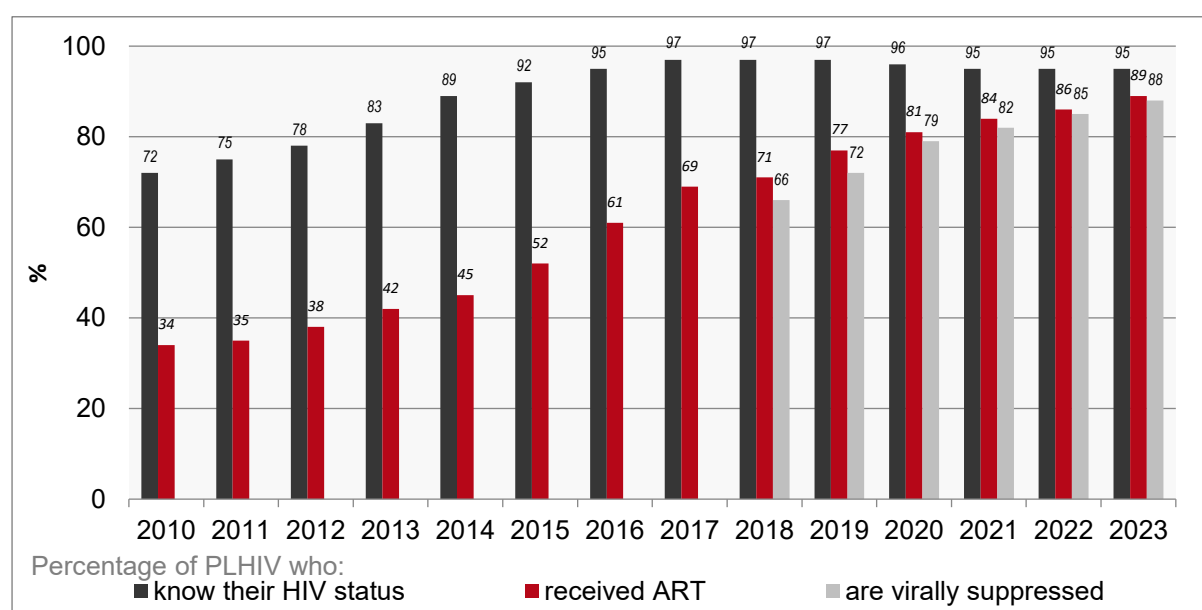


Figure 6: HIV testing and treatment cascade for all ages



The treatment cascade in 2023 for adults 15+ years old was 95.89.88.

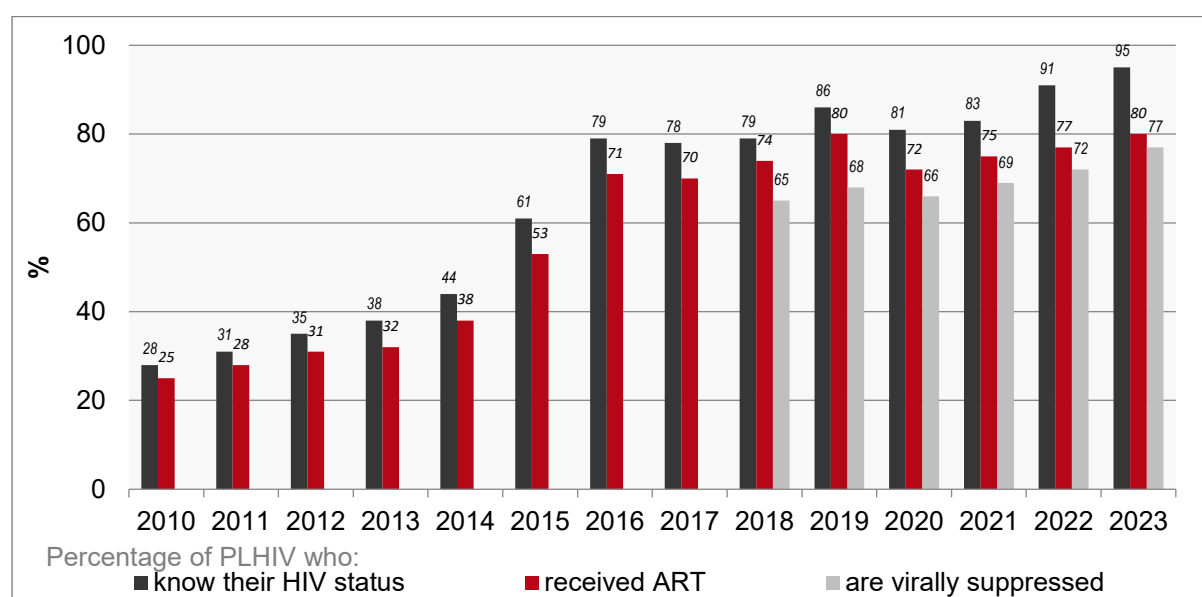
Figure 7: HIV testing and treatment cascade for adults 15+ years old



The testing and treatment cascade for children 0-14 years old in 2023 was 95.80.77. This value also showed improvement, compared to 2022 values.

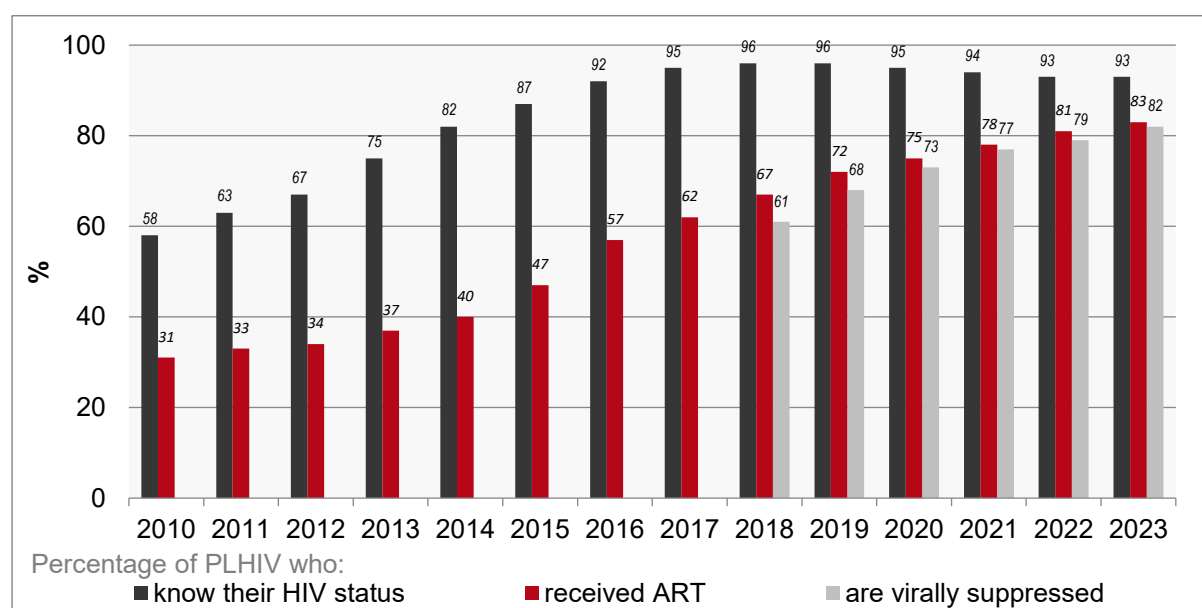


Figure 8: HIV testing and treatment cascade for children 0-14 years old



The treatment cascade for men was 93.83.82 in 2023, which was an improvement, compared to the previous year in some of the indicators.

Figure 9: HIV testing and treatment cascade for men (15+ years old)



The testing and treatment cascade for women was far more successful than men in 2023, namely 96.93.92.

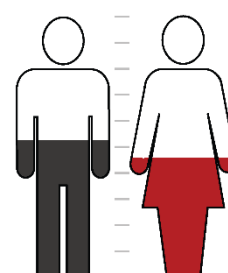
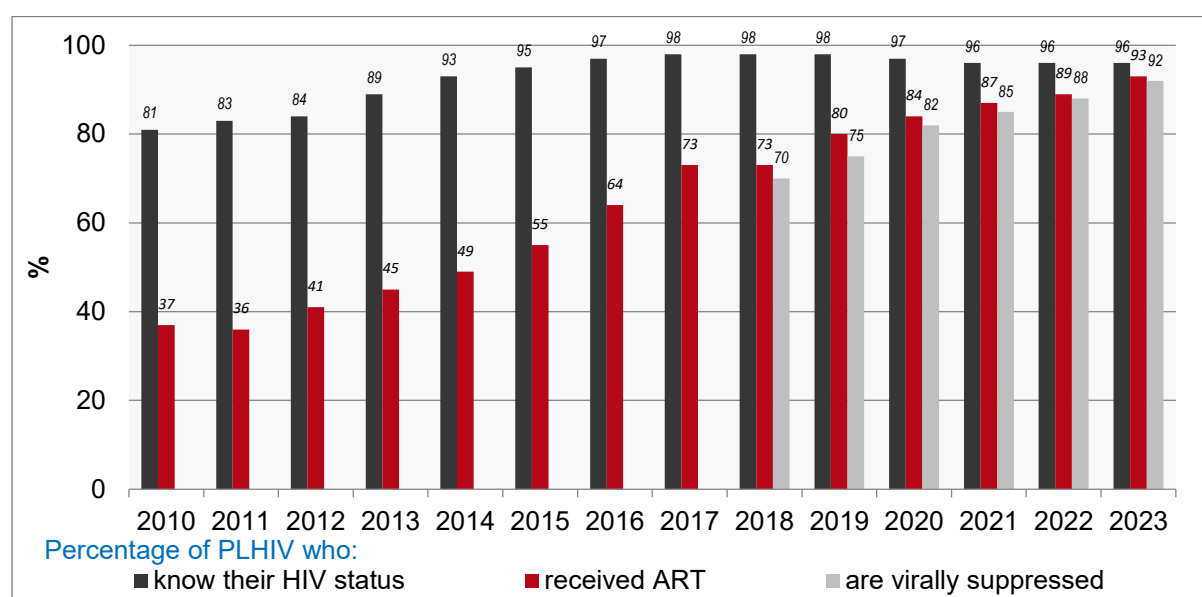


Figure 10: HIV testing and treatment cascade for women (15+ years old)

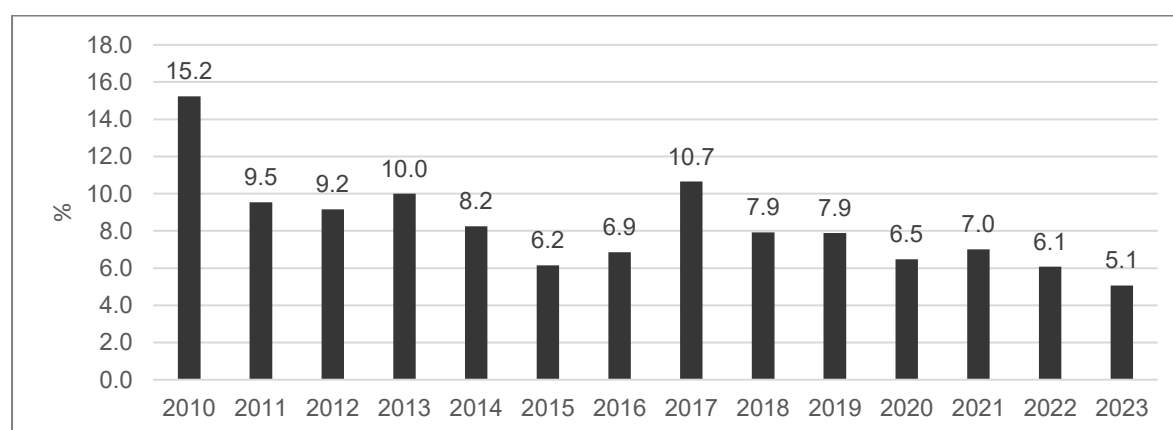


Percentage of pregnant women living with HIV who received ART

Final transmission rate including breastfeeding period (by percent)

The mother-to-child transmission (MTCT) rate in Lesotho has been declining since 2017. In 2023, Lesotho attained the global target of 5.1% that is required to prepare for achieving the elimination target for the country.

Figure 11: Trend in MTCT rates in Lesotho



Understanding the sources of new HIV infections in children is critical in facilitating and prioritization gaps and interventions needed to achieve eMTCT. A significant number of new infections among children in Lesotho are due to HIV-positive women not receiving ART.

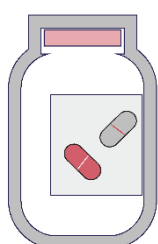
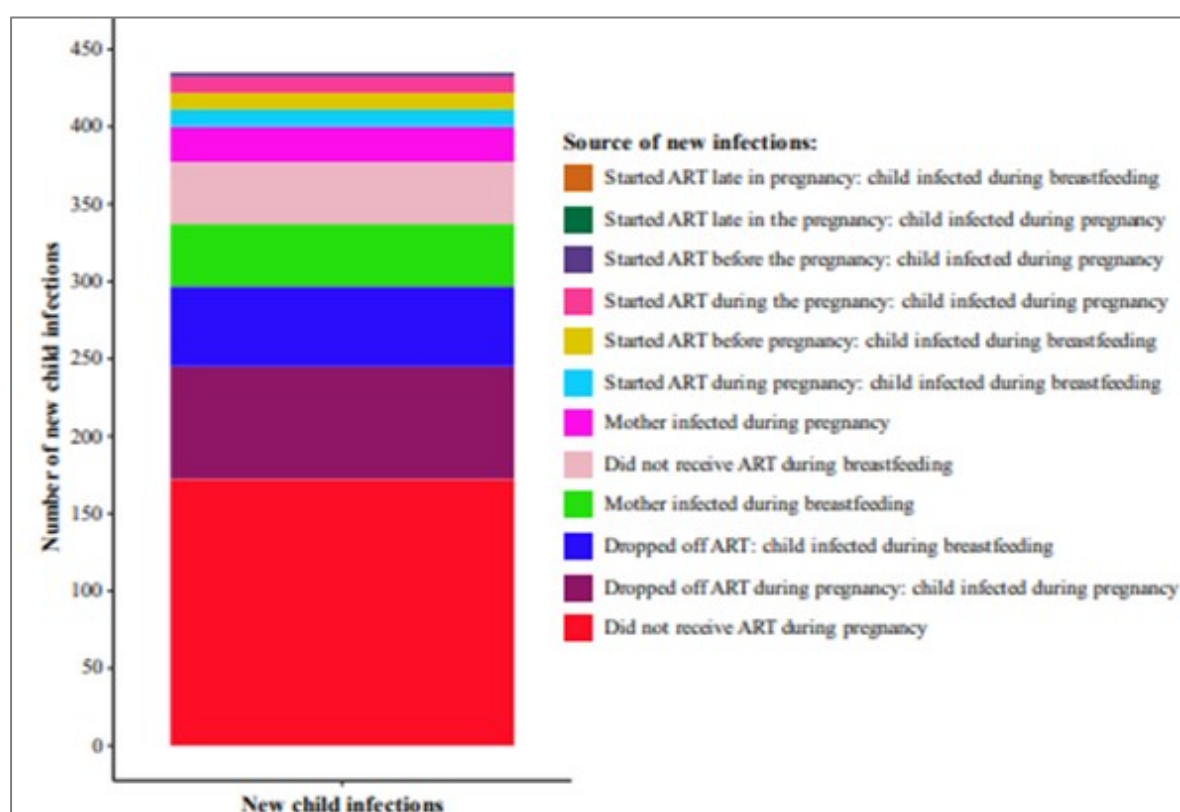


Figure 12: Source of infection among infants



The number of women needing ART to prevent MTCT has been on the decline. Several factors may be contributing to this pattern: an accelerating decline in the country's fertility rate, with increasing poverty resulting in Basotho choosing to have smaller families, and the higher age of women living with HIV in the country.

Only 6,531 of the 7,300 women who needed eMTCT services received ART for their health and to prevent vertical transmission in their infants. Overall, ART coverage increased from 90% to 93%, nationally, an increase of 67% from 2010.

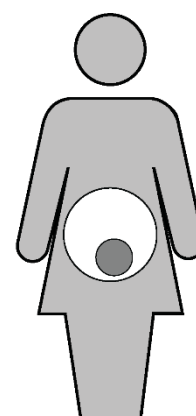
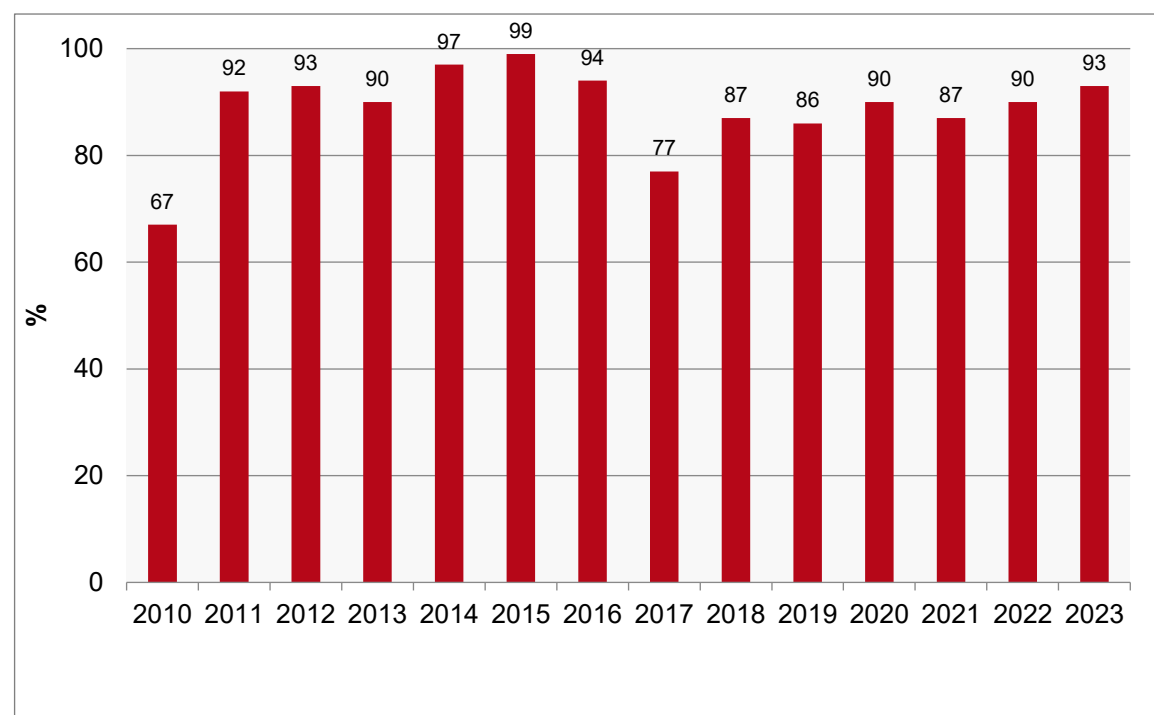


Table 11: Prevention of mother-to-child transmission (PMTCT) cascade for the mother

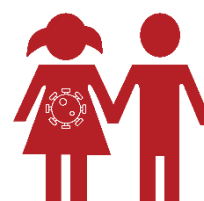
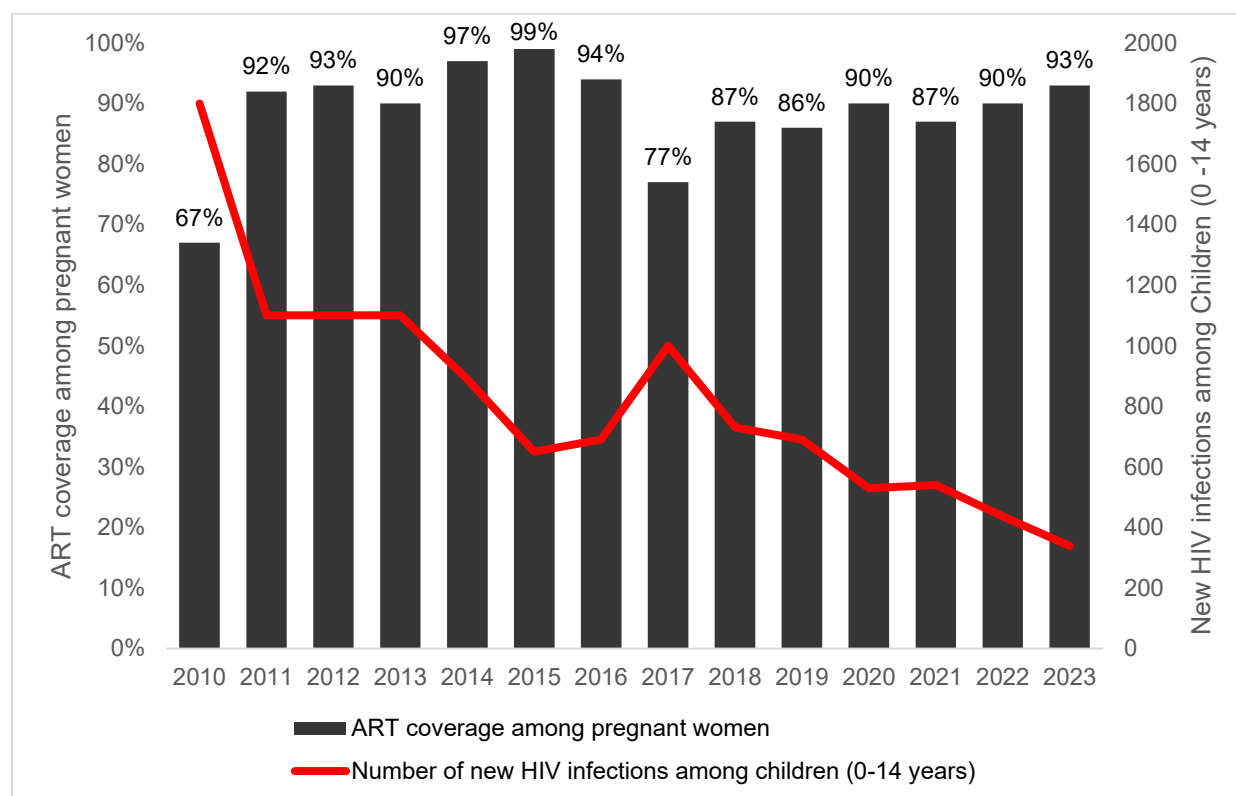
Year	Pregnant women needing ART for PMTCT	Pregnant women receiving ART	Estimated percentage of pregnant women living with HIV who received ART for PMTCT
2010	12 000	8047	67
2011	12 000	10874	92
2012	12 000	10719	93
2013	11 000	10126	90
2014	11 000	10617	97
2015	11 000	10495	99
2016	10 000	9588	94
2017	9800	7525	77
2018	9300	8122	87
2019	8900	7611	86
2020	8300	7491	90
2021	7900	6848	87
2022	7300	6531	90
2023	6800	6305	93

Figure 13: ART coverage among pregnant women



Note: Child estimates were not published in 2023.

Figure 14: ART coverage among pregnant women and new HIV infections among children 0–14 years old in Lesotho, 2010–2023



District Cascades

District HIV prevalence

The estimated HIV prevalence at the subnational levels ranged from 20.1% in Maseru to 15.4% in Butha-Buthe. The districts with the highest HIV burden remained Maseru (20.1%), Mafeteng (19.6%), and Leribe (19.3%). Those with lowest HIV prevalence were Butha-Buthe and Mokhotlong (15.4% respectively), Qacha's Nek (15.9%), Thaba-Tseka (17.1%), and Berea (17.2%).

The number of new HIV infections was recorded as highest in Maseru, with 1,500 new infections, followed by Leribe, while a lower number new HIV infections was recorded in Mokholong (202), and Buhta-Buthe (241).

The district with the largest number of PLHIV were Maseru (85,000), Leribe (46,700), and Berea (33,900). Relatively lower numbers of PLHIV were reported in Qacha's Nek (7,500), Mokhotlong (10,700) and Butha-Buthe (12,600).

The ART coverage was highest in Mafeteng (91.5%), Qacha's Nek (91.1%), and Maseru (90.5%). More efforts are needed to remove ART implementation bottlenecks in the following districts with lower ART coverage: Quthing (79.8%), Mohale's Hoek (82.8%), and Butha-Buthe (86.9%).

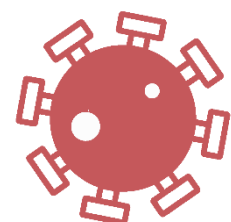
Table 12: District estimates of HIV prevalence, new infections, PLHIV and ART coverage pattern

Area	PLHIV (All ages)	HIV prevalence (15-49 Years)	ART coverage (All ages)	New infections (All ages)
Maseru	85,000 (81,200 – 88,500)	20.1% (19.2% – 21.0%)	90.5% (87.4% – 93.2%)	1,500 (1,300 – 1,600)
Butha-Buthe	12,600 (11,600 – 13,600)	15.4% (14.0% – 16.7%)	86.9% (80.7% – 91.6%)	241 (212 – 275)
Leribe	46,700 (44,100 – 49,200)	19.3% (18.2% – 20.3%)	89.2% (85.0% – 92.5%)	800 (800 – 900)
Berea	33,900 (31,400 – 36,400)	17.2% (15.9% – 18.4%)	90.5% (86.6% – 93.7%)	600 (500 – 700)
Mafeteng	24,600 (23,000 – 26,300)	19.6% (18.3% – 20.9%)	91.5% (87.8% – 94.5%)	399 (364 – 441)
Mohale's Hoek	21,500 (19,700 – 23,400)	18.9% (17.3% – 20.6%)	82.8% (76.0% – 88.2%)	413 (362 – 473)
Quthing	12,800 (11,700 – 13,900)	17.6% (16.0% – 19.2%)	79.6% (71.5% – 86.5%)	268 (229 – 316)
Qacha's Nek	7,500 (6,800 – 8,200)	15.9% (14.2% – 17.4%)	91.1% (86.2% – 94.9%)	131 (116 – 149)

Mokhotlong	10,700 (9,700 – 11,700)	15.4% (14.0% – 17.0%)	89.2% (83.8% – 93.2%)	202 (177 – 230)
Thaba-Tseka	16,200 (14,800 – 17,500)	17.1% (15.6% – 18.6%)	89.2% (83.9% – 93.1%)	288 (257 – 325)

Conclusion

Lesotho is making good progress towards achieving the UNAIDS 95-95-95 targets in 2025, as well as ending AIDS in 2030. With sustainability of the current efforts and more innovation to scale up treatment and prevention programmes in the country, the outlook is bright. Let us push the last mile to achieve the 95-95-95 goals as well as the three goals of eMTCT of HIV, syphilis, and hepatitis. It is time to remove all structural barriers and implementation bottlenecks, and to increase the absorptive capacity of secured funding in the country.





LESOTHO's 2024 National HIV Estimates

Lesotho is on track in meeting the 95.95.95 targets



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