

# UNVEILING COMMUNITY-CENTRIC DYNAMICS FOR IMPROVED HEALTH AND NUTRITION OUTCOMES: EVALUATIVE INSIGHTS ON AN INTEGRATED NUTRITION AND HIV/AIDS PROGRAMME IN LESOTHO

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## Abstract

From September 2019 to March 2023, UNICEF and the Government of Lesotho ran a three-year Integrated Nutrition and HIV/AIDS program across all districts. The main goal was to improve the health and nutrition of women and children, especially those affected by HIV/AIDS. The program aligned with global and regional directives, including the Sustainable Development Goals (SDGs) 2, 3, and 5, Africa's Agenda 2063, and various national health strategies of Lesotho. The evaluation used a theory-driven methodology, leveraging the program's Theory of Change (ToC) and Logical Framework (LogFrame) to assess key outcomes and outputs. A mixed-method approach included reviewing 20 essential documents and collecting primary qualitative and quantitative data at national, district, and community levels. Three districts and six communities were randomly selected for a comprehensive evaluation. The qualitative methods involved key informant interviews (KIIs) and focus group discussions (FGDs), supplemented by quantitative surveys of 48 households and 21 supervisors. Despite some challenges, there were significant positive changes in community health behaviours and nutritional outcomes, supported by community engagement, local governance, and behaviour change strategies. Male engagement notably contributed to achieving the program's objectives. These findings provide a deeper understanding of community-centred program dynamics and offer important lessons for future health and nutrition interventions in marginalized settings. They also contribute valuable insights to both practical and policy discussions on integrated health programs.

**Keywords:** integrated nutrition-HIV/AIDS programmes, community-centric model, endline evaluation, sustainable development goals, poverty alleviation.

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## Introduction

The Kingdom of Lesotho, nestled in the highlands of Southern Africa, is renowned for its breath taking mountain landscapes, which also present significant developmental challenges (UNICEF & Lesotho Red Cross Society, 2023; UNAIDS, 2023, 2022; IMF, 2022). The rugged terrain makes it difficult to expand and maintain essential infrastructure, affecting transportation and accessibility (UNDP, 2023; International Commission of Jurists, 2023; Leenknecht et al., 2021; FAO & UNICEF, 2019). Lesotho's economy, rooted in traditional craftsmanship and agriculture, struggles with limited arable land, leading to a heavy reliance on external financial aid and remittances (UNDP, 2023; Metro, 2022). Lesotho also faces severe public health challenges due to the high prevalence of HIV/AIDS, which exacerbates

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nutritional deficits among the immunocompromised population and increases maternal and child morbidity and mortality rates (UNDP, 2023; Bester, 2022).

The nation grapples with a dual burden of malnutrition, characterized by widespread undernutrition and emerging obesity (Mairos Ferreira & Muthengi, 2023 a, 2023 b; Mairos Ferreira, 2023; Hemat et al., 2022). Food insecurity, lack of dietary diversity, and limited access to clean water contribute to high rates of stunting and wasting among children, while lifestyle changes lead to a rise in non-communicable diseases like obesity and cardiovascular disorders (Mairos Ferreira et al., 2023; Gaston et al., 2022). These challenges are intertwined with broader socio-economic factors such as poverty, education levels, and healthcare accessibility (Government of Lesotho, 2023 a, 2023 b; Mairos Ferreira & Muthengi, 2023 a, 2023 b; Leenknecht et al., 2021; FAO & UNICEF, 2019). Climate change further exacerbates Lesotho's vulnerability, causing unpredictable weather patterns that disrupt agriculture and degrade water resources, impacting public health and nutrition (WHO African Region, 2023; WFP, 2023 a, 2023 b). Additionally, structural challenges within the healthcare system, including shortages of healthcare personnel, pharmaceuticals, and infrastructure, hinder efforts to address these issues effectively (Mairos Ferreira & Muthengi, 2023 a, 2023 b; Mairos Ferreira, 2023; UNAIDS, 2023, 2019).

### ***Focusing on the Intersection of Nutrition and HIV/AIDS in Lesotho***

Within Lesotho's public health sector, the interplay of topographical and socio-economic factors presents a unique set of challenges. The country faces an adult HIV prevalence rate of 19.3% (UNAIDS, 2023, 2019), which heavily impacts its health landscape. This issue is compounded by a noteworthy tuberculosis (TB) co-morbidity, creating a complex epidemiological profile that requires multifaceted healthcare strategies. Analyses of HIV management in Lesotho highlight progress in public awareness and treatment adherence. However, there is a pressing need for improved early diagnostic protocols, particularly for children. Current mother-to-child transmission rates, especially in postnatal contexts, necessitate a stronger focus on preventive care and intervention. This includes optimizing antiretroviral regimen adherence among expectant and recent mothers and enhancing infant diagnostics to reduce vertical transmission. Implementing these measures using integrated approaches would significantly strengthen Lesotho's efforts to mitigate the spread of HIV among vulnerable populations (Mairos Ferreira & Muthengi, 2023 a, 2023 b; Bester, 2022).

The nutritional panorama in Lesotho is characterized by the confluence of undernutrition, overnutrition, and pronounced micronutrient insufficiency, manifesting a 'triple burden' of malnutrition (Mairos Ferreira & Muthengi, 2023 a, 2023 b; Mairos Ferreira, 2023; Hemat et al., 2022). Stunting prevalence in children under five, a significant concern indicated by a rate that exceeds one-third of this demographic, encapsulates the socio-economic impediments that undercut nutritional adequacy and diversity (UNICEF & Lesotho Red Cross Society, 2023). The 2022 Global Hunger Index delineates

Lesotho's position as acutely food insecure, necessitating an incisive and multi-tiered response strategy to address this public health emergency. Notwithstanding the concerted interventions aimed at redressing malnutrition, the trajectory of progress has been demonstrably gradual. The Lesotho Zero Hunger Strategic Review reveals only incremental progress in attenuating the prevalence of underweight conditions and wasting in children under five years of age. Though a downtrend in stunting rates is observable, the prevalence remains unsettlingly high, positioning Lesotho within the high prevalence bracket (WHO, 2023 a, 2023 b).

In sum, the pervasive nature of HIV and nutrition challenges in Lesotho, underpinned by geographic, economic, and infrastructural factors, calls for a comprehensive and sustained public health response. The intricate dynamics of malnutrition necessitate an approach that integrates immediate health interventions with long-term strategies to mitigate the foundational causes of food insecurity and socio-economic instability.

#### *The Integrated Nutrition and HIV/AIDS Programme*

From September 2019 to December 2022, Lesotho rolled out the Integrated Nutrition and HIV/AIDS Program. Led by UNICEF in partnership with the Lesotho government and funded by the UK's FCDO, this initiative aimed to align with global health directives and Lesotho's national priorities. The program targeted malnutrition and HIV/AIDS, supporting the Sustainable Development Goals 2, 3, and 5. It also reflects the mandates of Agenda 2063 and Lesotho's strategic plans.

Key stakeholders from various sectors supported the program, creating a strong multi-agency collaboration. This included the Food and Nutrition Coordinating Office (FNCO) of Lesotho, the Ministry of Agriculture, the World Food Programme (WFP), the Elizabeth Glaser Paediatric AIDS Foundation (EGPAF), and the World Bank. These partnerships extended the program's reach, enhancing its ability to deliver comprehensive healthcare services to those living with HIV/AIDS and facing nutritional challenges. Catholic Relief Services (CRS) was the principal implementing partner, driving the nutrition component in collaboration with Caritas Lesotho. They used a dual approach of edutainment for behaviour change and social accountability measures. Mantsopa Institute and SkillShare International provided consultancy and training, ensuring effective engagement and educational strategies. CRS implemented the community nutrition strategy in four districts, while the Ministry of Health (MOH) scaled up efforts nationwide, managing the Micronutrient Program, the prevention of mother-to-child transmission (PMTCT) initiative, and supporting Village Health Workers across all ten districts. This approach aimed to ensure the implementation of a comprehensive service delivery, which was, in fact, responsive to community needs.

The program's long-term goal was to improve health, nutrition, and HIV-related outcomes for women and children, particularly those at risk or living with HIV. It aimed to dismantle barriers to accessing

services, strengthen health system capabilities, and enhance service quality across 69 community councils in Lesotho. UNICEF Lesotho's Theory of Change (ToC) for the project outlined immediate outcomes, including promoting exclusive breastfeeding among pregnant and breastfeeding women, including those living with HIV. It also intended to enhance counselling on infant and young child feeding (IYCF) practices for women in the PMTCT Program, laying the groundwork for its broader ambitions.

The program addressed two main challenges related to poverty alleviation. First, it aimed to improve women and children's access to high-quality health services, enhancing not just availability but also the standards of care to significantly impact health outcomes. Second, it addressed the widespread lack of information that hinders informed healthcare decisions. Through education and empowerment initiatives, the program sought to enable communities, especially those historically underserved, to make better health-related choices (iQvia, 2023; Mairois Ferreira & Muthengi, 2023 a, 2023 b; Mantsopa Institute, 2022; UNICEF, 2022; Meveneka, 2022).

## **Materials and Methods**

The final evaluation of the Integrated Nutrition-HIV Program in Lesotho followed a structured three-phase approach to assess the program's effectiveness and gather insights for future health initiatives. In the Inception Phase, evaluators established the study's scope and objectives, creating an evaluation framework that aligned with the program's Theory of Change. This phase identified the necessary data sources and set the key objectives for the evaluation. During the Primary Research Phase, the team implemented the previously defined data collection strategy. They reviewed both secondary and primary data sources and conducted extensive fieldwork, including surveys, interviews, and focus group discussions in various national and community settings. This phase aimed to gather qualitative and quantitative data on the program's reach and impact. In the final Analysis and Reporting Phase, the collected data was analysed using quantitative descriptive and qualitative thematic methods. This phase identified the program's strengths and weaknesses, offering practical recommendations and assessing its overall effectiveness, as reported by iQvia in 2023. The evaluation methodology was a mixed-method, participatory approach, and it emphasized gender sensitivity and social inclusiveness. The evaluation was theory-based, referencing the program's Theory of Change, and used OECD/DAC criteria to assess relevance, effectiveness, efficiency, coherence, and partnership. The evaluation covered three districts in Lesotho (Maseru, Mokhotlong, and Butha-Buthe) selected to represent a range of HIV/AIDS nutrition impacts.

### ***Sampling***

The evaluation methodology was designed to capture stakeholder perspectives within Lesotho's Integrated Nutrition-HIV Program landscape accurately. A calibrated sampling strategy combined purposive and convenience sampling methods to create a representative cohort of stakeholders. This strategy aimed for authenticity while mitigating potential biases from convenience sampling. Ten individuals were meticulously selected for in-depth interviews, including eight individual Key Informant Interviews (KIIs) and one collective KII, providing a layered understanding of the program's operational nuances. Additionally, 125 participants in Focus Group Discussions (FGDs) contributed to the dialogue on the qualitative dimensions of program implementation, ensuring that gender perspectives were included. On the quantitative front, surveys of 48 households assessed the program's tangible impact on the domestic sphere, exploring the perceived value of the interventions in everyday life. Complementary to these insights, 21 supervisor surveys shed light on aspects of program oversight and management. Central to the evaluation's design was a gender-balanced sampling approach, reflecting a commitment to inclusivity and aligning with contemporary evaluative best practices. This approach also echoed the program's focus on empowering women within the beneficiary groups (iQvia, 2023).

### ***Ensuring Data Integrity and Management***

The methodology for evaluating the Integrated Nutrition-HIV Program was designed to be comprehensive, credible, and constructive, aiming to improve health intervention strategies in similar settings (UNICEF, 2022). The team used a meticulous approach to ensure data integrity and quality, beginning with rigorous training and a pre-testing phase for data collection tools. Training, led by a project advisor, the evaluation lead from iQvia, and both local and international members including a UNICEF evaluation lead, spanned a full day and included both in-person and virtual sessions. This preparation concluded with thorough pre-testing in Maseru, featuring simulations of data collection activities (iQvia, 2023). For data management and analysis, precision was paramount. Interviews and discussions were transcribed verbatim and underwent detailed thematic analysis, while quantitative data was meticulously handled and analysed using Excel. Triangulating these diverse data sources was crucial for the evaluation's robustness, ensuring well-supported conclusions. The evaluation team also prioritized data quality and confidentiality by establishing a secure online database, which streamlined access and protected data integrity. This structured approach to data management demonstrated the team's commitment to high standards of data stewardship throughout the evaluation process (iQvia, 2023).

### ***Ethics***

The ethical framework guiding the evaluation was based on principles set by the United Nations Evaluation Group (UNEG). Key principles such as beneficence, non-maleficence, autonomy, justice, professionalism, and impartiality were actively practiced throughout the process. Ensuring the independence of the evaluation and maintaining transparent communication with stakeholders were central to fostering a culture of accountability. Informed consent, respect for participant autonomy, data protection, and stringent confidentiality measures were rigorously implemented. This ensured that the evaluation's ethical standards were upheld at all times. Ethical approvals and research permits were obtained from entities such as UNICEF and the Lesotho Government, affirming the evaluation's adherence to the highest standards of responsible research conduct.

### ***Key limitations and mitigation strategies***

A few challenges were identified during the evaluation, each met with strategic mitigation strategies to maintain the integrity and reliability of the process. A significant challenge was accessing key stakeholders, particularly program staff, complicated by the timing of the evaluation post-program closure. The support of the UNICEF Country Office staff was crucial in facilitating key informant interviews and focus group discussions. Although only 45% of planned interviews were completed due to limited informant availability, resulting from some stakeholders' lack of program awareness and high role turnover, the evaluation team refined communication strategies to increase participation among essential contributors. Another challenge was the composition of focus group discussions, which consisted exclusively of women aged 18 and older, potentially introducing gender bias and affecting group dynamics. To address this, individual discussions were held with male partners to ensure a more comprehensive range of insights. Triangulation with other qualitative and quantitative data also provided a more balanced assessment of the findings. Delays in conducting focus group discussions due to local community events and political engagements were mitigated through collaboration with community authorities, which resulted in the completion of most of the planned FGDs. Despite these challenges, the evaluation's adaptability and strategic planning ensured the identification of core trends and the acquisition of relevant results. The data collected remained reliable and valid, offering actionable insights for future program considerations (iQvia, 2023).

## Results and Discussion

The Integrated HIV & AIDS-Nutrition Programme in Lesotho has achieved several milestones. Despite on-ground challenges, there have been positive shifts in community health behaviours and nutritional outcomes, primarily driven by community engagement, local governance, and behaviour change strategies. The following narrative discloses the core conclusions derived from the evaluation findings, offering a nuanced understanding of the dynamics within community-centric health programming.

The design and execution of the Integrated Nutrition-HIV Programme in Lesotho demonstrated a profound understanding of the epidemiological landscape, aligning with the country's health policies and the specific exigencies of HIV & AIDS and malnutrition.

"Gender inequality in Lesotho has been identified as one of the main contributing factors to poverty and food insecurity as well as to poor health outcomes for pregnant, breastfeeding women and adolescents. With a value of 0.55, Lesotho ranks 132 out of 159 countries in the Global Gender Inequality Index (GII), a metric which considers three dimensions: reproductive health, empowerment and economic activity. Lesotho has a highly embedded patriarchal society, which increases the prevalence of gender-based and sexual violence and heightens women's risk to HIV. Female headed households are slightly more likely to be poor (58.1%) and single-father families are substantially less likely to be poor (48.5%)" (Maveneka, 2021, p.41).

Grounded in empirical evidence and socio-cultural awareness, the programme was carefully architected to dovetail with Lesotho's strategic health imperatives. Its alignment with the nation's policy framework ensured that interventions were not only evidence-based but also culturally attuned and policy-relevant, fostering a resonant strategy that engaged beneficiaries at the grassroots level. The programme stood as an embodiment of applied health policy integration, leveraging a syndetic approach to address the convergent challenges of HIV & AIDS and nutrition deficits. By adhering to the government of Lesotho's health principles and objectives, the initiative exemplified how health interventions, when underpinned by national health strategies and operationalized through a community-centric lens, can yield optimal public health outcomes. This approach underscores the critical nexus of policy coherence, strategic health planning, and community engagement, paving the way for sustained health improvements and bridging the gap between policy intent and health impact.

"The systemic challenges, ranging from societal to individual barriers, significantly influenced the engagement of youth in the integrated nutrition and HIV program, in its full life cycle (iQvia, 2023; Maveneka, 2021). The pandemic escalated these difficulties, disrupting established engagement methods and adding new restrictions on program participation due to necessary public health measures and resulting economic hardships. Despite these hurdles, the conclusive evaluation findings indicate that UNICEF crafted a strong and adaptive project that sustained its pertinence throughout its entire duration. The Program was found to be relevant, both in design and implementation. The Program's ToC clearly indicated outcomes and outputs of the Program, which were clear and adequate. The ToC was further adapted to align with the emerging global COVID-19 outbreak. This illustrates the flexibility and adaptability of the Program to actively promote high quality

implementation and to (preventively and reactively) mitigate against limitations posed by the COVID-19 pandemic" (iQvia, 2023, p. 12)" (Mairós Ferreira & Muthengi, 2023 b, p. 9).

"The programme aimed to address two key issues deeply linked to poverty alleviation: (i) to increase women and children's access to quality health services and (ii) to address the inadequacy of information to inform decision-making. This was to be achieved through the inclusion of beneficiaries in the project development, implementation, monitoring, and evaluation. These were strongly linked to the promotion of good governance" (iQvia, 2023, p. 10).

"The Nutrition and HIV & AIDS Programme has been conscientiously designed to align with a range of national policies and strategic plans encompassing domains such as agriculture, water and sanitation, health, and HIV & AIDS management. This alignment not only ensures that the program is in harmony with the nation's broader goals but also amplifies its potential for impact and sustainability" (iQvia, 2023, p. 42).

The Lesotho Integrated Nutrition-HIV Programme's achievements are a resonant affirmation of the power of constructive partnerships in advancing public health goals. The seamless tapestry of collaborations woven throughout various echelons, from local to international spheres, created a formidable alliance, ensuring the holistic delivery of services integral to the program's aspirations. These partnerships, characterized by their synergistic and strategic interactions, not only amplified the reach and efficacy of the health services provided but also fostered a shared vision for a healthier community. At the grassroots level, forging strong relationships with community leaders laid the foundation for tailored interventions that were technically sound and, concurrently, resonated with local needs and cultural contexts. These community figureheads, revered and trusted, played a pivotal role in mobilizing the populace, facilitating an environment where health initiatives were welcomed and embraced. On the international stage, partners brought diverse strengths to the table, from technical expertise and financial resources to global best practices, all coalesced to reinforce the programme's structure and capacity. The convergence of these partnerships catalysed a multi-layered approach to health service delivery, ultimately resulting in the successful attainment of the programme's comprehensive objectives.

"In coalescing partnerships, UNICEF Lesotho consulted widely with key government departments and technical partners as part of the inception activities in preparation for the implementation of the HIV & AIDS-Nutrition integrated programme. These CoPs were held on a quarterly basis to ensure good governance and inform programme support at both policy and implementation levels with implementing partners (...) At a community level, a strategic emphasis was placed on optimizing existing structures instead of creating parallel structures solely for the implementation of this programme. The K2 strategy mandates that local authorities are engaged before community interventions are implemented. This mechanism has been widely and successfully used by Caritas Lesotho as a partner with experience in community programme implementation and innovative governance and accountability approaches" (iQvia, 2023, pp. 65-66).

The pivotal role of system strengthening and capacity building within the Lesotho Integrated Nutrition-HIV Programme cannot be understated, given its substantial contribution to bolstering the resilience and efficacy of health systems at the community council level. The programme's strategic investment



in enhancing healthcare providers' capabilities through dedicated training and support resulted in a notable elevation in the quality of services provided to two of the most vulnerable groups in the population: pregnant and lactating women and children impacted by HIV. The structured capacity-building initiatives facilitated not only the improvement of individual healthcare provider competencies but also reinforced the overall health system infrastructure. These targeted training programs, underpinned by scientific principles of health service delivery and quality improvement, were integral in ensuring that healthcare personnel were equipped with the latest knowledge and best practices in HIV and nutrition care. By embracing a model of continuous professional development, the programme succeeded in creating a workforce of skilled healthcare providers capable of delivering high-quality, evidence-based services. This, in turn, fortified the health system against the myriad challenges posed by the dual burdens of HIV and malnutrition. The improved service standard cascaded into enhanced health outcomes, which were further augmented by the programme's emphasis on the integration of health services, allowing for the optimized use of resources and facilitating a comprehensive approach to care for those most in need.

"UNICEF also supported the MoH by creating a Technical Working Group (TWG) on community health that played a key role in developing VHW tool kits and other framework documents. Additionally, the managers of the District Health Management Team (DHMT) were also trained by MoH officials as part of Training of Trainers (ToT)" (iQvia, 2023, p. 45).

The integration of community engagement into the fabric of health interventions has proven to be a powerful catalyst for change. This was manifestly evident in the Lesotho Integrated Nutrition-HIV Programme, where empirical data pointed to a marked increase in positive health outcomes. The metrics revealed an important rise in the practice of exclusive breastfeeding among children aged 0-6 months and a notable enhancement in the food consumption scores. These upward trends in health behaviours can be directly linked to the programme's rigorous community engagement strategies, which promoted a deep-rooted understanding of, and adherence to, improved nutritional practices. Such community-based approaches served to transcend the conventional top-down dissemination of health information, instead fostering a two-way dialogue that empowered local communities and engendered a sense of ownership over health outcomes. This success stems from the program's methodical approach to knowledge transfer and behavior change. Through awareness campaigns, targeted education sessions, and community-led initiatives, the program effectively shifted health behaviors. The engagement was not a mere exchange of information but a robust, interactive process that equipped community members with the knowledge and skills to implement sustainable changes in dietary and health practices. The resultant behavioural shifts were a reflection of a well-informed community, one that understood the implications of nutrition on health and was actively involved in the realization of improved health outcomes.

"The way we implement our projects as the implementing partner is through the K2 approach and that means we cannot enter the community any community without the knowledge of the local authorities...we meet the type of stakeholders who are already present in that particular area and understand what they are doing so that we will be able to meet with them and forge areas of collaboration and avoid duplication of efforts" (iQvia, 2023, p. 45).

In addition, the programme's strategic focus on behaviour change, and economic empowerment has emerged as a cornerstone of its success, particularly in the realm of nutrition. The intersection of behaviour change strategies with economic empowerment initiatives has been adeptly realized through the implementation of savings and lending schemes. These financial mechanisms have served as a catalyst for sustainable nutrition improvement efforts, enabling communities to establish and maintain home gardens. This approach not only improves nutritional intake by increasing access to fresh produce but also provides an economic boost to households. The combination of behavior change initiatives with economic development has led to positive outcomes, fostering a self-reliant culture of health and wellness. By equipping communities with resources and knowledge to cultivate home gardens, the program has enhanced dietary diversity and food security. Additionally, the economic empowerment from these activities has improved overall household well-being, promoting entrepreneurship and financial literacy, and paving the way for long-term socio-economic resilience.

"Through the implementation of the Community-led Complementary Feeding and Learning Sessions (CCFLS), women [and their families as well] initiated the savings and lending scheme initiatives. The scheme supported community women to start up vegetable gardens in their homes (...) [establishing the basis of] sustainability in food production, self-sufficiency, and improved economic outlook for families" (iQvia, 2023, p. 71).

Moreover, the deliberate engagement of male partners in Lesotho's Integrated Nutrition-HIV Programme has emerged as a significant transformative force, redefining traditional gender roles and responsibilities within the domain of health and nutrition. This strategic inclusion has catalysed a progressive shift in gender dynamics, particularly evident in the improved access to, and utilization of, health services by women and children. Scientifically, male involvement is crucial in maternal and child health outcomes. When men are actively engaged, studies have shown there is increased attendance in antenatal care, higher rates of facility births, and improved adherence to postnatal care and nutrition regimens. The efficacy of male engagement initiatives within the programme underscores a crucial realization: gender-sensitive health practices are vital for the successful implementation of health interventions. The programme's gender transformative approach did not merely aim to increase male participation but sought to fundamentally alter gender norms that traditionally limit men's roles in health and nutrition. By directly involving men, the programme not only optimized health outcomes for women and children but also contributed to a cultural shift that promotes shared health responsibilities between genders, thereby fostering equitable health-seeking behaviours and outcomes.

"This initiative did more than just disseminate health knowledge; it fundamentally addressed gender inequality by empowering men to be enablers in the healthcare journey of their female partners particularly in accessing antenatal care and PMTCT services" (iQvia, 2023, p. 70).

The implementation of the Lesotho Integrated Nutrition-HIV Programme underscored the transformative potential of a comprehensive strategy, which confronts challenges with innovative and adaptive strategies. The programme's adaptability was particularly evident in its approach to logistical and scheduling hurdles. By leveraging digital platforms for data collection, the programme not only streamlined the process but also enhanced its reach and efficiency, overcoming barriers imposed by geographical remoteness and limited access. Collaborative approaches with community authorities demonstrated the programme's commitment to working in harmony with local structures, which was critical for maintaining the momentum of service delivery and ensuring that interventions were culturally appropriate and well-received, which enhanced sustainability.

"The program's comprehensive strategy, extending past immediate nutrition and healthcare interventions (...) adopted an inclusive approach, integrating educational and social factors (...). This approach acknowledges that the factors affecting the ability of young people to participate, and flourish are multifaceted, encompassing more than just physical health and nutrition" (Mairos Ferreira, & Muthengi, 2023b, p. 15).

Efficiency in resource utilization became a hallmark of the program, particularly amid global challenges such as the COVID-19 pandemic. The program's proactive adaptations, including reallocating resources and adjusting delivery methods while safeguarding the health of participants and staff, showcased its agile and prudent management. This judicious use of resources ensured that, despite the pandemic's challenges, the program's objectives were met without compromising quality or scope.

Monitoring and Evaluation (M&E) are crucial in the health sector for assessing program efficiency, effectiveness, and impact. In the context of the Integrated Nutrition-HIV Programme in Lesotho, M&E were essential for the continuous improvement and success of the intervention. However, the initiative faced significant challenges in establishing a strong M&E system. These challenges included technical capacity constraints, resource allocation issues, and the systematic collection and analysis of data. The evaluation emphasized the importance of robust data management and monitoring, recognizing that enhancing these capabilities is vital for the future. Additionally, accurate and systematic tracking of progress and outcomes is crucial for informed decision-making and the iterative refinement of program strategies. Strengthening the M&E system, as recommended by the evaluation, is expected to lead to more effective interventions. Ensuring that data collection and analysis are integral components of the program's structure will optimize resources, accurately measure intervention impacts, and ultimately improve health outcomes for the target populations. This focus on robust M&E practices sets a standard for future public health initiatives, demonstrating a commitment to accountability and evidence-based decision-making in advancing health objectives.

"[The evaluation recommended that] for future interventions UNICEF invests in strengthening internal capabilities on robust data monitoring including data analysis and reporting, [therefore mitigating], the risk of data inaccuracies that could result in over-reporting or under-reporting" (iQvia, 2023, p. 14).

Globally, the Lesotho Integrated Nutrition-HIV Programme has demonstrated how strategic resilience can overcome significant challenges. Despite facing logistical constraints and the COVID-19 pandemic, the program showed impressive adaptability and innovation. The evaluative report highlights the successes achieved, particularly the improvements in health and nutrition outcomes, which are credited to the program's community-centric approaches. These strategies effectively fostered local engagement and ownership, which are crucial for the sustainability and scalability of health interventions. The evidence from the evaluation serves as a valuable guide for future health interventions in similar contexts. The findings illustrate the effectiveness of integrated approaches that respond to community needs and involve the input and participation of those they serve. Such programs not only address immediate health concerns but also contribute to broader discussions on public health policy and practice. By distilling key lessons and best practices from the Lesotho programme, policymakers and practitioners can design interventions that are both impactful and feasible in similarly challenging settings. This enhances the global effort to improve health outcomes through integrated, community-focused health programs.

## **Conclusion**

Despite facing both operational and environmental challenges, the Integrated Nutrition and HIV/AIDS Programme in Lesotho has demonstrated considerable resilience and strategic agility. The program has led to significant improvements in health and nutrition outcomes, particularly in regions where community-centric approaches are crucial. Local engagement and the adoption of healthy behaviours have been fostered through the inclusion of community leaders. The emphasis on regular monitoring and evaluation (M&E) practices is another essential component, which has been clearly emphasised in the Evaluation. The evaluation underscored the importance of these practices and recommended further enhancements to ensure accurate tracking of progress and outcomes. By prioritizing data management and monitoring, the program supports informed decision-making and continuous improvement, setting a standard for future public health initiatives. These enhancements are expected to lead to optimized resource use, more effective interventions, and better health outcomes for target populations. In conclusion, the evaluation of the Integrated Nutrition and HIV/AIDS Programme in Lesotho offers valuable insights for developing similar health interventions. It affirms the effectiveness of community-centric methods and integrated approaches to health, which address immediate needs and contribute to policy dialogues. These insights have the potential to influence both practical applications and strategic

policymaking, fostering an environment where integrated health programs are realized with lasting impacts on public health and wellness.

Given the achievements and challenges of the project, the following key recommendations have been identified:

1. **To improve Monitoring and Evaluation Systems:** Investing in robust monitoring and evaluation (M&E) systems is crucial for the success of future health programs. Effective M&E systems allow for accurate tracking of progress and results, facilitating informed decision-making and continuous improvement of strategies and activities. Strengthening these systems will likely lead to more effective health interventions and better outcomes for the target populations, setting a new standard for future public health initiatives.
2. **To strengthen Partnerships for Better Coordination:** Strengthening alliances at both national and community levels can lead to a more integrated and effective approach to health service delivery. By consolidating partnerships, future programs can draw on a wider range of resources, expertise, and capacities, ensuring a comprehensive response to public health challenges in the country. Better coordinated efforts will enhance the effects and sustainability of interventions, especially in addressing the interconnected issues of HIV, nutrition, and overall health.
3. **To Deepen Community Engagement with a Focus on Male Involvement:** Comprehensive community engagement, especially targeting men and male youth in health programs, is essential. Encouraging full and inclusive participation in health and nutrition initiatives can challenge traditional gender roles and significantly improve health outcomes, for both women and children, and men and boys. Future programs should include targeted outreach and education efforts aimed at men, promoting shared responsibility for health within households and communities. Focusing on gender-transformative approaches can lead to more equitable health practices and enhance the sustainability and effectiveness of health interventions.
4. **To consider the existent topographical challenges in planning:** Lesotho's topography presents specific challenges that must be fully addressed in future programming. Acknowledging and planning for these geographical factors from the outset can improve the feasibility and sustainability of the health services. Therefore, future health initiatives should be designed to navigate the logistical complexities of Lesotho's landscape, ensuring that health services are accessible to all regions.

Implementing these recommendations can improve the strategic framework of health programs, simultaneously increasing their effectiveness and reach.

## **Acknowledgments**

The authors would like to express our gratitude to the dedicated team members who were responsible for the design, implementation, monitoring, and evaluation of this program. Our heartfelt thanks also go to the people of Lesotho, especially the communities, for their enthusiastic participation and openness during this evaluation. Their insights have greatly enhanced our understanding of their needs and stories. We also want to extend a special thanks to the Country Office (CO) Lesotho team. Your unwavering support and collaborative spirit were crucial in guiding this study to a successful conclusion. Your efforts helped bridge our operational goals with the evaluation process, enriching the overall impact of this work.

## **Declaration of Interest Statement**

The authors confirm that they have no conflicts of interest to disclose.

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