

Lesotho

This document is a compilation of all questions, justifications, and sources used to determine the 2021 Global Health Security Index scores for Lesotho. For a category and indicator-level summary, please see the Country Profile for Lesotho.

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Category 1: Preventing the emergence or release of pathogens with potential for international concern

1.1 ANTIMICROBIAL RESISTANCE (AMR)

1.1.1 AMR surveillance, detection, and reporting

1.1.1a

Is there a national AMR plan for the surveillance, detection, and reporting of priority AMR pathogens?

Yes, there is evidence of an AMR plan, and it covers surveillance, detection, and reporting = 2, Yes, there is evidence of an AMR plan, but there is insufficient evidence that it covers surveillance, detection, and reporting = 1, No evidence of an AMR plan = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a national AMR plan for the surveillance, detection and reporting of priority AMR pathogens. There is no evidence of a national AMR plan for Lesotho on the Global Database for Antimicrobial Resistance, and on the World Health Organization's (WHO) library of national action plans. [1, 2] According to the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho of 2017, Lesotho has constituted a multi-sectoral coordinating committee that is in the process of developing the National Action Plan (NAP) on AMR. [3] Furthermore, the World Organisation for Animal Health (OIE) reports that OIE, the World Health Organization (WHO) and the Food and Agriculture Organization (FAO) have assisted Lesotho in organizing an workshop during 18-22 March of 2019 to conduct a situational analysis on AMR. [4] However, the OIE does not provide any information on a time-line for the completion of the AMR plan. There is also no evidence of the draft or final plan in the Ministry of Health's website, the Ministry of Agriculture and Food Security's website as well as the Center for Disease Control Lesotho's website. [5,6, 7]

[1] World Health Organization (WHO).2019. "Global Database for Antimicrobial Resistance Country Self Assessment".[<http://amrcountryprogress.org/>]. Accessed 26 October 2020.

[2] World Health Organization (WHO). "Library of National Action Plans". [<http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 26 October 2020.

[3] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 26 October 2020.

[4] World Organisation for Animal Health (OIE). 22 March 2019. "Lesotho making major strides in the development of its AMR national action plan (NAP)". [<https://rr-africa.oie.int/en/news/lesotho-amr-national-action-plan-maseru/>]. Accessed 26 October 2020.

[5] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 26 October 2020.

[6] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 26 October 2020.

[7] Center for Disease Control and Prevention (CDC). "Lesotho Country Profile." [<https://www.cdc.gov/globalhivtb/where-we-work/lesotho/lesotho.html>]. Accessed 26 October 2020.

1.1.1b

Is there a national laboratory/laboratory system which tests for priority AMR pathogens?

All 7 + 1 priority pathogens = 2 , Yes, but not all 7+1 pathogens = 1 , No = 0

Current Year Score: 0

There is no evidence of a national laboratory system, which tests for priority AMR pathogens in the Kingdom of Lesotho. The country does not have a national AMR plan for the surveillance, detection and reporting of priority AMR pathogens, or infections caused by these pathogens. There is no evidence of a national AMR plan for Lesotho on the Global Database for Antimicrobial Resistance, and on the World Health Organization's (WHO) library of national action plans. [1, 2] Furthermore, according to the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017, there is no surveillance of AMR in human, animal or environmental health in Lesotho. [3] The JEE reports that laboratories with AMR detection and reporting capacity need to be established and that by the end of 2017 there were supposed to be 3 laboratories with microbiology capacity in the country. There is however no further evidence on the development of these laboratories. Also, Lesotho is not part of the WHO Global Antimicrobial Resistance Surveillance System (GLASS), which supports global surveillance and research on AMR. [4] There is no further updates or evidence provided on the website of the Ministry of Health or the Ministry of Agriculture and Food Security. [5,6]

[1] World Health Organization (WHO).2019. "Global Database for Antimicrobial Resistance Country Self Assessment".[<http://amrcountryprogress.org/>]. Accessed 26 October 2020.

[2] World Health Organization (WHO). "Library of National Action Plans". [<http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 26 October 2020.

[3] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 26 October 2020.

[4] World Health Organization (WHO). "Global Antimicrobial Resistance Surveillance System (GLASS)". [<https://www.who.int/glass/en/>]. Accessed 26 October 2020.

[5] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 26 October 2020.

[6] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 26 October 2020.

1.1.1c

Does the government conduct environmental detection or surveillance activities (e.g., in soil, waterways) for antimicrobial residues or AMR organisms?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence that the government of the Kingdom of Lesotho conducts detection or surveillance activities for antimicrobial residues or AMR organisms. Lesotho also does not have an AMR national plan. [1, 2] The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 also states that there is no surveillance of AMR in human, animal or environmental health in Lesotho. [3] There are no updates or further evidence of surveillance activities in soil, waterways, etc. for antimicrobial residues or AMR organisms on the Ministry of Health's website, the Ministry of Agriculture and Food Security's website, and the Department of Environment's website. [4, 5, 6]

[1] World Health Organization (WHO).2019. "Global Database for Antimicrobial Resistance Country Self Assessment".[<http://amrcountryprogress.org/>]. Accessed 26 October 2020.

[2] World Health Organization (WHO). "Library of National Action Plans". [<http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 26 October 2020.

[3] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>].

Accessed 26 October 2020.

[4] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 26 October 2020.

[5] Government of Lesotho. "Ministry of Agriculture and Food Security". [https://www.gov.ls/ministry-of-agriculture-and-food-security/]. Accessed 26 October 2020.

[6] Department of Environment Kingdom of Lesotho. "About DoE." [http://environment.gov.ls/about/default.php]. Accessed 26 October 2020.

1.1.2 Antimicrobial control

1.1.2a

Is there national legislation or regulation in place requiring prescriptions for antibiotic use for humans?

Yes = 2 , Yes, but there is evidence of gaps in enforcement = 1 , No = 0

Current Year Score: 1

There is national legislation in Lesotho that requires prescriptions for antibiotic use for humans, but there is evidence of gaps in enforcement. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 states that antibiotics are prescription only medicine in Lesotho. [1] The World Health Organization (WHO) in the "Pharmaceutical Country Profile" of 2011 also states that antibiotics require prescriptions in Lesotho, but it also states that antibiotics are sometimes sold over the counter without prescription. [2] There is also the Act No. 5 "Drugs of Abuse Act" of 2008, which regulates the production, licensing, prescription, etc. of prohibited and high risk drugs for both human and animal use. [3] This law however does not make specific reference to antibiotics. There is no further evidence provided on the websites of the Ministry of Health and the Ministry of Agriculture and Food Security. [4, 5]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1]. Accessed 26 October 2020.

[2] World Health Organization (WHO). 2011. "Lesotho Pharmaceutical Country Profile". [https://www.who.int/medicines/areas/coordination/Lesotho_PSCPNarrativeQuestionnaire_19072011.pdf?ua=1]. Accessed 26 October 2020.

[3] Government of Lesotho. Act No.5 of 2008. "Drugs of Abuse Act". [https://lesotholii.org/ls/legislation/act/5/DRUGS%20OF%20ABUSE%20ACT%202008.pdf]. Accessed 26 October 2020.

[4] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 26 October 2020.

[5] Government of Lesotho. "Ministry of Agriculture and Food Security". [https://www.gov.ls/ministry-of-agriculture-and-food-security/]. Accessed 26 October 2020.

1.1.2b

Is there national legislation or regulation in place requiring prescriptions for antibiotic use for animals?

Yes = 2 , Yes, but there is evidence of gaps in enforcement = 1 , No = 0

Current Year Score: 2

There is national legislation in Lesotho that requires prescriptions for antibiotic use for animals, and there is no evidence of gaps in enforcement. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 states that antibiotics are prescription only medicine in Lesotho for animal and human use. [1] There is also the Act No. 5 "Drugs of Abuse Act" of 2008, which regulates the production, licensing, prescription, etc. of prohibited and high risk drugs for both human and animal use. [2] This law applies to both human and animal medicines, however it does not make specific

reference to antibiotics. There is no further evidence provided on the websites of the Ministry of Health and the Ministry of Agriculture and Food Security. [3, 4] Lastly, a study published in January, 2019 on prescription of antibiotics using World Health Organization (WHO) prescribing indicators, finds that Lesotho has good prescribing practices from the National Essential Drug List. However, it does not provide any evidence that this also applies to animals. [5]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 26 October 2020.

[2] Government of Lesotho. Act No.5 of 2008. "Drugs of Abuse Act".

[<https://lesothoii.org/ls/legislation/act/5/DRUGS%20OF%20ABUSE%20ACT%202008.pdf>]. Accessed 26 October 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 26 October 2020.

[4] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 26 October 2020.

[5] Europe PMC. 1 January 2019. "Assessment of Antibiotic Prescribing Patterns at Outpatient Pharmacy Using World Health Organization Prescribing Indicators". [<https://europepmc.org/article/PMC/6836303>]. Accessed 21 November 2020.

1.2 ZONOTIC DISEASE

1.2.1 National planning for zoonotic diseases/pathogens

1.2.1a

Is there national legislation, plans, or equivalent strategy documents on zoonotic disease?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a national law or plan document on zoonotic diseases. According to the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017, anthrax and rabies are the two priority zoonotic diseases along with bovine brucellosis and tuberculosis. However, there is no evidence provided for the existence of a national law or plan on zoonotic disease. [1] The JEE also reports that there is a plan for avian influenza, but there is no evidence of this plan being publicly available. Lesotho has developed a draft "Animal Health and Animal Production Policy" in 2017, but there is also no evidence of this document being publicly available. The Interafrican Bureau for Animal Resources also reports that Lesotho has developed an "Animal Health, Production and Welfare" Bill, which has started the process of validation in 2016 through workshops and working groups, but there is no evidence of it being made publicly available. [2] Furthermore, the World Organisation for Animal Health (OIE) reports that Lesotho does not have any laws, policies, or strategy regarding animal welfare. [3] There is no further updates or evidence on this issue provided on the websites of the Ministry of Health and the Ministry of Agriculture and Food Security. [4, 5]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 26 October 2020.

[2] Interafrican Bureau for Animal Resources. 3 January 2017. "Kingdom of Lesotho Repeals PROCLAMATION 10 of 1896 (Stock Diseases) and develops a National Livestock Policy". [<http://www.au-ibar.org/2012-10-01-13-08-42/press-releases/296-vet-gov/1055-kingdom-of-lesotho-repeals-pr-proclamation-10-of-1896-stock-diseases-and-develops-a-national-livestock-policy>]. Accessed 26 October 2020.

[3] World Organisation for Animal Health (OIE). April 2011. "Animal Welfare in OIE Member Countries & Territories in the SADC Region: Summaries of baseline country assessments". [<https://www.oie.int/doc/ged/D11112.PDF>]. Accessed 26

October 2020.

[3] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 26 October 2020.

[4] Government of Lesotho. "Ministry of Agriculture and Food Security". [https://www.gov.ls/ministry-of-agriculture-and-food-security/]. Accessed 26 October 2020.

1.2.1b

Is there national legislation, plans or equivalent strategy document(s) which includes measures for risk identification and reduction for zoonotic disease spillover events from animals to humans?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of national legislation, plans or equivalent strategy documents, which includes measures for risk identification and reduction for zoonotic disease spillover events from animals to humans in the Kingdom of Lesotho. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 does not provide any evidence on the matter. [1] In fact, there is no evidence of a national law or plan document on zoonotic diseases in Lesotho. According to the JEE, anthrax and rabies are the two priority zoonotic diseases along with bovine brucellosis and tuberculosis. However, there is no evidence provided for the existence of a national law or plan on zoonotic disease, or for risk identification and reduction for zoonotic disease spillover events from animals to humans. Furthermore, the World Organisation for Animal Health (OIE) reports that Lesotho does not have any laws, policies, or strategy regarding animal welfare. [2] There is no further evidence on this issue provided on the websites of the Ministry of Health and the Ministry of Agriculture and Food Security. [3, 4]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1]. Accessed 26 October 2020.

[2] World Organisation for Animal Health (OIE). April 2011. "Animal Welfare in OIE Member Countries & Territories in the SADC Region: Summaries of baseline country assessments". [https://www.oie.int/doc/ged/D11112.PDF]. Accessed 26 October 2020.

[3] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 26 October 2020.

[4] Government of Lesotho. "Ministry of Agriculture and Food Security". [https://www.gov.ls/ministry-of-agriculture-and-food-security/]. Accessed 26 October 2020.

1.2.1c

Is there national legislation, plans, or guidelines that account for the surveillance and control of multiple zoonotic pathogens of public health concern?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has national plans, guidelines or laws that account for the surveillance and control of multiple zoonotic pathogens. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 reports that anthrax and rabies are surveyed in both animals and humans. [1] There is also routine screening done on bovine brucellosis in dairy cows, however it is not continuous. Tuberculosis testing is done only in export non-slaughter cattle only to South Africa. Zoonosis surveillance is passive and mainly relies on community reporting. Active sampling for zoonotic disease is only collected in times of outbreaks. The JEE also reports that there is a lack of specimen transport system, which impedes the efficiency of surveillance of zoonotic diseases in the country. In case of major outbreaks the

country is assisted by international organizations such as the Food and Agriculture Organization (FAO), which has supported with specimen transportation for surveillance operations. The "National Health Strategic Plan 2017-2022" includes undertaking regular surveillance of zoonotic diseases as a strategic goal, but it does not provide any further details on how this will be carried out and implemented. [2] Furthermore, the Food and Agriculture Organization (FAO) reports in 2019 that the technical and operational capabilities of the country to deal with animal disease have deteriorated, and that surveillance measures for early detection and response are poor. [3] There is no further evidence found on the websites of the Ministry of Health and the Ministry of Agriculture and Food Security. [4, 5]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 26 October 2020.

[2] Ministry of Health. December 2016. "National Health Strategic Plan 2017-2022". [http://www.nationalplanningcycles.org/sites/default/files/planning_cycle_repository/lesotho/lesotho_revised_nhsp_2017-22_final_draft1.pdf]. Accessed 26 October 2020.

[3] Food and Agriculture Organization of the United Nations (FAO). September 2019. "Strengthening Animal Disease Surveillance in Lesotho". [<http://www.fao.org/3/ca8858en/CA8858EN.pdf>]. Accessed 26 October 2020.

[4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 26 October 2020.

[5] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 26 October 2020.

1.2.1d

Is there a department, agency, or similar unit dedicated to zoonotic disease that functions across ministries?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a cross-ministerial agency dedicated to zoonotic diseases. According to the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017, Lesotho has no department, agency or similar unit dedicated to zoonotic diseases that functions across ministries. [1] The JEE states that the interactions between the Ministry of Health and the Ministry of Agriculture and Food Security are very rare when there are no disease outbreaks. The report further recommends establishing a Memorandum of Understanding (MoU) between relevant ministries or sectors, in the absence of any coordination agency, outlining roles and responsibilities in preventing, detecting and responding to zoonotic diseases. There is no evidence found of the establishment of such MoU. However, in case of outbreak emergencies, the JEE reports that response teams are established containing staff from both ministries. There are no further updates or evidence on this issue provided on the websites of the Ministry of Health and Ministry of Agriculture and Food Security. [2,3]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 26 October 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 26 October 2020.

[3] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 26 October 2020.

1.2.2 Surveillance systems for zoonotic diseases/pathogens

1.2.2a

Does the country have a national mechanism (either voluntary or mandatory) for owners of livestock to conduct and report on disease surveillance to a central government agency?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a mechanism for owners of livestock to conduct or report on disease surveillance to the government. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 does not report on such a mechanism. It does however report that routine screening on bovine brucellosis in dairy cows is done, but it is not continuous. This requires that owners of dairy cows take the milk samples to the laboratory. Each dairy cow is tested only once, and is awarded a certificate. [1] Furthermore, the Food and Agriculture Organization (FAO) reports in 2019 that Lesotho has a weak surveillance system of animal disease. It also notes that the animal surveillance disease documentation is inadequate, there is a lack of standard operating procedures, and that the reporting lines are not well specified. [2] There is no further evidence provided on the websites of the Ministry of Health and the Ministry of Agriculture and Food Security. [3, 4]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 27 October 2020.

[2] Food and Agriculture Organization of the United Nations (FAO). September 2019. "Strengthening Animal Disease Surveillance in Lesotho". [<http://www.fao.org/3/ca8858en/CA8858EN.pdf>]. Accessed 27 October 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 27 October 2020.

[4] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 27 October 2020.

1.2.2b

Is there legislation and/or regulations that safeguard the confidentiality of information generated through surveillance activities for animals (for owners)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has laws or guidelines safeguarding the confidentiality of information generated through animal health surveillance activities. There is no evidence from the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 that laws or guidelines on information confidentiality exist. [1] In addition, Lesotho does not have national plans, guidelines or laws that account for the surveillance and control of multiple zoonotic pathogens. Zoonosis surveillance is passive and mainly relies on community reporting. Active sampling for zoonotic disease is only collected in times of outbreaks. The Food and Agriculture Organization (FAO) also reports that Lesotho has a weak animal disease surveillance and that animal surveillance disease documentation is inadequate, there is a lack of standard operating procedures, and that the reporting lines are not well specified. [2] Lesotho has a "Data Protection Act" of 2013, which regulates the processing of personal information, however it does not include any provisions for reporting by animal owners. [3] There is no further evidence provided on the websites of the Ministry of Health and the Ministry of Agriculture and Food Security. [4, 5]

- [1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 27 October 2020.
- [2] Food and Agriculture Organization of the United Nations (FAO). September 2019. "Strengthening Animal Disease Surveillance in Lesotho". [<http://www.fao.org/3/ca8858en/CA8858EN.pdf>]. Accessed 27 October 2020.
- [3] Government of Lesotho. 2013. "Data Protection Act". [http://mail-hosting.nic.ls/lsnic/community/policies/Data_Protection_Act_2013.pdf]. Accessed 27 October 2020.
- [4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 27 October 2020.
- [5] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 27 October 2020.

1.2.2c

Does the country conduct surveillance of zoonotic disease in wildlife (e.g., wild animals, insects, other disease vectors)?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho conducts surveillance of zoonotic disease in wildlife. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 does not provide any evidence of surveillance conducted in the wildlife. [1] The JEE reports that in the case of rabies, the animal health division is alerted on the presentation of dog bites, or when owners of dogs or cows report death or strange behaviour of their animals. The Food and Agriculture Organization (FAO) in 2019 also reports that overall Lesotho has deteriorated technical and operational capabilities to deal with animal disease, and that surveillance measures for early detection and response are poor. [2] There is no further evidence provided on the website of the Ministry of Health and the Ministry of Agriculture and Food Security. [3, 4]

- [1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 27 October 2020.
- [2] Food and Agriculture Organization of the United Nations (FAO). September 2019. "Strengthening Animal Disease Surveillance in Lesotho". [<http://www.fao.org/3/ca8858en/CA8858EN.pdf>]. Accessed 27 October 2020.
- [3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 27 October 2020.
- [4] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 27 October 2020.

1.2.3 International reporting of animal disease outbreaks

1.2.3a

Has the country submitted a report to OIE on the incidence of human cases of zoonotic disease for the last calendar year?

Yes = 1, No = 0

Current Year Score: 0

2019

OIE WAHIS database

1.2.4 Animal health workforce

1.2.4a

Number of veterinarians per 100,000 people

Input number

Current Year Score: -

No data available

OIE WAHIS database

1.2.4b

Number of veterinary para-professionals per 100,000 people

Input number

Current Year Score: -

No data available

OIE WAHIS database

1.2.5 Private sector and zoonotic

1.2.5a

Does the national plan on zoonotic disease or other legislation, regulations, or plans include mechanisms for working with the private sector in controlling or responding to zoonoses?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has strategy or legislation on zoonoses and there is no evidence of mechanisms for working with the private sector in controlling them. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 does not provide any evidence for the existence of a national law or plan on zoonotic disease. [1] It reports that in the case of an outbreak emergency response teams from the health and animal authorities are established, but there is no mentioning of the engagement of the private sector. According to the JEE there is a plan for avian influenza, but there is no evidence of this plan being publicly available. Lesotho has developed a draft "Animal Health and Animal Production Policy" in 2017, but there is also no evidence of this document being publicly available. The Interafrican Bureau for Animal Resources also reports that Lesotho has developed an "Animal Health, Production and Welfare" Bill, which has started the process of validation in 2016 through workshops and working groups, but there is no evidence of it being made publicly available. [2] Furthermore, the World Organisation for Animal Health (OIE) reports that Lesotho does not have any laws, policies, or strategy regarding animal welfare. [3] Lastly, the Food and Agriculture Organization (FAO) in 2019 also reports that overall Lesotho has deteriorated technical and operational capabilities to deal with animal disease, and that surveillance measures for early detection and response are poor. [4] There is no further evidence on this issue provided on the websites of the Ministry of Health and the Ministry of Agriculture and Food Security. [5, 6]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>].

Accessed 27 October 2020.

[2] Interafrican Bureau for Animal Resources. 3 January 2017. "Kingdom of Lesotho Repeals PROCLAMATION 10 of 1896 (Stock Diseases) and develops a National Livestock Policy". [<http://www.au-ibar.org/2012-10-01-13-08-42/press-releases/296-vet-gov/1055-kingdom-of-lesotho-repeals-proclamation-10-of-1896-stock-diseases-and-develops-a-national-livestock-policy>]. Accessed 27 October 2020.

[3] World Organisation for Animal Health (OIE). April 2011. "Animal Welfare in OIE Member Countries & Territories in the SADC Region: Summaries of baseline country assessments". [<https://www.oie.int/doc/ged/D11112.PDF>]. Accessed 27 October 2020.

[4] Food and Agriculture Organization of the United Nations (FAO). September 2019. "Strengthening Animal Disease Surveillance in Lesotho". [<http://www.fao.org/3/ca8858en/CA8858EN.pdf>]. Accessed 27 October 2020.

[5] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 27 October 2020.

[6] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 27 October 2020.

1.3 BIOSECURITY

1.3.1 Whole-of- government biosecurity systems

1.3.1a

Does the country have in place a record, updated within the past five years, of the facilities in which especially dangerous pathogens and toxins are stored or processed, including details on inventories and inventory management systems of those facilities?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a record of facilities in which especially dangerous pathogens and toxins are stored or processed. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes the absence of a biosecurity system. [1] According to the JEE there are no government laboratories that store microbes, pathogens, and toxins. Only two out of the eighteen laboratories in Lesotho conduct microbiological culture of pathogens. The cultures are kept for up to one week before being destroyed. There is no indication that the situation has changed since the JEE assessment was completed. Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [2] There is also no further evidence found in the Verification Research, Training and Information Centre (VERTIC) database. [3] The web pages of the Ministry of Health, Ministry of Agriculture and Food Security, the Ministry of Defence and National Security, and the Ministry of Communications, Science and Technology also do not contain any information about facilities storing or processing dangerous pathogens. [4, 5, 6, 7]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 27 October 2020.

[2] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 27 October 2020.

[3] Verification Research, Training and Information Centre (VERTIC). "Lesotho". [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/l/>]. Accessed 27 October 2020.

[4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 27 October 2020.

[5] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 27 October 2020.

[6] Government of Lesotho. "Ministry of Defence and National Security." [https://www.gov.ls/ministry-of-defence-and-national-security/]. Accessed 27 October 2020.

[7] Government of Lesotho. "Ministry of Communications, Science and Technology". [https://www.gov.ls/ministry-of-communications-science-and-technology/]. Accessed 27 October 2020.

1.3.1b

Does the country have in place legislation and/or regulations related to biosecurity which address requirements such as physical containment, operation practices, failure reporting systems, and/or cybersecurity of facilities in which especially dangerous pathogens and toxins are stored or processed?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has biosecurity legislation or regulations in place. There are no laws or guidelines in place that address requirements such as physical containment, operation practices, failure reporting systems or cybersecurity of facilities in which especially dangerous pathogens and toxins are stored or processed. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes the absence of a biosecurity system. [1] Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [2] The Academy of Science of South Africa also reports in the proceedings of the workshop "The State of Laboratory Biosafety and Biosecurity in the Southern African Development Community (SADC) Region" of 2018 that there is a lack of biosecurity legislation in Lesotho. [3] The same is reported by the United Nations Office of Geneva (UNOG) in the pilot regional workshop for Africa "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC" of 5 August 2019, which aimed at developing a model legal framework for biosecurity and biosafety. [4] The websites of the Ministry of Health, the Ministry of Agriculture and Food Security, the Ministry of Defence and National Security, and the Ministry of Communications, Science and Technology do not contain any information about biosecurity. [5, 6, 7, 8] There is also no legislation on biosecurity listed on the Verification Research, Training and Information Centre (VERTIC) database. [9]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1]. Accessed 27 October 2020.

[2] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 27 October 2020.

[3] Academy of Science of South Africa. June 2018. "The State of Laboratory Biosafety and Biosecurity in the Southern African Development Community (SADC) Region". [https://www.nepadsanbio.org/sites/default/files/2018-08/2018_assaf_State%20of%20Laboratory%20Biosafety%20%20Biosecurity%20in%20the%20SADC%20Region%20-%20Proceedings%20Report.pdf]. Accessed 27 October 2020.

[4] United Nations Office in Geneva (UNOG). 5 August 2019. "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC".

[https://www.unog.ch/80256EDD006B8954/(httpAssets)/71A65279C544ED3CC125845B004BC67F/\$file/MX3_Guest+of+the+Meeting_agenda+item_7.pdf]. Accessed 27 October 2020.

[5] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 27 October 2020.

[6] Government of Lesotho. "Ministry of Agriculture and Food Security". [https://www.gov.ls/ministry-of-agriculture-and-food-security/]. Accessed 27 October 2020.

[7] Government of Lesotho. "Ministry of Defence and National Security." [https://www.gov.ls/ministry-of-defence-and-national-security/]. Accessed 27 October 2020.

[8] Government of Lesotho. "Ministry of Communications, Science and Technology." [https://www.gov.ls/ministry-of-communications-science-and-technology/]. Accessed 27 October 2020.

[9] Verification Research, Training and Information Centre (VERTIC). "Lesotho."

[<http://www.vertic.org/pages/homepage/programmes/national-implementation-measures/biological-weapons-and-materials/bwc-legislation-database/l.php>]. Accessed 27 October 2020.

1.3.1c

Is there an established agency (or agencies) responsible for the enforcement of biosecurity legislation and regulations?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has an agency responsible for biosecurity, nor does it have biosecurity legislation. There are no laws or guidelines in place that address requirements such as physical containment, operation practices, failure reporting systems or cybersecurity of facilities in which especially dangerous pathogens and toxins are stored or processed. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes the absence of a biosecurity system. [1] Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [2] The Academy of Science of South Africa also reports in the proceedings of the workshop "The State of Laboratory Biosafety and Biosecurity in the Southern African Development Community (SADC) Region" of 2018 that there is a lack of biosecurity legislation in Lesotho. [3] The same is reported by the United Nations Office of Geneva (UNOG) in the pilot regional workshop for Africa "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC" of 5 August 2019, which aimed at developing a model legal framework for biosecurity and biosafety. [4] The websites of the Ministry of Health, the Ministry of Agriculture and Food Security, the Ministry of Defence and National Security, and the Ministry of Communications, Science and Technology do not contain any information about biosecurity. [5, 6, 7, 8] There is also no legislation on biosecurity listed on the Verification Research, Training and Information Centre (VERTIC) database. [9]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 27 October 2020.

[2] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 27 October 2020.

[3] Academy of Science of South Africa. June 2018. "The State of Laboratory Biosafety and Biosecurity in the Southern African Development Community (SADC) Region". [https://www.nepadsanbio.org/sites/default/files/2018-08/2018_assaf_State%20of%20Laboratory%20Biosafety%20%20Biosecurity%20in%20the%20SADC%20Region%20-%20Proceedings%20Report.pdf]. Accessed 27 October 2020.

[4] United Nations Office in Geneva (UNOG). 5 August 2019. "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC".

[[https://www.unog.ch/80256EDD006B8954/\(httpAssets\)/71A65279C544ED3CC125845B004BC67F/\\$file/MX3_Guest+of+the+Meeting_agenda+item_7.pdf](https://www.unog.ch/80256EDD006B8954/(httpAssets)/71A65279C544ED3CC125845B004BC67F/$file/MX3_Guest+of+the+Meeting_agenda+item_7.pdf)]. Accessed 27 October 2020.

[5] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 27 October 2020.

[6] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 27 October 2020.

[7] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 27 October 2020.

[8] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 27 October 2020.

[9] Verification Research, Training and Information Centre (VERTIC). "Lesotho."

[<http://www.vertic.org/pages/homepage/programmes/national-implementation-measures/biological-weapons-and-materials/bwc-legislation-database/l.php>]. Accessed 27 October 2020.

1.3.1d

Is there public evidence that shows that the country has taken action to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has taken action to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities. Lesotho does not have a legislative framework or an agency responsible for biosecurity. The country does not have a record of facilities in which especially dangerous pathogens and toxins are stored or processed. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes the absence of a biosecurity system. According to the JEE, "microbes, pathogens and toxins are not stored in any government laboratory. The situation regarding private laboratories is not clear. " Only two out of the eighteen laboratories in Lesotho conduct microbiological culture of pathogens. The cultures are kept for up to one week before being destroyed. There is no indication that the situation has changed since the JEE assessment was completed. [1] Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [2] The web pages of the Ministry of Health, Ministry of Agriculture and Food Security, the Ministry of Defence and National Security, and the Ministry of Communications, Science and Technology do not contain any information about facilities storing or processing dangerous pathogens or biosecurity. [3,4,5,6] Lastly, there is no further evidence found in the Verification Research, Training and Information Centre (VERTIC) database. [7]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 27 October 2020.

[2] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 27 October 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 27 October 2020.

[4] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 27 October 2020.

[5] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 27 October 2020.

[6] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 27 October 2020.

[7] Verification Research, Training and Information Centre (VERTIC). "Lesotho".

[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/l/>]. Accessed 27 October 2020.

1.3.1e

Is there public evidence of in-country capacity to conduct Polymerase Chain Reaction (PCR) based diagnostic testing for anthrax and/or Ebola, which would preclude culturing a live pathogen?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has in-country capacity to conduct PCR-based diagnostic testing for anthrax or Ebola. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that there are 18 laboratories in the country from which only one serves as a reference laboratory. The JEE does not provide any evidence that these laboratories can conduct PCR-based diagnostic testing for anthrax or Ebola. The JEE reports that the

laboratories can test for cholera, HIV, malaria, measles, meningitis, rubella, tuberculosis, typhoid, and shigellosis, however it does not provide any information on the types of tests used. [1] There is no online presence of the laboratories. The web pages of the Ministry of Health, the Ministry of Agriculture and Food Security, and the Ministry of Defence do not have information about in-country testing capacity. [2, 3, 4]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 27 October 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 27 October 2020.

[3] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 27 October 2020.

[4] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 27 October 2020.

1.3.2 Biosecurity training and practices

1.3.2a

Does the country require biosecurity training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho requires standardised biosecurity training for personnel working with dangerous biological materials. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes the absence of a biosecurity system. [1] Lesotho does not have biosecurity legislation or regulations in place. There are no laws or guidelines in place that address requirements such as physical containment, operation practices, failure reporting systems or cybersecurity of facilities in which especially dangerous pathogens and toxins are stored or processed. Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [2] The United Nations Office of Geneva (UNOG) in the pilot regional workshop for Africa "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC" of 5 August 2019, which aims at developing a model legal framework for biosecurity and biosafety, also reports that there is a lack of expertise to train and implement biosecurity and biosafety measures in Lesotho. [3] There is also no evidence on biosecurity training provided on the websites of the Ministry of Health, the Ministry of Agriculture and Food Security, the Ministry of Defence and National Security, the Ministry of Communications, Science and Technology, and the Verification Research, Training and Information Centre (VERTIC) database. [4, 5, 6, 7, 8]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 27 October 2020.

[2] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 27 October 2020.

[3] United Nations Office in Geneva (UNOG). 5 August 2019. "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC".

[[https://www.unog.ch/80256EDD006B8954/\(httpAssets\)/71A65279C544ED3CC125845B004BC67F/\\$file/MX3_Guest+of+the+Meeting_agenda+item_7.pdf](https://www.unog.ch/80256EDD006B8954/(httpAssets)/71A65279C544ED3CC125845B004BC67F/$file/MX3_Guest+of+the+Meeting_agenda+item_7.pdf)]. Accessed 27 October 2020.

[4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 27 October 2020.

[5] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 27 October 2020.

[6] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 27 October 2020.

[7] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 27 October 2020.

[8] Verification Research, Training and Information Centre (VERTIC). "Lesotho." [<http://www.vertic.org/pages/homepage/programmes/national-implementation-measures/biological-weapons-and-materials/bwc-legislation-database/l.php>]. Accessed 27 October 2020.

1.3.3 Personnel vetting: regulating access to sensitive locations

1.3.3a

Do regulations or licensing conditions specify that security and other personnel with access to especially dangerous pathogens, toxins, or biological materials with pandemic potential are subject to the following checks: drug testing, background checks, and psychological or mental fitness checks?

Personnel are subject to all three of these checks = 3, Personnel are subject to two of these checks = 2, Personnel are subject to one of these checks = 1, Personnel are not subject to any of these checks = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a regulatory framework for biosecurity and there is no evidence that background checks are carried out on personnel with access to materials with epidemic potential. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes the absence of a biosecurity system. [1] The JEE mentions that entrance and access in laboratories in Lesotho is restricted to authorized personnel. Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [2] The Academy of Science of South Africa also reports in the proceedings of the workshop "The State of Laboratory Biosafety and Biosecurity in the Southern African Development Community (SADC) Region" of 2018 that there is a lack of biosecurity legislation in Lesotho. [3] The same is reported by the United Nations Office of Geneva (UNOG) in the pilot regional workshop for Africa "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC" of 5 August 2019, which aimed at developing a model legal framework for biosecurity and biosafety. [4] The websites of the Ministry of Health, the Ministry of Agriculture and Food Security, the Ministry of Defence and National Security, and the Ministry of Communications, Science and Technology do not contain any information about biosecurity. [5, 6, 7, 8] There is also no legislation on biosecurity listed on the Verification Research, Training and Information Centre (VERTIC) database. [9]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 27 October 2020.

[2] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 27 October 2020.

[3] Academy of Science of South Africa. June 2018. "The State of Laboratory Biosafety and Biosecurity in the Southern African Development Community (SADC) Region". [https://www.nepadsanbio.org/sites/default/files/2018-08/2018_assaf_State%20of%20Laboratory%20Biosafety%20%20Biosecurity%20in%20the%20SADC%20Region%20-%20Proceedings%20Report.pdf]. Accessed 27 October 2020.

[4] United Nations Office in Geneva (UNOG). 5 August 2019. "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC".

[[https://www.unog.ch/80256EDD006B8954/\(httpAssets\)/71A65279C544ED3CC125845B004BC67F/\\$file/MX3_Guest+of+the+Meeting_agenda+item_7.pdf](https://www.unog.ch/80256EDD006B8954/(httpAssets)/71A65279C544ED3CC125845B004BC67F/$file/MX3_Guest+of+the+Meeting_agenda+item_7.pdf)]. Accessed 27 October 2020.

- [5] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 27 October 2020.
- [6] Government of Lesotho. "Ministry of Agriculture and Food Security". [https://www.gov.ls/ministry-of-agriculture-and-food-security/]. Accessed 27 October 2020.
- [7] Government of Lesotho. "Ministry of Defence and National Security." [https://www.gov.ls/ministry-of-defence-and-national-security/]. Accessed 27 October 2020.
- [8] Government of Lesotho. "Ministry of Communications, Science and Technology." [https://www.gov.ls/ministry-of-communications-science-and-technology/]. Accessed 27 October 2020.
- [9] Verification Research, Training and Information Centre (VERTIC). "Lesotho." [http://www.vertic.org/pages/homepage/programmes/national-implementation-measures/biological-weapons-and-materials/bwc-legislation-database/l.php]. Accessed 27 October 2020.

1.3.4 Transportation security

1.3.4a

Does the country have publicly available information on national regulations on the safe and secure transport of infectious substances (specifically including Categories A and B)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has publicly-available information on national regulations on the safe and secure transport of infectious substances. There is no evidence provided on this issue in the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017. [1] The United Nations Office of Geneva (UNOG) reports in the pilot regional workshop for Africa "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC" of 5 August 2019, which aims at developing a model legal framework for biosecurity and biosafety that there is a need to develop a continent-wide consensus list of highly pathogenic agents and toxins. [2] Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [3] There is no information provided on the websites of the Trade Portal of the Ministry of Trade and Industry, the Ministry of Health, the Ministry of Agriculture and Food Security, the Ministry of Defence and National Security, the Ministry of Communications, Science and Technology, and the Verification Research, Training and Information Centre (VERTIC) database. [4, 5, 6, 7, 8, 9]

- [1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1]. Accessed 28 October 2020.
- [2] United Nations Office in Geneva (UNOG). 5 August 2019. "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC". [https://www.unog.ch/80256EDD006B8954/(httpAssets)/71A65279C544ED3CC125845B004BC67F/\$file/MX3_Guest+of+the+Meeting_agenda+item_7.pdf]. Accessed 28 October 2020.
- [2] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 28 October 2020.
- [3] Kingdom of Lesotho. "The Lesotho Trade Portal." [http://www.lesothotradeportal.org.ls/index.php?r=site/display&id=3]. Accessed 28 October 2020.
- [4] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 28 October 2020.
- [5] Government of Lesotho. "Ministry of Agriculture and Food Security". [https://www.gov.ls/ministry-of-agriculture-and-food-security/]. Accessed 28 October 2020.
- [6] Government of Lesotho. "Ministry of Defence and National Security." [https://www.gov.ls/ministry-of-defence-and-national-security/]. Accessed 28 October 2020.
- [7] Government of Lesotho. "Ministry of Communications, Science and Technology." [https://www.gov.ls/ministry-of-

communications-science-and-technology/]. Accessed 28 October 2020.

[8] Verification Research, Training and Information Centre (VERTIC). "Lesotho."

[<http://www.vertic.org/pages/homepage/programmes/national-implementation-measures/biological-weapons-and-materials/bwc-legislation-database/l.php>]. Accessed 28 October 2020.

1.3.5 Cross-border transfer and end-user screening

1.3.5a

Is there legislation and/or regulations in place to oversee the cross-border transfer and end-user screening of especially dangerous pathogens, toxins, and pathogens with pandemic potential?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has legislation or other guidance to oversee the cross-border transfer and end-user screening of especially dangerous materials with pandemic potential. There is no evidence of this in the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017, which notes that Lesotho does not have a biosecurity system in place. [1] Lesotho has the "Export and Import Control Act" of 1984, which sets the rules for exporting and importing of goods, but it does not include any provisions for the cross-border transfer and end-user screening of especially dangerous materials with pandemic potential. [2] Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [3] There is no information provided on this issues on the web pages of the Trade Portal of the Ministry of Trade and Industry, the Ministry of Health, the Ministry of Agriculture and Food Security, the Ministry of Defence and National Security, and the Ministry of Communications, Science and Technology. [4, 5, 6, 7, 8] There is also no legislation on biosecurity and cross-border transfer and end-user screening of especially dangerous materials with pandemic potential listed on the Verification Research, Training and Information Centre (VERTIC) database. [9]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 28 October 2020.

[2] Government of Lesotho. 1986. "Export and Import Control Act".

[<http://www.lesothotraderportal.org.ls/index.php?r=site/display&id=135>]. Accessed 28 October 2020.

[3] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 28 October 2020.

[4] Kingdom of Lesotho. "The Lesotho Trade Portal." [<http://www.lesothotraderportal.org.ls/index.php?r=site/display&id=3>]. Accessed 28 October 2020.

[5] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 28 October 2020.

[6] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 28 October 2020.

[7] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 28 October 2020.

[8] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 28 October 2020.

[9] Verification Research, Training and Information Centre (VERTIC). "Lesotho."

[<http://www.vertic.org/pages/homepage/programmes/national-implementation-measures/biological-weapons-and-materials/bwc-legislation-database/l.php>]. Accessed 28 October 2020.

1.4 BIOSAFETY

1.4.1 Whole-of-government biosafety systems

1.4.1a

Does the country have in place national biosafety legislation and/or regulations?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has biosafety legislation or regulations in place other than a framework addressing GMOs in agriculture. However the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that Lesotho has a strong biosafety system within the health system. [1] The JEE also suggests that the draft "Public Health Bill" of 2017 be amended to include biosafety and biosecurity. There is no evidence however that this bill has been enacted and the draft bill is not publicly available. Another recommendation of the JEE is to include health laboratory biosafety in the "Biosafety Bill" of the Ministry of Environment. This bill only includes provision on GMOs in agriculture. [2] The Academy of Science of South Africa also reports in the proceedings of the workshop "The State of Laboratory Biosafety and Biosecurity in the Southern African Development Community (SADC) Region" of 2018 that there is a lack of biosafety legislation in Lesotho. [3] The same is reported by the United Nations Office of Geneva (UNOG) in the pilot regional workshop for Africa "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC" of 5 August 2019, which aimed at developing a model legal framework for biosecurity and biosafety. [4] Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [5] There is no further evidence on biosafety provided in the websites of the Ministry of Health, Ministry of Agriculture and Food Safety, Department of Environment, the Ministry of Communications, Science and Technology, and the Verification Research, Training and Information Centre (VERTIC) database. [6, 7, 8, 9, 10]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 28 October 2020.

[2] Government of Lesotho. 2007. "Biosafety Bill". [<http://environment.gov.ls/biosafety/documents.php>]. Accessed 28 October 2020.

[3] Academy of Science of South Africa. June 2018. "The State of Laboratory Biosafety and Biosecurity in the Southern African Development Community (SADC) Region". [https://www.nepadsanbio.org/sites/default/files/2018-08/2018_assaf_State%20of%20Laboratory%20Biosafety%20%20Biosecurity%20in%20the%20SADC%20Region%20-%20Proceedings%20Report.pdf]. Accessed 28 October 2020.

[4] United Nations Office in Geneva (UNOG). 5 August 2019. "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC". [[https://www.unog.ch/80256EDD006B8954/\(httpAssets\)/71A65279C544ED3CC125845B004BC67F/\\$file/MX3_Guest+of+the+Meeting_agenda+item_7.pdf](https://www.unog.ch/80256EDD006B8954/(httpAssets)/71A65279C544ED3CC125845B004BC67F/$file/MX3_Guest+of+the+Meeting_agenda+item_7.pdf)]. Accessed 28 October 2020.

[5] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 28 October 2020.

[6] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 28 October 2020.

[7] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 28 October 2020.

[8] Department of Environment Kingdom of Lesotho. [<http://environment.gov.ls/biosafety/documents.php>]. Accessed 28 October 2020.

[9] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 28 October 2020.

[10] Verification Research, Training and Information Centre (VERTIC). "Lesotho." [http://www.vertic.org/pages/homepage/programmes/national-implementation-measures/biological-weapons-and-materials/bwc-legislation-database/l.php]. Accessed 28 October 2020.

1.4.1b

Is there an established agency responsible for the enforcement of biosafety legislation and regulations?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has an agency responsible for biosafety, nor does it have biosafety regulations. However the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that Lesotho has a strong biosafety system within the health system. [1] The JEE also suggests that the draft "Public Health Bill" of 2017 be amended to include biosafety and biosecurity. There is no evidence however that this bill has been enacted and the draft bill is not publicly available. Another recommendation of the JEE is to include health laboratory biosafety in the "Biosafety Bill" of the Ministry of Environment. This bill only includes provision on GMOs in agriculture. [2] The Academy of Science of South Africa also reports in the proceedings of the workshop "The State of Laboratory Biosafety and Biosecurity in the Southern African Development Community (SADC) Region" of 2018 that there is a lack of biosafety legislation in Lesotho. [3] The same is reported by the United Nations Office of Geneva (UNOG) in the pilot regional workshop for Africa "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC" of 5 August 2019, which aimed at developing a model legal framework for biosecurity and biosafety. [4] Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [5] There is no further evidence on biosafety provided in the websites of the Ministry of Health, Ministry of Agriculture and Food Safety, Department of Environment, and the Ministry of Communications, Science and Technology. [6, 7, 8, 9] There is also no legislation on biosafety listed on the Verification Research, Training and Information Centre (VERTIC) database. [10]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1]. Accessed 28 October 2020.

[2] Government of Lesotho. 2007. "Biosafety Bill". [http://environment.gov.ls/biosafety/Biosafety_Bill.zip]. Accessed 28 October 2020.

[3] Academy of Science of South Africa. June 2018. "The State of Laboratory Biosafety and Biosecurity in the Southern African Development Community (SADC) Region". [https://www.nepadsanbio.org/sites/default/files/2018-08/2018_assaf_State%20of%20Laboratory%20Biosafety%20%20Biosecurity%20in%20the%20SADC%20Region%20-%20Proceedings%20Report.pdf]. Accessed 28 October 2020.

[4] United Nations Office in Geneva (UNOG). 5 August 2019. "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC". [https://www.unog.ch/80256EDD006B8954/(httpAssets)/71A65279C544ED3CC125845B004BC67F/\$file/MX3_Guest+of+the+Meeting_agenda+item_7.pdf]. Accessed 28 October 2020.

[5] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 28 October 2020.

[6] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 28 October 2020.

[7] Government of Lesotho. "Ministry of Agriculture and Food Security". [https://www.gov.ls/ministry-of-agriculture-and-food-security/]. Accessed 28 October 2020.

[8] Department of Environment Kingdom of Lesotho. [http://environment.gov.ls/biosafety/documents.php]. Accessed 28 October 2020.

[9] Government of Lesotho. "Ministry of Communications, Science and Technology." [https://www.gov.ls/ministry-of-communications-science-and-technology/]. Accessed 28 October 2020.

[10] Verification Research, Training and Information Centre (VERTIC). "Lesotho." [http://www.vertic.org/pages/homepage/programmes/national-implementation-measures/biological-weapons-and-materials/bwc-legislation-database/l.php]. Accessed 28 October 2020.

1.4.2 Biosafety training and practices

1.4.2a

Does the country require biosafety training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence that the Kingdom of Lesotho has requirements for standardised biosafety training for personnel working with dangerous biological materials. However, the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that Lesotho has a strong biosafety system within the health system. [1] According to the JEE, the National Health Training Center offers an academic program for medical laboratories. The National Training Center however does not have an online presence, thus additional information on this academic program cannot be gathered. The JEE also states that a biosafety training program including initial and continuous training is well established for human health laboratories. Staff in laboratories are regularly tested for compliance with biosafety procedures. The United Nations Office of Geneva (UNOG) in the pilot regional workshop for Africa "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC" of 5 August 2019, which aims at developing a model legal framework for biosecurity and biosafety, also reports that there is a lack of expertise to train and implement biosecurity and biosafety measures in Lesotho. [2] Furthermore, the Academy of Science of South Africa also reports in the proceedings of the workshop "The State of Laboratory Biosafety and Biosecurity in the Southern African Development Community (SADC) Region" of 2018 that there is a limited training programs in biosafety in Lesotho and in the region. [3] Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [4] There is no further evidence provided on the websites of the Ministry of Health, Ministry of Agriculture and Food Safety, Department of Environment, the Ministry of Communications, Science and Technology, and the Verification Research, Training and Information Centre (VERTIC) database . [5, 6, 7, 8, 9]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1]. Accessed 28 October 2020.

[2] United Nations Office in Geneva (UNOG). 5 August 2019. "Enabling Biosafety & Biosecurity Priority Actions for the Southern Africa Region of Africa CDC". [https://www.unog.ch/80256EDD006B8954/(httpAssets)/71A65279C544ED3CC125845B004BC67F/\$file/MX3_Guest+of+the+Meeting_agenda+item_7.pdf]. Accessed 28 October 2020.

[3] Academy of Science of South Africa. June 2018. "The State of Laboratory Biosafety and Biosecurity in the Southern African Development Community (SADC) Region". [https://www.nepadsanbio.org/sites/default/files/2018-08/2018_assaf_State%20of%20Laboratory%20Biosafety%20%20Biosecurity%20in%20the%20SADC%20Region%20-%20Proceedings%20Report.pdf]. Accessed 28 October 2020.

[4] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 28 October 2020.

[5] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 28 October 2020.

[6] Government of Lesotho. "Ministry of Agriculture and Food Security". [https://www.gov.ls/ministry-of-agriculture-and-food-security/]. Accessed 28 October 2020.

[7] Department of Environment Kingdom of Lesotho. [<http://environment.gov.ls/biosafety/documents.php>]. Accessed 28 October 2020.

[8] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 28 October 2020.

[9] Verification Research, Training and Information Centre (VERTIC). "Lesotho." [<http://www.vertic.org/pages/homepage/programmes/national-implementation-measures/biological-weapons-and-materials/bwc-legislation-database/l.php>]. Accessed 28 October 2020.

1.5 DUAL-USE RESEARCH AND CULTURE OF RESPONSIBLE SCIENCE

1.5.1 Oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research

1.5.1a

Is there publicly available evidence that the country has conducted an assessment to determine whether ongoing research is occurring on especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has conducted an assessment to determine whether dual-use research is occurring. Although the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 reports that Lesotho has a strong biosafety system within the health system, it does not provide any evidence on occurring dual-use research. The biosafety system is mainly concentrated in good laboratory practices and trainings in terms of biosafety. [1] Furthermore, there is a lack of biosafety legislation and overseeing authority in Lesotho. The national reference laboratory in Maseru does not have an online presence. Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [2] There is no further evidence provided on the websites of the Ministry of Health, the Ministry of Agriculture and Food Security, the Ministry of Defence and National Security, and the Ministry of Communications, Science and Technology. [3, 4, 5, 6] Lastly, there is no further evidence found in the Verification Research, Training and Information Centre (VERTIC) database. [7]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 28 October 2020.

[2] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 28 October 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 28 October 2020.

[4] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 28 October 2020.

[5] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 28 October 2020.

[6] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 28 October 2020.

[7] Verification Research, Training and Information Centre (VERTIC). "Lesotho".

[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/l/>]. Accessed 28 October 2020.

1.5.1b

Is there legislation and/or regulation requiring oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a policy on dual-use research. Although the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 reports that Lesotho has a strong biosafety system within the health system, it does not provide any evidence on dual-use research policy. The biosafety system is mainly concentrated in good laboratory practices and trainings in terms of biosafety. [1] Furthermore, there is a lack of biosafety legislation and overseeing authority in Lesotho. The national reference laboratory in Maseru does not have a website. Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [2] There is no further evidence provided on the websites of the Ministry of Health, the Ministry of Agriculture and Food Security, the Ministry of Defence and National Security, and the Ministry of Communications, Science and Technology. [3, 4, 5, 6] Lastly, there is no further evidence found in the Verification Research, Training and Information Centre (VERTIC) database. [7]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 28 October 2020.

[2] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 28 October 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 28 October 2020.

[4] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 28 October 2020.

[5] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 28 October 2020.

[6] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 28 October 2020.

[7] Verification Research, Training and Information Centre (VERTIC). "Lesotho".

[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/l/>]. Accessed 28 October 2020.

1.5.1c

Is there an agency responsible for oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has an agency responsible for oversight of dual-use research. Although the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 reports that Lesotho has a strong biosafety system within the health system, it does not provide any evidence on an agency responsible for the oversight of dual-use research. The biosafety system is mainly concentrated in good laboratory practices and trainings in terms of biosafety. [1] Furthermore, there is a lack of biosafety legislation and overseeing authority in Lesotho. The national reference laboratory in Maseru does not have a website. Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [2] There is no further evidence provided on the websites of the Ministry of Health, the Ministry of Agriculture and Food Security, the Ministry of Defence and National Security, and the Ministry of

Communications, Science and Technology. [3, 4, 5, 6] Lastly, there is no further evidence found in the Verification Research, Training and Information Centre (VERTIC) database. [7]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 28 October 2020.

[2] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 28 October 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 28 October 2020.

[4] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 28 October 2020.

[5] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 28 October 2020.

[6] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 28 October 2020.

[7] Verification Research, Training and Information Centre (VERTIC). "Lesotho".

[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/l/>]. Accessed 28 October 2020.

1.5.2 Screening guidance for providers of genetic material

1.5.2a

Is there legislation and/or regulation requiring the screening of synthesized DNA (deoxyribonucleic acid) against lists of known pathogens and toxins before it is sold?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has national legislation, regulation, policy, or other guidance, requiring the screening of synthesized DNA before it is sold. Although the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 reports that Lesotho has a strong biosafety system within the health system, it does not provide any evidence on requirements on screening of synthesized DNA before it is sold. The biosafety system is mainly concentrated in good laboratory practices and trainings in terms of biosafety. [1] Furthermore, there is a lack of biosafety legislation and overseeing authority in Lesotho. Lesotho has a "Biosafety Bill" of 2007, which only includes provisions on GMOs in agriculture. The bill does not make any provisions on synthesized DNA. [2] Although Lesotho is party to the Biological Weapons Convention, it has never submitted Confidence Building Measures (CBMs). [3] The national reference laboratory in Maseru does not have a website. There is no further evidence on the issue provided on the websites of the Ministry of Public Works and Transport, Ministry of Health, the Ministry of Agriculture and Food Security, the Ministry of Defence and National Security, and the Ministry of Communications, Science and Technology. [4, 5, 6, 7, 8] Lastly, there is no further evidence found in the Verification Research, Training and Information Centre (VERTIC) database. [9]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 28 October 2020.

[2] Government of Lesotho. 2007. "Biosafety Bill". [http://environment.gov.ls/biosafety/Biosafety_Bill.zip]. Accessed 28 October 2020.

[3] Confidence Building Measures. [https://bwc-ecbm.unog.ch/?field_form_year_tid=All]. Accessed 28 October 2020.

[4] Government of Lesotho. "Ministry of Public Works and Transport." [<https://www.gov.ls/ministry-of-public-works-and-transport/>]. Accessed 28 October 2020.

transport/]. Accessed 28 October 2020.

[5] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 28 October 2020.

[6] Government of Lesotho. "Ministry of Agriculture and Food Security". [https://www.gov.ls/ministry-of-agriculture-and-food-security/]. Accessed 28 October 2020.

[7] Government of Lesotho. "Ministry of Defence and National Security." [https://www.gov.ls/ministry-of-defence-and-national-security/]. Accessed 28 October 2020.

[8] Government of Lesotho. "Ministry of Communications, Science and Technology." [https://www.gov.ls/ministry-of-communications-science-and-technology/]. Accessed 28 October 2020.

[9] Verification Research, Training and Information Centre (VERTIC). "Lesotho".

[https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/l/]. Accessed 28 October 2020.

1.6 IMMUNIZATION

1.6.1 Vaccination rates

1.6.1a

Immunization rate (measles/MCV2)

Immunization rate (measles/MCV2), 95% or greater = 2, 80-94.9% = 1, Less than 80%, or no data = 0

Current Year Score: 1

2019

World Health Organization

1.6.1b

Are official foot-and-mouth disease (FMD) vaccination figures for livestock publicly available through the OIE database?

Yes = 1, No = 0

Current Year Score: 0

2020

OIE WAHIS database

Category 2: Early detection and reporting for epidemics of potential international concern

2.1 LABORATORY SYSTEMS STRENGTH AND QUALITY

2.1.1 Laboratory testing for detection of priority diseases

2.1.1a

Does the national laboratory system have the capacity to conduct diagnostic tests for at least 5 of the 10 WHO-defined core tests?

Evidence they can conduct 5 of the 10 core tests and these tests are named = 2, Evidence they can conduct 5 of the 10 core tests and the tests are not named = 1, No evidence they can conduct 5 of the 10 core tests = 0

Current Year Score: 1

There is evidence that the national laboratory system of the Kingdom of Lesotho has the capacity to conduct diagnostic tests for at least 5 of the 10 WHO-defined core tests although the tests are not specified. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that the laboratory system of Lesotho is well developed. There are 18 laboratories in the country from which only one serves as a reference laboratory in Maseru, and there is also one reference laboratory for tuberculosis. The JEE reports that the laboratories can test for cholera, HIV, malaria, measles, meningitis, rubella, tuberculosis, typhoid, and shigellosis, however it does not provide any information on the types of tests used for each of the listed diseases. It does state that the types of tests used include serology, bacteriology, and PCR. [1, 2] There is also evidence that Lesotho has an integrated tuberculosis and HIV public health laboratory network. [3] There is no evidence of the country having publicly defined the four country-specific tests. There are no websites of the laboratories, and the National Reference Laboratory in Maseru does not have an online presence. Lastly, there are no further updates or evidence provided by the website of the Ministry of Health. [4]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 28 October 2020.

[2] Partners in Health. 6 February 2013. "PIH Lesotho Opens New TB Reference Lab." [<https://www.pih.org/article/pih-lesotho-opens-new-tb-reference-lab>]. Accessed 28 October 2020.

[3] World Health Organization (WHO). 2011. "Integrated TB and HIV Public health laboratory Network". [https://www.who.int/tb/challenges/hiv/smarealle_integrated_lab_network_lesotho.pdf?ua=1]. Accessed 21 November 2020.

[4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 28 October 2020.

2.1.1b

Is there a national plan, strategy or similar document for conducting testing during a public health emergency, which includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing?

Yes, there is evidence of a plan, and it includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing = 2, Yes, there is evidence of a plan, but there is insufficient evidence that it includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing = 1, No evidence of a plan = 0

Current Year Score: 0

There is no evidence that Lesotho has a national plan, strategy or similar document for conducting testing during a public health emergency, which includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing. During the COVID-19, the government of Lesotho has passed a series of legislations, which include provisions for medical screening and testing, however they are limited to testing people who enter the country during the lock-down, people who have traveled to affected countries, health personnel who has been exposed to confirmed cases of the virus, and those providing essential services, or obtaining essential goods, or seeking medical attention in Lesotho. [1] There is also evidence that the Center for Disease Control and Prevention (CDC) has provided Lesotho with scale-up laboratory capacity to provide viral load testing to all persons in HIV treatment. [2] There is no further evidence provided on the websites of the Ministry of Health, and the Ministry of Agriculture and Food Security. [3, 4]

[1] Government of Lesotho. 2020. "Legal Documents". [<https://www.gov.ls/document-category/legal-documents/>]. Accessed 29 October 2020.

[2] Center for Disease Control and Prevention (CDC). "Global Health-Lesotho". [<https://www.cdc.gov/globalhealth/countries/lesotho/default.htm>]. Accessed 29 October 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 29 October 2020.

[4] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 29 October 2020.

2.1.2 Laboratory quality systems

2.1.2a

Is there a national laboratory that serves as a reference facility which is accredited (e.g., International Organization for Standardization [ISO] 15189:2003, U.S. Clinical Laboratory Improvement Amendments [CLIA])?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence to support that the Kingdom of Lesotho's reference laboratory is accredited. However, the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that human health laboratories in Lesotho follow International Organization for Standardization (ISO) standard for quality and safety. There is no further evidence provided on accreditation by the JEE. [1] The national reference laboratory does not have a website. There are no further updates or evidence provided on the websites of the Ministry of Health, and the Ministry of Agriculture and Food Security. [2, 3]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 29 October 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 29 October 2020.

[3] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 29 October 2020.

2.1.2b

Is there a national laboratory that serves as a reference facility which is subject to external quality assurance review?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence that the reference laboratory in the Kingdom of Lesotho is subject to external quality assurance review. However, the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that all public sector laboratories are subject to internal and external quality assurance review. Quality assurance in Lesotho is managed by a quality manager at the quality assurance unit at the national level and quality officers at the district level. Furthermore, surveillance samples of priority disease tests are sent to the National Institute of Communicable Disease of South Africa for external validation and quality assurance. [1] The National Reference Laboratory in Maseru does not have a website. There are no further updates or evidence provided on the websites of the Ministry of Health, and the Ministry of Agriculture and Food Security. [2, 3]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 29 October 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 29 October 2020.

[3] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 29 October 2020.

2.2 LABORATORY SUPPLY CHAINS

2.2.1 Specimen referral and transport system

2.2.1a

Is there a nationwide specimen transport system?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence of a nationwide specimen transport system in place in the Kingdom of Lesotho. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that there is a functional specimen transport system in Lesotho, which also includes helicopter service in case of emergencies, however not nationwide. [1] The majority of the transportation between the national level and districts is supported by the Non-governmental Organization Riders for Health, which is operational nationwide and reaches even the most remote areas. [2, 3] There is also a specimen tracking and referral system supported by an electronic database. There are also standard operating procedures in terms of sample collection, packaging and transport. The Ministry of Health supported by the World Health Organization (WHO) use DHL for sending specimen out of the country. There is no further information provided on the websites of the Ministry of Health, and the Ministry of Agriculture and Food Security. [4, 5] Additionally, the JEE scores Lesotho as a 1 on the JEE for D.1.2, indicating that "no system is in place for transporting specimens from intermediate level/ districts to national laboratories, only ad hoc transporting." [1, 6]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 29 October 2020.

[2] Riders for Health. "Lesotho." [<https://www.ridersintl.org/lesotho.html>]. Accessed 29 October 2020.

[3] Global Laboratory Initiative (GLI). "GLI Guide to TB Specimen Referral Systems and Integrated Networks". [http://www.stoptb.org/wg/gli/assets/documents/GLI_Guide_specimens_web_ready.pdf]. Accessed 29 October 2020.

[4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 29 October 2020.

[5] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 29 October 2020.

[6] World Health Organisation (WHO). 2016. "Joint External Evaluation Tool". [https://apps.who.int/iris/bitstream/handle/10665/204368/9789241510172_eng.pdf?sequence=1]. Accessed 29 October 2020.

2.2.2 Laboratory cooperation and coordination

2.2.2a

Is there a plan in place to rapidly authorize or license laboratories to supplement the capacity of the national public health laboratory system to scale-up testing during an outbreak?

Yes = 2 , Yes, but there is evidence of gaps in implementation = 1 , No = 0

Current Year Score: 0

There is no evidence of a plan in place to rapidly authorize or license laboratories to supplement the capacity of the national public health laboratory system to scale-up testing during an outbreak in the Kingdom of Lesotho. During the COVID-19, the government of Lesotho has passed a series of legislations, which include provisions for medical screening and testing, however they are limited to testing people who enter the country during the lock-down, people who have traveled to affected countries, health personnel who has been exposed to confirmed cases of the virus, and those providing essential services, or obtaining essential goods, or seeking medical attention in Lesotho. The legislations do not provide any evidence on the matter. [1] Furthermore, Lesotho is conducting rapid testing at five border points with South Africa. [2] There is a national laboratory in Maseru, but it does not have an online presence. There is no further evidence found on the websites of the Ministry of Health, and the Ministry of Agriculture and Food Security. [3, 4]

[1] Government of Lesotho. 2020. "Legal Documents". [https://www.gov.ls/document-category/legal-documents/]. Accessed 29 October 2020.

[2] Government of Lesotho. 21 October 2020. "Rapid Testing Done at Operating Border Posts". [https://www.gov.ls/rapid-testing-done-at-operating-border-posts/]. Accessed 29 October 2020.

[3] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 29 October 2020.

[4] Government of Lesotho. "Ministry of Agriculture and Food Security". [https://www.gov.ls/ministry-of-agriculture-and-food-security/]. Accessed 29 October 2020.

2.3 REAL-TIME SURVEILLANCE AND REPORTING

2.3.1 Indicator and event-based surveillance and reporting systems

2.3.1a

Is there evidence that the country is conducting ongoing event-based surveillance and analysis for infectious disease?

Yes, there is evidence of ongoing event-based surveillance and evidence that the data is being analyzed on a daily basis = 2,
Yes, there is evidence of ongoing event-based surveillance, but no evidence that the data are being analyzed on a daily basis = 1, No = 0

Current Year Score: 0

There is no publicly available evidence that the Kingdom of Lesotho is conducting ongoing event-based surveillance (EBS) and analysis for infectious disease. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that there is partial EBS in the country. Data on unusual events from informal sources at the community levels are not collected systematically. Nonetheless, there are rumour logbooks of suspected outbreaks at the national and district level, which have recorded a total of six suspected outbreaks in 2016, and three suspected outbreaks in 2017. The JEE does not

provide any further information on the nature of these suspected outbreaks. There are no further updates or evidence provided on this issue on the websites of the Ministry of Health, and the Ministry of Agriculture and Food Security. [2, 3]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 29 October 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 29 October 2020.

[3] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 29 October 2020.

2.3.1b

Is there publicly available evidence that the country reported a potential public health emergency of international concern (PHEIC) to the WHO within the last two years?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has reported a potential public health emergency of international concern (PHEIC) to the World Health Organization (WHO) in the last two years. The last time, Lesotho has notified WHO on 28 January 2000 for Dysentery. [1] However, WHO publishes data of COVID-19 for Lesotho. [2] There is no evidence of a potential PHEIC notification within the last two years on the website of the Ministry of Health and the Ministry of Agriculture and Food Security. [3, 4]

[1] World Health Organization (WHO). "Disease Outbreak News Lesotho".

[<https://www.who.int/csr/don/archive/country/lso/en/>]. Accessed 29 October 2020.

[2] World Health Organization (WHO). "Lesotho". [<https://www.who.int/countries/lso/>]. Accessed 29 October 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 29 October 2020.

[4] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 29 October 2020.

2.3.2 Interoperable, interconnected, electronic real-time reporting systems

2.3.2a

Does the government operate an electronic reporting surveillance system at both the national and the sub-national level?

Yes = 1, No = 0

Current Year Score: 1

There is evidence that the Kingdom of Lesotho operates an electronic reporting surveillance system at both the national and sub-national level. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 reports that Lesotho had adopted the District Health Information System 2 (DHIS2), which is an electronic system for indicator-based surveillance. It is operational at the national level and at all 10 districts. The data is entered at the district level and becomes available at the national level. [1, 2] An electronic reporting surveillance system at the national and sub-national level is also set-up for the COVID-19 with the support of Columbia University. It collects data from health facilities, and ensures that health officials at all levels of the health system have access to the data. [3] There is no further evidence provided on the website of the Ministry of Health. [4]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 29 October 2020.

[2] Columbia University. 16 October 2015. "In Lesotho, New Health Information System Provides Streamlined, Integrated Data Across Health Programs". [<https://beta.global.columbia.edu/global-news/lesotho-new-health-information-system-provides-streamlined-integrated-data-across-health>]. Accessed 29 October 2020.

[3] Columbia University. 22 June 2020. "ICAP's 72-Hour Crunch Creates Customized Data Dashboards for COVID Surveillance in Lesotho". Accessed 29 October 2020.

[4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 29 October 2020.

2.3.2b

Does the electronic reporting surveillance system collect ongoing or real-time laboratory data?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the electronic reporting surveillance system in the Kingdom of Lesotho collects real-time laboratory data. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that although surveillance is in place between the Ministry of Health and laboratories, data from the laboratories need to be integrated into the Integrated Disease Surveillance and Response. [1] The national reference laboratory does not have a website. The same holds for the COVID-19 electronic reporting surveillance system. [2] There is no further information provided on the website of the Ministry of Health. [3]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 29 October 2020.

[2] Columbia University. 22 June 2020. "ICAP's 72-Hour Crunch Creates Customized Data Dashboards for COVID Surveillance in Lesotho". Accessed 29 October 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 29 October 2020.

2.4 SURVEILLANCE DATA ACCESSIBILITY AND TRANSPARENCY

2.4.1 Coverage and use of electronic health records

2.4.1a

Are electronic health records commonly in use?

Electronic health records are commonly in use = 2, Electronic health records are not commonly in use, but there is evidence they are used = 1, No evidence electronic health records are in use = 0

Current Year Score: 1

There is no publicly available evidence that electronic health records (EHR) are commonly in use in the Kingdom of Lesotho. Lesotho has a national EHR system, which has been put in place in 1986. In 2015, the World Health Organization (WHO) reported that EHR is not used by primary care facilities. The usage for secondary and tertiary health care facilities is between 50%-75% and there have been no further updates since. [1] There is also no further evidence provided on the website of the Ministry of Health. [2]

[1] World Health Organization (WHO). 2015. "Lesotho". [<http://origin.who.int/goe/publications/atlas/2015/Iso.pdf>]. Accessed 29 October 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 29 October 2020.

2.4.1b

Does the national public health system have access to electronic health records of individuals in their country?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the national public health system in the Kingdom of Lesotho has access to electronic health records of individuals in the country. Lesotho has a national electronic health records (EHR) system, which has been put in place in 1986. Secondary health care facilities such as hospitals, emergency care, and tertiary care facilities such as specialized care, referral from primary and secondary care, all have access to electronic health records. However, primary care facilities such as clinics and health care centres do not use EHR. There is no further updated information provided by WHO on this matter.

[1] There is also no further evidence provided on the website of the Ministry of Health. [2]

[1] World Health Organization (WHO). 2015. "Lesotho". [<http://origin.who.int/goe/publications/atlas/2015/Iso.pdf>]. Accessed 29 October 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 29 October 2020.

2.4.1c

Are there data standards to ensure data is comparable (e.g., ISO standards)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of data standards to ensure that data is comparable. There is no evidence on the websites of the Ministry of Health, and the Ministry of Communications, Science and Technology. [1, 2]

[1] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 29 October 2020.

[2] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 29 October 2020.

2.4.2 Data integration between human, animal, and environmental health sectors

2.4.2a

Is there evidence of established mechanisms at the relevant ministries responsible for animal, human, and wildlife surveillance to share data (e.g., through mosquito surveillance, brucellosis surveillance)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of established mechanisms at the relevant ministries responsible for animal, human and wildlife surveillance to share data in the Kingdom of Lesotho. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that there is no formal communication for sharing epidemiological data and reports between the

animal and human health sector. The JEE recommends that the Ministry of Health and the Ministry of Agriculture and Food Security establish a formal communication pathway and Memorandum of Understanding (MoU) to improve collaboration and data sharing. [1] There is no evidence that such MoU is in place and there is no further evidence provided on the websites of the Ministry of Health, Ministry of Agriculture and Food Security, and the Department of Environment. [2, 3, 4]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 1 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 1 November 2020.

[3] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 1 November 2020.

[4] Department of Environment Kingdom of Lesotho. "About DoE." [<http://environment.gov.ls/about/default.php>]. Accessed 1 November 2020.

2.4.3 Transparency of surveillance data

2.4.3a

Does the country make de-identified health surveillance data on infectious diseases publicly available via reports (or other format) on government websites (such as the Ministry of Health, Ministry of Agriculture, or similar)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho makes de-identified health surveillance data on disease outbreaks publicly available. The web pages of the Ministry of Health and the Ministry of Agriculture and Food Security do not include information on health surveillance data, except for sporadic COVID-19 data. [1, 2] The Ministry of Health has published public statements for the first suspected cases of COVID-19 on 31 March 2020, an update on the lack of COVID-19 cases on 4 April 2020, and an update of COVID-19 cases on 21 June 2020. [3, 4, 5] The latter contains information on the number of tests conducted, number of negative and positive cases, number of recovered cases, and number of mortalities. Lastly, according to the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017, Lesotho has 290 reporting sites in all 10 districts for indicator-based surveillance. Health facilities prepare weakly reports and submit them to the district level. [6] There is, however, no public evidence of such reports.

[1] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 1 November 2020.

[2] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 1 November 2020.

[3] National Command Center of the Kingdom of Lesotho. 31 March 2020. "Eight Reported Suspect Cases". [<https://www.gov.ls/wp-content/uploads/2020/03/STATISTICS-PRESS-RELEASE1.pdf>]. Accessed 1 November 2020.

[4] National Command Center of the Kingdom of Lesotho. 4 April 2020. "Lesotho Maintains Negative Status". [<https://www.gov.ls/wp-content/uploads/2020/04/LESOTHO-MAINTAINS-NEGATIVE-STATUS.pdf>]. Accessed 1 November 2020.

[5] National Command Center of the Kingdom of Lesotho. 21 June 2020. "Update on COVID 19 Status". [<https://www.gov.ls/wp-content/uploads/2020/06/Update-on-Covid-19-status.pdf>]. Accessed 1 November 2020.

[6] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 1 November 2020.

2.4.3b

Does the country make de-identified COVID-19 surveillance data (including details such as daily case count, mortality rate, etc) available via daily reports (or other formats) on government websites (such as the Ministry of Health, or similar)?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho makes de-identified COVID-19 surveillance data available via daily reports on government websites. However, the Ministry of Health has published public statements for the first suspected cases of COVID-19 on 31 March 2020, an update on the lack of COVID-19 cases on 4 April 2020, and an update of COVID-19 cases on 21 June 2020. [1, 2, 3] The update on COVID-19 cases contains information on the number of tests conducted, number of negative and positive cases, number of recovered cases, and number of mortalities.

[1] National Command Center of the Kingdom of Lesotho. 31 March 2020. "Eight Reported Suspect Cases".

[<https://www.gov.ls/wp-content/uploads/2020/03/STATISTICS-PRESS-RELEASE1.pdf>]. Accessed 1 November 2020.

[2] National Command Center of the Kingdom of Lesotho. 4 April 2020. "Lesotho Maintains Negative Status".

[<https://www.gov.ls/wp-content/uploads/2020/04/LESOTHO-MAINTAINS-NEGATIVE-STATUS.pdf>]. Accessed 1 November 2020.

[3] National Command Center of the Kingdom of Lesotho. 21 June 2020. "Update on COVID 19 Status".

[<https://www.gov.ls/wp-content/uploads/2020/06/Update-on-Covid-19-status.pdf>]. Accessed 1 November 2020.

2.4.4 Ethical considerations during surveillance

2.4.4a

Is there legislation and/or regulations that safeguard the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities?

Yes = 1, No = 0

Current Year Score: 1

The Kingdom of Lesotho has legislation in place that safeguards the confidentiality of identifiable health information for individuals. The "Data Protection Act" of 2013 classifies processing of personal data regarding the state of health as a special category, for which processing of personal data is prohibited. Exceptions are made only in the case of protection of public health and public safety, national security, protection of life or physical health of the individual or another individual, or if it is in the benefit of the individual for the purpose of proper treatment and care, health-care insurance information, etc. In this case the data processing is done by a data controller under a pledge of professional confidentiality. [1] There are no further updates or information provided on the website of the Ministry of Health. [2]

[1] Government of Lesotho. 2013. "Data Protection Act". [http://mail-hosting.nic.ls/lsnic/community/policies/Data_Protection_Act_2013.pdf]. Accessed 1 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 1 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 1 November 2020.

2.4.4b

Is there legislation and/or regulations safeguarding the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities, include mention of protections from cyber attacks (e.g., ransomware)?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho's regulation safeguarding the confidentiality of identifiable health information for individuals includes protections from cyber attacks. The "Data Protection Act" of 2013, which prohibits the processing of personal data regarding the state of health by considering it as a special category, does not make any provisions regarding cyber security and cyber attacks. [1] Furthermore, there is no evidence of cyber security legislation in Lesotho. [2] There are no further updates or evidence on the website of the Ministry of Health. [3]

[1] Government of Lesotho. 2013. "Data Protection Act". [http://mail-hosting.nic.ls/lsnic/community/policies/Data_Protection_Act_2013.pdf]. Accessed 1 November 2020.

[2] Government of Lesotho. "Lesotho Legal Information." [<https://lesotholii.org/>]. Accessed 1 November 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 1 November 2020.

2.4.5 International data sharing

2.4.5a

Has the government made a commitment via public statements, legislation and/or a cooperative agreement to share surveillance data during a public health emergency with other countries in the region?

Yes, commitments have been made to share data for more than one disease, Yes, commitments have been made to share data only for one disease = 1, No = 0

Current Year Score: 0

There is insufficient evidence that the government of the Kingdom of Lesotho has commitments to share surveillance data during a public health emergency with other countries in the region.

Lesotho is a partner country in the East, Central, and Southern Africa Health Community (ECSA-HC). The ECSA-HC is an inter-governmental health organization, which promotes regional cooperation in health. It promotes cooperation, collaboration, research, capacity building, policy development and advocacy in healthcare. [1] The ECSA-HC has established cross-border surveillance zones using a One Health approach. [2] These cross-border surveillance zones are chosen based on the length of the border, the burden of disease, human and animal activities, presence of health facilities and laboratories, etc. Cross-border committees are established to conduct oversight of surveillance and response, risk assessment, managing laboratories, resource mobilization, etc. There are cross-border zones between Lesotho and Uganda, and Lesotho and South Africa in diseases surveillance, emergency preparedness and response. The participants of the cross-border zones have agreed to establish information sharing platforms for data and information sharing. Furthermore, there is formal communication of countries that are part of the cross-border zones during outbreaks and events of public health importance. [2, 3] However, there is no explicit evidence that of a commitment to share surveillance data specifically during emergencies.

The ECSA-HC also publishes COVID-19 data on all the member countries. [4] There is no further evidence provided on the website of the Ministry of Health. [5]

[1] East, Central, and Southern Africa Health Community (ECSA-HC). [<http://ecsahc.org/ecsahc-at-a-glance/>]. Accessed 1 November 2020.

[2] African Society for Laboratory Medicine. 11 December 2018. "Strengthening Cross-Border Diseases Surveillance through Cross-Border Zoning". [<http://aslm2018.org/strengthening-cross-border-diseases-surveillance-through-cross-border-zoning/>]. Accessed 1 November 2020.

[3] East, Central, and Southern Africa Health Community (ECSA-HC). August 2018. "ECSA-Health Community Supports the Lesotho-South Africa Cross-Border Zones for Disease Surveillance Expansion." [<http://ecsahc.org/wp-content/uploads/2018/10/August-Newsletter-Final-1.pdf>]. Accessed 1 November 2020.

[4] East, Central, and Southern Africa Health Community (ECSA-HC). "ECSA Health Community-COVID - 19 Regional Updates". [<https://ecsahc.org/coronavirus-disease-covid-19-pandemic/>]. Accessed 1 November 2020.

[5] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 1 November 2020.

2.5 CASE-BASED INVESTIGATION

2.5.1 Case investigation and contact tracing

2.5.1a

Is there a national system in place to provide support at the sub-national level (e.g. training, metrics standardization and/or financial resources) to conduct contact tracing in the event of a public health emergency?

Yes, there is evidence that the national government supports sub-national systems to prepare for future public health emergencies = 2, Yes, there is evidence that the national government supports sub-national systems, but only in response to active public health emergencies = 1, No = 0

Current Year Score: 0

There is no evidence of a national system in place in the Kingdom of Lesotho to provide support at the sub-national level (e.g. training, metrics standardization and/or financial resources) to conduct contact tracing in the event of an active or future public health emergency. There is no information on the matter provided on the website of the Ministry of Health. [1] However, the World Bank has approved a credit of USD 7.5 million on 14 May 2020 to support the government of Lesotho in its efforts to deal with the COVID-19 emergency. The funds will be used for epidemiological investigation on contact tracing, travelers screening at points of entry, prevention and control at health facilities, isolation and treatment capabilities, protective equipment, etc. [2]

[1] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 1 November 2020.

[2] World Bank. 14 May 2020. "World Bank Approves \$7.5 Million to Support Lesotho's Efforts to Address COVID-19 Pandemic". Accessed 1 November 2020.

2.5.1b

Does the country provide wraparound services to enable infected people and their contacts to self-isolate or quarantine as recommended, particularly economic support (paycheck, job security) and medical attention?

Yes, both economic support and medical attention are provided = 2, Yes, but only economic support or medical attention is provided = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho provides wraparound services to enable infected people and their contacts to self-isolate or quarantine as recommended, particularly economic support (paycheck, job security) and medical attention. However, as a result of the COVID-19 pandemic, the government has pledged to provide relief for person of ages 60-69 years. [1] The beneficiaries will be drawn from the 35,000 most vulnerable families nationally. The recipients will receive monetary relief for three months starting from December, 2020. There is no further evidence provided on the website of the Ministry of Health. [2]

- [1] Government of Lesotho. 29 October 2020. "PM Launches COVID-19 Relief Funds for 60-69 Older Persons". [<https://www.gov.ls/pm-launches-covid-19-relief-fund-for-60-69-older-persons/>]. Accessed 1 November 2020.
- [2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 1 November 2020.

2.5.1c

Does the country make de-identified data on contact tracing efforts for COVID-19 (including the percentage of new cases from identified contacts) available via daily reports (or other format) on government websites (such as the Ministry of Health, or similar)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho makes de-identified data on contact tracing efforts for COVID-19 available via daily reports on government websites. However, the Ministry of Health has published sporadic public statements for the first suspected cases of COVID-19 on 31 March 2020, an update on the lack of COVID-19 cases on 4 April 2020, and an update of COVID-19 cases on 21 June 2020. [1, 2, 3] The update on COVID-19 cases contains information on the number of tests conducted, number of negative and positive cases, number of recovered cases, number of mortalities, age, regional distribution, and travel history. [3] There is no further evidence provided on the website of the Ministry of Health. [4]

- [1] National Command Center of the Kingdom of Lesotho. 31 March 2020. "Eight Reported Suspect Cases". [<https://www.gov.ls/wp-content/uploads/2020/03/STATISTICS-PRESS-RELEASE1.pdf>]. Accessed 1 November 2020.
- [2] National Command Center of the Kingdom of Lesotho. 4 April 2020. "Lesotho Maintains Negative Status". [<https://www.gov.ls/wp-content/uploads/2020/04/LESOTHO-MAINTAINS-NEGATIVE-STATUS.pdf>]. Accessed 1 November 2020.
- [3] National Command Center of the Kingdom of Lesotho. 21 June 2020. "Update on COVID 19 Status". [<https://www.gov.ls/wp-content/uploads/2020/06/Update-on-Covid-19-status.pdf>]. Accessed 1 November 2020.
- [4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 1 November 2020.

2.5.2 Point of entry management

2.5.2a

Is there a joint plan or cooperative agreement between the public health system and border control authorities to identify suspected and potential cases in international travelers and trace and quarantine their contacts in the event of a public health emergency?

Yes, plan(s)/agreement(s) are in place to prepare for future public health emergencies = 2, Yes, but plan(s)/agreement(s) are in place only in response to active public health emergencies = 1, No = 0

Current Year Score: 0

There is no evidence of a joint plan or cooperative agreement between the public health system and border control authorities in the Kingdom of Lesotho to identify suspected and potential cases in international travelers and trace and quarantine their contacts in the event of an active or future public health emergency. However, there is evidence that Lesotho is conducting rapid testing at five border points with South Africa. [1] Furthermore, during the COVID-19, the government of Lesotho has passed a series of legislations, which make provisions for medical screening and testing, including people who enter the country during the lock-down and people who have traveled to affected countries, or seeking medical attention in Lesotho. [2] There is no further evidence provided in the websites of the Ministry of Health, the Ministry of Home

Affairs, and the Lesotho Trade Portal. [3, 4, 5]

[1] Government of Lesotho. 21 October 2020. "Rapid Testing Done at Operating Border Posts". [<https://www.gov.ls/rapid-testing-done-at-operating-border-posts/>]. Accessed 7 November 2020.

[2] Government of Lesotho. 2020. "Legal Documents". [<https://www.gov.ls/document-category/legal-documents/>]. Accessed 7 November 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 7 November 2020.

[4] Government of Lesotho. "Ministry of Home Affairs". [<https://www.gov.ls/ministry-of-home-affairs/>]. Accessed 7 November 2020.

[5] Kingdom of Lesotho. "The Lesotho Trade Portal." [<http://www.lesothotradeportal.org.ls/index.php?r=site/display&id=3>]. Accessed 7 November 2020.

2.6 EPIDEMIOLOGY WORKFORCE

2.6.1 Applied epidemiology training program, such as the field epidemiology training program, for public health professionals and veterinarians (e.g., Field Epidemiology Training Program [FETP] and Field Epidemiology Training Program for Veterinarians [FETPV])

2.6.1a

Does the country meet one of the following criteria?

- Applied epidemiology training program (such as FETP) is available in country
- Resources are provided by the government to send citizens to another country to participate in applied epidemiology training programs (such as FETP)

Needs to meet at least one of the criteria to be scored a 1 on this measure. , Yes for both = 1 , Yes for one = 1 , No for both = 0

Current Year Score: 0

There is no evidence that applied epidemiology training program is available in country. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that there are no field epidemiology training programs (FETP) in the Kingdom of Lesotho. The JEE recommends that trainings in basic epidemiology are established and that bilateral agreements with neighbouring countries are signed for longer-term training in field epidemiology. [1] There is also no evidence that resources are available by the government to send citizens to other countries for FETP. However, there is evidence that the Ministry of Health of Lesotho has requested in 2018, a course in epidemiology training from the South Africa Field Epidemiology Training Program as part of capacity building, where there have been 12 participants. [2] There is also evidence that there has been one participant from Lesotho in the South Africa epidemiology training program in the class of 2017. [3] There is no further evidence provided on the websites of the Ministry of Health, and the Training Programs in Epidemiology and Public Health Interventions Network (TEPHINET). [4, 5]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 7 November 2020.

[2] Training Programs in Epidemiology and Public Health Interventions Network (TEPHINET). July-September 2018. "FETP Updates." [<https://www.tephinet.org/sites/tephinet/files/content/attachment/2018-10-08/FETP%20Updates%20July-September%202018%20TEPHINET%20Newsletter.pdf>]. Accessed 7 November 2020.

[3] BMC Public Health. 10 May 2019. "South Africa field epidemiology training program: developing and building applied epidemiology capacity, 2007-2016". [<https://bmcpublihealth.biomedcentral.com/articles/10.1186/s12889-019-6788-z>].

Accessed 7 November 2020.

[4] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 7 November 2020.

[5] Training Programs in Epidemiology and Public Health Interventions Network (TEPHINET). "Training Programs." [https://www.tephinet.org/training-programs/south-africa-field-epidemiology-training-program]. Accessed 7 November 2020.

2.6.1b

Are the available field epidemiology training programs explicitly inclusive of animal health professionals or is there a specific animal health field epidemiology training program offered (such as FETPV)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that an applied epidemiology training program is available in country, and there is no evidence of an animal health field epidemiology training program offered as well. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 report notes that there are no field epidemiology training programs (FETP) in the Kingdom of Lesotho. The JEE recommends that trainings in basic epidemiology are established and that bilateral agreements with neighbouring countries are signed for longer-term training in field epidemiology. [1] There is no further evidence provided on the websites of the Ministry of Health, and the Training Programs in Epidemiology and Public Health Interventions Network (TEPHINET). [2, 3]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1]. Accessed 7 November 2020.

[2] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 7 November 2020.

[3] Training Programs in Epidemiology and Public Health Interventions Network (TEPHINET). "Training Programs." [https://www.tephinet.org/training-programs/south-africa-field-epidemiology-training-program]. Accessed 7 November 2020.

2.6.2 Epidemiology workforce capacity

2.6.2a

Is there public evidence that the country has at least 1 trained field epidemiologist per 200,000 people?

Yes = 1 , No = 0

Current Year Score: 0

2020

Completed JEE assessments; Economist Impact analyst qualitative assessment based on official national sources, which vary by country

Category 3: Rapid response to and mitigation of the spread of an epidemic

3.1 EMERGENCY PREPAREDNESS AND RESPONSE PLANNING

3.1.1 National public health emergency preparedness and response plan

3.1.1a

Does the country have an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with epidemic or pandemic potential?

Evidence that there is a plan in place, and the plan is publicly available = 2, Evidence that the plan is in place, but the plan is not publicly available OR, Disease-specific plans are in place, but there is no evidence of an overarching plan = 1, No evidence that such a plan or plans are in place = 0

Current Year Score: 1

There is no evidence that the Kingdom of Lesotho has an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with epidemic or pandemic potential. However, there is evidence that disease-specific plans are in place. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes the absence of such plan and recommends that Lesotho puts in place a national multi-hazard public health emergency preparedness and response plan that meets the requirements of the International Health Regulations (IHR, 2005). [1] However, the JEE also notes that Lesotho has in place a "Multi Hazard Contingency Plan 2014-2015", which includes risk assessment, public health hazards and response. There is also a national contingency plan for emergencies, which includes risk analysis of food and water-borne epidemics, and anthrax epidemics among other hazards, as well as a national emergency and preparedness plan for Ebola. [1, 2] The World Health Organization (WHO) also reports that Lesotho has an Influenza Plan, however it also notes that it is not publicly available. [3] These documents however are not publicly available. There is no further evidence provided on the website of the Ministry of Health. [4]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 7 November 2020.

[2] World Health Organization (WHO). "Ebola Preparedness and Response Plan: Lesotho Acts". Accessed 7 November 2020.

[3] World Health Organization (WHO). "Influenza Plan Lesotho". [<https://extranet.who.int/sph/influenza-plan-lesotho>]. Accessed 7 November 2020.

[4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 7 November 2020.

3.1.1b

If an overarching plan is in place, has it been updated in the last 3 years?

Yes = 1 , No /no plan in place= 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with epidemic or pandemic potential. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes the absence of such plan and recommends that Lesotho puts in place a national multi-hazard public health emergency preparedness and response plan that meets the requirements of the International Health Regulations (IHR, 2005). [1] However, the JEE also notes that Lesotho has in place a

"Multi Hazard Contingency Plan 2014-2015", which includes risk assessment, public health hazards and response. There is also a national contingency plan for emergencies, which includes risk analysis of food and water-borne epidemics, and anthrax epidemics among other hazards, as well as a national emergency and preparedness plan for Ebola. [1, 2] The World Health Organization (WHO) also reports that Lesotho has an Influenza Plan, however it also notes that it is not publicly available. [3] These documents however are not publicly available. There is no further evidence provided on the website of the Ministry of Health. [4]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 7 November 2020.

[2] World Health Organization (WHO). "Ebola Preparedness and Response Plan: Lesotho Acts". Accessed 7 November 2020.

[3] World Health Organization (WHO). "Influenza Plan Lesotho". [<https://extranet.who.int/sph/influenza-plan-lesotho>]. Accessed 7 November 2020.

[4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 7 November 2020.

3.1.1c

If an overarching plan is in place, does it include considerations for pediatric and/or other vulnerable populations?

Yes = 1 , No /no plan in place= 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with epidemic or pandemic potential. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes the absence of such plan and recommends that Lesotho puts in place a national multi-hazard public health emergency preparedness and response plan that meets the requirements of the International Health Regulations (IHR, 2005). [1] However, the JEE also notes that Lesotho has in place a "Multi Hazard Contingency Plan 2014-2015", which includes risk assessment, public health hazards and response. There is also a national contingency plan for emergencies, which includes risk analysis of food and water-borne epidemics, and anthrax epidemics among other hazards, as well as a national emergency and preparedness plan for Ebola. [1, 2] The World Health Organization (WHO) also reports that Lesotho has an Influenza Plan, however it also notes that it is not publicly available. [3] These documents however are not publicly available. There is no further evidence provided on the website of the Ministry of Health. [4]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 7 November 2020.

[2] World Health Organization (WHO). "Ebola Preparedness and Response Plan: Lesotho Acts". Accessed 7 November 2020.

[3] World Health Organization (WHO). "Influenza Plan Lesotho". [<https://extranet.who.int/sph/influenza-plan-lesotho>]. Accessed 7 November 2020.

[4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 7 November 2020.

3.1.1d

Does the country have a publicly available plan in place specifically for pandemic influenza preparedness that has been updated since 2009?

Yes = 1 , No = 0

Current Year Score: 0

2020

WHO Strategic Partnership for IHR and Health Security (SPH)

3.1.2 Private sector involvement in response planning

3.1.2a

Does the country have a specific mechanism(s) for engaging with the private sector to assist with outbreak emergency preparedness and response?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a mechanism for engaging with the private sector to assist with outbreak emergency preparedness and response. No such mechanism is mentioned in the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017. [1] Lesotho does not have a national public health emergency response plan in place which addresses planning for multiple communicable diseases with pandemic potential. The JEE notes the absence of such plan and recommends that Lesotho puts in place a national multi-hazard public health emergency preparedness and response plan that meets the requirements of the International Health Regulations (IHR, 2005). [1] However, the JEE also notes that Lesotho has in place a "Multi Hazard Contingency Plan 2014-2015", which includes risk assessment, public health hazards and response. There is also a national contingency plan for emergencies, which includes risk analysis of food and water-borne epidemics, and anthrax epidemics among other hazards, as well as a national emergency and preparedness plan for Ebola. [1, 2] The World Health Organization (WHO) also reports that Lesotho has an Influenza Plan, however it also notes that it is not publicly available. [3] These documents however are not publicly available. There is no further evidence provided on the website of the Ministry of Health on a mechanism for engaging with the private sector to assist with outbreak emergency preparedness and response. [4]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 7 November 2020.

[2] World Health Organization (WHO). "Ebola Preparedness and Response Plan: Lesotho Acts". Accessed 7 November 2020.

[3] World Health Organization (WHO). "Influenza Plan Lesotho". [<https://extranet.who.int/sph/influenza-plan-lesotho>]. Accessed 7 November 2020.

[4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 7 November 2020.

3.1.3 Non-pharmaceutical interventions planning

3.1.3a

Does the country have a policy, plan and/or guidelines in place to implement non-pharmaceutical interventions (NPIs) during an epidemic or pandemic?

Yes, a policy, plan and/or guidelines are in place for more than one disease= 2, Yes, but the policy, plan and/or guidelines exist only for one disease = 1, No = 0

Current Year Score: 1

There is evidence that the Kingdom of Lesotho has a policy, plan and/or guidelines in place to implement non-pharmaceutical interventions (NPIs) during an epidemic or pandemic for one disease. During the COVID-19, the government of Lesotho has passed a series of legislations, which include provisions for NPIs such as social distancing, hygiene measures, cleaning and disinfecting of public places and businesses, wearing of protective personal equipment, wearing of masks, and quarantine measures. [1, 2, 3] The language used appears to be applicable only to the COVID-19 pandemic. There is no further evidence provided on the websites of the Ministry of Health, and the Ministry of Home Affairs. [4, 5] There is no website for the Disaster Management Authority.

[1] Government of the Kingdom of Lesotho. Legal Notice No. 68 of 24 August 2020. "Public Health (COVID -19) (Risk Determination and Mitigation Measures) (No.3) Regulations, 2020". [<https://www.gov.ls/wp-content/uploads/2020/08/Legal-Notice-No.-68-1.pdf>]. Accessed 7 November 2020.

[2] Government of the Kingdom of Lesotho. Legal Notice No. 41 of 6 May 2020. "Public Health (COVID -19) Regulations, 2020." [<https://www.gov.ls/wp-content/uploads/2020/05/LEGAL-NOTICE-NO.-41-OF-2020.pdf>]. Accessed 7 November 2020.

[3] Government of the Kingdom of Lesotho. Legal Notice No. 38 of 22 April 2020. "Public Health (COVID -19) Regulations, 2020." [<https://www.gov.ls/wp-content/uploads/2020/04/LEGAL-NOTICE-NO.38-2020.pdf>]. Accessed 7 November 2020.

[4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 7 November 2020.

[5] Government of Lesotho. "Ministry of Home Affairs". [<https://www.gov.ls/ministry-of-home-affairs/>]. Accessed 7 November 2020.

3.2 EXERCISING RESPONSE PLANS

3.2.1 Activating response plans

3.2.1a

Does the country meet one of the following criteria?

- Is there evidence that the country has activated their national emergency response plan for an infectious disease outbreak in the past year?

- Is there evidence that the country has completed a national-level biological threat-focused exercise (either with WHO or separately) in the past year?

Needs to meet at least one of the criteria to be scored a 1 on this measure. , Yes for both = 1 , Yes for one = 1 , No for both = 0

Current Year Score: 1

There is evidence that the Kingdom of Lesotho has activated its national emergency response plan for an infectious disease outbreak in the past year, however there is no evidence that Lesotho has completed a national-level biological threat-focused exercise. In the face of COVID-19 pandemic, Lesotho has passed a series of legislations. They include the Legal Notice No. 68 "Public Health (COVID -19) (Risk Determination and Mitigation Measures) (No.3) Regulations, 2020" of 24 August 2020, which is an update of the Legal Notice No. 41 "Public Health (COVID -19) Regulations, 2020" of 6 May 2020, and the Legal Notice No. 38 "Public Health (COVID -19) Regulations, 2020" of 22 April 2020. [1, 2, 3] These series of legislations set up the risk determination and mitigation measures such as preventions measures against introducing and spreading the virus, medical screening and testing, non-pharmaceutical interventions, quarantine measures, border closing, provision of essential goods, medical care, transportation restrictions, school restrictions, business activity restrictions, preventative measures to be taken by businesses, etc. However, there is no evidence that Lesotho has completed a national-level biological threat-focused exercise (either with WHO or separately) in the past year. [4] The World Health Organization (WHO) reports that no such exercise has taken place or has been planned. There is no further evidence provided on the websites of

the Ministry of Health, and the Ministry of Home Affairs. [5, 6] There is no website for the Disaster Management Authority.

[1] Government of the Kingdom of Lesotho. Legal Notice No. 68 of 24 August 2020. "Public Health (COVID -19) (Risk Determination and Mitigation Measures) (No.3) Regulations, 2020". [<https://www.gov.ls/wp-content/uploads/2020/08/Legal-Notice-No.-68-1.pdf>]. Accessed 7 November 2020.

[2] Government of the Kingdom of Lesotho. Legal Notice No. 41 of 6 May 2020. "Public Health (COVID -19) Regulations, 2020." [<https://www.gov.ls/wp-content/uploads/2020/05/LEGAL-NOTICE-NO.-41-OF-2020.pdf>]. Accessed 7 November 2020.

[3] Government of the Kingdom of Lesotho. Legal Notice No. 38 of 22 April 2020. "Public Health (COVID -19) Regulations, 2020." [<https://www.gov.ls/wp-content/uploads/2020/04/LEGAL-NOTICE-NO.38-2020.pdf>]. Accessed 7 November 2020.

[4] World Health Organization (WHO). "Simulation Exercise". [<https://extranet.who.int/sph/simulation-exercise>]. Accessed 7 November 2020.

[5] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 7 November 2020.

[6] Government of Lesotho. "Ministry of Home Affairs". [<https://www.gov.ls/ministry-of-home-affairs/>]. Accessed 7 November 2020.

3.2.1b

Is there evidence that the country in the past year has identified a list of gaps and best practices in response (either through an infectious disease response or a biological-threat focused exercise) and developed a plan to improve response capabilities?

Yes, the country has developed and published a plan to improve response capacity = 2 , Yes, the country has developed a plan to improve response capacity, but has not published the plan = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has identified a list of gaps and best practices in response (either through an infectious disease response or a biological-threat focused exercise) and developed a plan to improve response capabilities in the past year. Lesotho is planned to undergo an After Action Review (AAR) for measles to identify a list of gaps and best practices with the World Health Organization (WHO), however no dates are reported for the planned activity. [1]

Furthermore, there is no evidence that Lesotho has completed a national-level biological threat-focused exercise (either with WHO or separately) in the past year. [2] Also, there is no report of a planned exercise. There is no further evidence provided on the websites of the Ministry of Health and the Ministry of Home Affairs. [3, 4] The Disaster Management Authority does not have online presence.

[1] World Health Organization (WHO). "Simulation Exercise". [<https://extranet.who.int/sph/simulation-exercise>]. Accessed 7 November 2020.

[2] World Health Organization WHO. "After Action Review". [<https://extranet.who.int/sph/after-action-review>]. Accessed 7 November 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 7 November 2020.

[4] Government of Lesotho. "Ministry of Home Affairs". [<https://www.gov.ls/ministry-of-home-affairs/>]. Accessed 7 November 2020.

3.2.2 Private sector engagement in exercises

3.2.2a

Is there evidence that the country in the past year has undergone a national-level biological threat-focused exercise that has included private sector representatives?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence that the Kingdom of Lesotho has undergone a national-level biological threat-focused exercise that has included private sector representatives in the past year. There is no evidence that Lesotho has completed a national-level biological threat-focused exercise (either with WHO or separately) in the past year. [1, 2] There is no further evidence provided on the websites of the Ministry of Health and the Ministry of Home Affairs . [3, 4] The Disaster Management Authority does not have an online presence.

[1] World Health Organization (WHO). "Simulation Exercise". [<https://extranet.who.int/sph/simulation-exercise>]. Accessed 7 November 2020.

[2] World Health Organization WHO. "After Action Review". [<https://extranet.who.int/sph/after-action-review>]. Accessed 7 November 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 7 November 2020.

[4] Government of Lesotho. "Ministry of Home Affairs". [<https://www.gov.ls/ministry-of-home-affairs/>]. Accessed 7 November 2020.

3.3 EMERGENCY RESPONSE OPERATION

3.3.1 Emergency response operation

3.3.1a

Does the country have in place an Emergency Operations Center (EOC)?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that the Kingdom of Lesotho has an Emergency Operations Center. Lesotho has a Disaster Management Authority (DMA), which is a large committee put in place to coordinate emergency responses in the country established by Act No. 2 "Disaster Management" of 1997. [1] As per the JEE, it has five thematic working groups, which include health and nutrition, water and sanitation, agriculture and food security, and logistics. The working groups are in charge of organizing trainings, address disaster risk reduction, and preparedness and response planning. The working group of health and nutrition has representatives from the Ministry of Health, Ministry of Agriculture and Food Security, and the Ministry of Defence. The DMA, however does not have a website, and there is no further information available on the website of the Ministry of Health. [2] Lastly, during the COVID-19 pandemic, a COVID-19 National Emergency Command Centre (NECC) has been put in place. [3]

[1] Government of Lesotho. Act No. of 1997. "Disaster Management." [<http://www.ifrc.org/Docs/idrl/862EN.pdf>]. 8 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. 8 November 2020.

[3] Government of Lesotho. "Lesotho COVID-19 National Emergency Command Centre (NECC) Governance Structure". [<https://www.gov.ls/wp-content/uploads/2020/06/NECC-Revised-adopted-Structure-by-Sub-Committee.pdf>]. Accessed 9 November 2020.

3.3.1b

Is the Emergency Operations Center (EOC) required to conduct a drill for a public health emergency scenario at least once per year or is there evidence that they conduct a drill at least once per year?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Emergency Operations Center (EOC) is required to conduct a drill for a public health emergency scenario at least once per year or that they conduct a drill at least once per year. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 does not provide any evidence on the matter. [1] Lesotho has a Disaster Management Authority (DMA), which is a large committee put in place to coordinate emergency responses in the country established by Act No. 2 "Disaster Management" of 1997. However, there is no evidence providing regarding drills. [2] As per the JEE, it has five thematic working groups, which include health and nutrition, water and sanitation, agriculture and food security, and logistics. The working groups are in charge of organizing trainings, address disaster risk reduction, and preparedness and response planning. The working group of health and nutrition has representatives from the Ministry of Health, Ministry of Agriculture and Food Security, and the Ministry of Defence. The DMA, however does not have a website, and there is no further information available on the website of the Ministry of Health. [3] Lastly, during the COVID-19 pandemic, a COVID-19 National Emergency Command Centre (NECC) has been put in place, but there is no evidence found on drills. [4]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 8 November 2020.

[2] Government of Lesotho. Act No. of 1997. "Disaster Management." [<http://www.ifrc.org/Docs/idrl/862EN.pdf>]. 8 November 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. 8 November 2020.

[4] Government of Lesotho. "Lesotho COVID-19 National Emergency Command Centre (NECC) Governance Structure". [<https://www.gov.ls/wp-content/uploads/2020/06/NECC-Revised-adopted-Structure-by-Sub-Committee.pdf>]. Accessed 9 November 2020.

3.3.1c

Is there public evidence to show that the Emergency Operations Center (EOC) has conducted within the last year a coordinated emergency response or emergency response exercise activated within 120 minutes of the identification of the public health emergency/scenario?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has an Emergency Operations Center. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that Lesotho does not have a national EOC, or public health EOC, although there is physical space available but it is not equipped. [1] Lesotho, however, has a Disaster Management Authority (DMA), which is a large committee put in place to coordinate emergency responses in the country established by Act No. 2 "Disaster Management" of 1997. [2] As per the JEE, it has five thematic working groups, which include health and nutrition, water and sanitation, agriculture and food security, and logistics. The working groups are in charge of organizing trainings, address disaster risk reduction, and preparedness and response planning. The working group of health and nutrition has representatives from the Ministry of Health, Ministry of Agriculture and Food Security, and the Ministry of Defence. The DMA, however does not have a website, and there is no further information available on the website of the

Ministry of Health. [3] Lastly, during the COVID-19 pandemic, a COVID-19 National Emergency Command Centre (NECC) has been put in place. [4]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 8 November 2020.

[2] Government of Lesotho. Act No. of 1997. "Disaster Management." [<http://www.ifrc.org/Docs/idrl/862EN.pdf>]. 8 November 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. 8 November 2020.

[4] Government of Lesotho. "Lesotho COVID-19 National Emergency Command Centre (NECC) Governance Structure". [<https://www.gov.ls/wp-content/uploads/2020/06/NECC-Revised-adopted-Structure-by-Sub-Committee.pdf>]. Accessed 9 November 2020.

3.4 LINKING PUBLIC HEALTH AND SECURITY AUTHORITIES

3.4.1 Public health and security authorities are linked for rapid response during a biological event

3.4.1a

Does the country meet one of the following criteria?

- Is there public evidence that public health and national security authorities have carried out an exercise to respond to a potential deliberate biological event (i.e., bioterrorism attack)?
- Are there publicly available standard operating procedures, guidelines, memorandums of understanding (MOUs), or other agreements between the public health and security authorities to respond to a potential deliberate biological event (i.e., bioterrorism attack)?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 1

There is evidence that the Kingdom of Lesotho has an agreement between the public health and security authorities to respond to biological events, and but there is insufficient evidence that joint exercises have been carried out within the last 5 years and the nature of those exercises. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that there is a Memorandum of Understanding (MOU) between the Ministry of Health, Ministry of Defence and National Security, which outlines the coordination between these ministries in times of emergencies, including the case of a biological event (including deliberate event). [1] The JEE also reports that the Ministry of Health and the Ministry of Defence conduct joint trainings and simulation exercises to strengthen coordination including joint investigation to respond to a biological event. But the date of the most recent exercise is unavailable. There are no further updates or evidence provided on the websites of the Ministry of Health, and the Ministry of Defence and National Security. [2, 3] The Disaster Management Authority does not have a website.

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 8 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. 8 November 2020.

[3] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. 8 November 2020.

3.5 RISK COMMUNICATIONS

3.5.1 Public communication

3.5.1b

Does the risk communication plan (or other legislation, regulation or strategy document used to guide national public health response) outline how messages will reach populations and sectors with different communications needs (eg different languages, location within the country, media reach)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a risk communication plan for use during a public health emergency. Lesotho does not have a public health emergency response plan. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes the absence of such plan, as well as the absence of a public health emergency response plan. [1] However, the JEE reports that in case of emergencies or outbreaks, the government uses spokespeople from the Ministry of Communication, Ministry of Health, and Ministry of Agriculture and Food Security to communicate with the public in regards to risk information using media such as radio, television, newspapers, etc. Communication officers are also deployed at the district and national level for risk communication. Informal arrangements also exist to engage populations at the community level through media and through community leaders. The JEE recommends that the Ministry of Communication should develop a multi hazard risk communication strategy. There is no further evidence provided on website of the Ministry of Health, and the Disaster Management Authority does not have a website. [2]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 8 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 8 November 2020.

3.5.1 Risk communication planning

3.5.1a

Does the country have in place, either in the national public health emergency response plan or in other legislation, regulation, or strategy documents, a section detailing a risk communication plan that is specifically intended for use during a public health emergency?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a risk communication plan for use during a public health emergency. Lesotho does not have a public health emergency response plan. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes the absence of such plan, as well as the absence of a public health emergency response plan. [1] However, the JEE reports that in case of emergencies or outbreaks, the government uses spokespeople from the Ministry of Communication, Ministry of Health, and Ministry of Agriculture and Food Security to communicate with the public in regards to risk information using media such as radio, television, newspapers, etc. Communication officers are also deployed at the district and national level for risk communication. The JEE recommends that the Ministry of Communication should develop a multi hazard risk communication strategy. There is no further evidence provided on website of the Ministry of Health, and the Disaster Management Authority does not have a website. [2]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 8 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 8 November 2020.

3.5.1c

Does the risk communication plan (or other legislation, regulation or strategy document used to guide national public health response) designate a specific position within the government to serve as the primary spokesperson to the public during a public health emergency?

Yes = 1 , No = 0

Current Year Score: 1

There is some evidence that the Kingdom of Lesotho has a risk communication plan for use during a public health emergency. Lesotho does not have a public health emergency response plan. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes the absence of such plan, as well as the absence of a public health emergency response plan. [1] However, the JEE reports that in case of emergencies or outbreaks, the government uses spokespeople from the Ministry of Communication, Ministry of Health, and Ministry of Agriculture and Food Security to communicate with the public in regards to risk information using media such as radio, television, newspapers, etc. Communication officers are also deployed at the district and national level for risk communication. Informal arrangements also exist to engage populations at the community level through media and through community leaders. The JEE recommends that the Ministry of Communication should develop a multi hazard risk communication strategy. There is no further evidence provided on website of the Ministry of Health, and the Disaster Management Authority does not have a website. [2]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 8 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 8 November 2020.

3.5.2 Public communication

3.5.2a

In the past year, is there evidence that the public health system has actively shared messages via online media platforms (e.g. social media, website) to inform the public about ongoing public health concerns and/or dispel rumors, misinformation or disinformation?

Public health system regularly shares information on health concerns = 2, Public health system shares information only during active emergencies, but does not regularly utilize online media platforms = 1, Public health system does not regularly utilize online media platforms, either during emergencies or otherwise = 0

Current Year Score: 1

There is evidence that the public health system in the Kingdom of Lesotho shares information only during active emergencies, but does not regularly utilize online media platforms to inform the public about ongoing public health concerns and/or dispel rumors, misinformation or disinformation in the past year. The Facebook page of the Ministry of Health contains information regarding updates of the COVID-19 pandemic. It shares press releases including information on the number of active cases, number of tests conducted, number of positive cases, distribution of cases, etc. [1] The same updates and press releases are also posted in the website of the Ministry of Health. [2, 3, 4] The Facebook page also contains

information regarding a false press release containing false information regarding the COVID-19 situation. It also contains information posted in May 2019 regarding an outbreak of anthrax in animals. [1] The Facebook page of the Disaster Management Agency (DMA) also contains information supporting and encouraging social distancing during COVID-19. The rest of the information is mainly focused on warnings of weather conditions. [5] Furthermore, the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 reports that in case of emergencies or outbreaks, the government uses spokespeople from the Ministry of Communication, Ministry of Health, and Ministry of Agriculture and Food Security to communicate with the public in regards to risk information using media such as radio, television, newspapers, etc. [6] The National Reference Laboratory Lesotho does not have any posted information on its Facebook page. [7]

[1] Government of Lesotho. Ministry of Health Facebook Page. [<https://www.facebook.com/Ministry-Of-Health-Lesotho-International-Health-Regulations-745217115548343/>]. Accessed 8 November 2020.

[2] National Command Center of the Kingdom of Lesotho. 31 March 2020. "Eight Reported Suspect Cases". [<https://www.gov.ls/wp-content/uploads/2020/03/STATISTICS-PRESS-RELEASE1.pdf>]. Accessed 8 November 2020.

[3] National Command Center of the Kingdom of Lesotho. 4 April 2020. "Lesotho Maintains Negative Status". [<https://www.gov.ls/wp-content/uploads/2020/04/LESOTHO-MAINTAINS-NEGATIVE-STATUS.pdf>]. Accessed 8 November 2020.

[4] National Command Center of the Kingdom of Lesotho. 21 June 2020. "Update on COVID 19 Status". [<https://www.gov.ls/wp-content/uploads/2020/06/Update-on-Covid-19-status.pdf>]. Accessed 8 November 2020.

[5] Disaster Management Authority (DMA). Disaster Management Authority (DMA) Facebook Page. [<https://www.facebook.com/Disaster-Management-Authority-Lesotho-827158530672659/>]. Accessed 8 November 2020.

[6] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 8 November 2020.

[7] National Reference Laboratory Lesotho Facebook Page. [<https://www.facebook.com/pages/National-reference-laboratory-Lesotho/829230190509932>]. Accessed 8 November 2020.

3.5.2b

Is there evidence that senior leaders (president or ministers) have shared misinformation or disinformation on infectious diseases in the past two years?

No = 1, Yes = 0

Current Year Score: 1

There is no evidence that senior leaders (king or ministers) have shared misinformation or disinformation on infectious diseases in the past two years. There is no evidence found on the websites of the Ministry of Health, the Government of Lesotho, the Office of the King, and the Office of the Prime Minister. [1, 2, 3, 4] International and national media outlets also provide no evidence on the subject. [5, 6, 7, 8, 9] In fact, in April 2020, the Eyewitness News newspaper in Lesotho denounced a laboratory in South Africa that claimed to conduct COVID-19 testing for Lesotho, when in fact it was not the case. [10]

[1] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 9 November 2020.

[2] Government of Lesotho. [<https://www.gov.ls/>]. Accessed 9 November 2020.

[3] The Office of the King. [<https://www.gov.ls/the-monarchy/>]. Accessed 9 November 2020.

[4] The Office of the Prime Minister. [<https://www.gov.ls/prime-ministers-office/>]. Accessed 9 November 2020.

[5] BBC World News. [<https://www.bbc.com/news/world>]. Accessed 9 November 2020.

[6] CNN International. [<https://edition.cnn.com/>]. Accessed 9 November 2020.

[7] Associated Press. [<https://apnews.com/hub/lesotho>]. Accessed 9 November 2020.

[8] Lesotho Times. [<http://lestimes.com/>]. Accessed 9 November 2020.

[9] Maseru Metro. [<https://www.maserumetro.com/>]. Accessed 9 November 2020.

[10] Eyewitness News. April 2020. "SA lab company in hot water with Lesotho paper over alleged fake news".

[<https://ewn.co.za/2020/04/26/sa-lab-company-in-hot-water-with-lesotho-paper-over-alleged-fake-news>]. Accessed 9 November 2020.

3.6 ACCESS TO COMMUNICATIONS INFRASTRUCTURE

3.6.1 Internet users

3.6.1a

Percentage of households with Internet

Input number

Current Year Score: 29

2019

International Telecommunication Union (ITU)

3.6.2 Mobile subscribers

3.6.2a

Mobile-cellular telephone subscriptions per 100 inhabitants

Input number

Current Year Score: 113.83

2019

International Telecommunication Union (ITU)

3.6.3 Female access to a mobile phone

3.6.3a

Percentage point gap between males and females whose home has access to a mobile phone

Input number

Current Year Score: 0

2019

Gallup; Economist Impact calculation

3.6.4 Female access to the Internet

3.6.4a

Percentage point gap between males and females whose home has access to the Internet

Input number

Current Year Score: 0

2019

Gallup; Economist Impact calculation

3.7 TRADE AND TRAVEL RESTRICTIONS

3.7.1 Trade restrictions

3.7.1a

In the past year, has the country issued a restriction, without international/bilateral support, on the export/import of medical goods (e.g. medicines, oxygen, medical supplies, PPE) due to an infectious disease outbreak?

Yes = 0 , No = 1

Current Year Score: 1

There is no evidence that the Kingdom of Lesotho has issued a restriction, without international/bilateral support, on the export/import of medical goods (e.g. medicines, oxygen, medical supplies, PPE) due to an infectious disease outbreak in the past year. There is no evidence found on the websites of the Ministry of Health, Ministry of Agriculture and Food Security, and the Ministry of Foreign Affairs and International Relations. [1, 2, 3] There is also no evidence of such restrictions on COVID-19 legislation. [4, 5, 6]

[1] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 9 November 2020.

[2] Government of Lesotho. "Ministry of Agriculture and Food Security". [https://www.gov.ls/ministry-of-agriculture-and-food-security/]. Accessed 9 November 2020.

[3] Government of Lesotho. "Ministry of Foreign Affairs and International Relations". [https://www.gov.ls/ministry-of-foreign-affairs-and-international-relations/]. Accessed 9 November 2020.

[4] Government of the Kingdom of Lesotho. Legal Notice No. 68 of 24 August 2020. "Public Health (COVID -19) (Risk Determination and Mitigation Measures) (No.3) Regulations, 2020". [https://www.gov.ls/wp-content/uploads/2020/08/Legal-Notice-No.-68-1.pdf]. Accessed 9 November 2020.

[5] Government of the Kingdom of Lesotho. Legal Notice No. 41 of 6 May 2020. "Public Health (COVID -19) Regulations, 2020." [https://www.gov.ls/wp-content/uploads/2020/05/LEGAL-NOTICE-NO.-41-OF-2020.pdf]. Accessed 9 November 2020.

[6] Government of the Kingdom of Lesotho. Legal Notice No. 38 of 22 April 2020. "Public Health (COVID -19) Regulations, 2020." [https://www.gov.ls/wp-content/uploads/2020/04/LEGAL-NOTICE-NO.38-2020.pdf]. Accessed 9 November 2020.

3.7.1b

In the past year, has the country issued a restriction, without international/bilateral support, on the export/import of non-medical goods (e.g. food, textiles, etc) due to an infectious disease outbreak?

Yes = 0 , No = 1

Current Year Score: 1

There is no evidence that the Kingdom of Lesotho has issued a restriction, without international/bilateral support, on the export/import of non-medical goods (e.g. food, textiles, etc) due to an infectious disease outbreak in the past year. There is no evidence found on the websites of the Ministry of Health, Ministry of Agriculture and Food Security, and Ministry of Foreign Affairs and International Relations. [1, 2, 3] Furthermore, there is also no evidence of such restriction in the COVID-19 legislation. [4, 5, 6]

[1] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 9 November 2020.

[2] Government of Lesotho. "Ministry of Agriculture and Food Security". [https://www.gov.ls/ministry-of-agriculture-and-food-security/]. Accessed 9 November 2020.

[3] Government of Lesotho. "Ministry of Foreign Affairs and International Relations". [https://www.gov.ls/ministry-of-foreign-affairs-and-international-relations/]. Accessed 9 November 2020.

[4] Government of the Kingdom of Lesotho. Legal Notice No. 68 of 24 August 2020. "Public Health (COVID -19) (Risk Determination and Mitigation Measures) (No.3) Regulations, 2020". [https://www.gov.ls/wp-content/uploads/2020/08/Legal-Notice-No.-68-1.pdf]. Accessed 9 November 2020.

[5] Government of the Kingdom of Lesotho. Legal Notice No. 41 of 6 May 2020. "Public Health (COVID -19) Regulations, 2020." [https://www.gov.ls/wp-content/uploads/2020/05/LEGAL-NOTICE-NO.-41-OF-2020.pdf]. Accessed 9 November 2020.

[6] Government of the Kingdom of Lesotho. Legal Notice No. 38 of 22 April 2020. "Public Health (COVID -19) Regulations, 2020." [https://www.gov.ls/wp-content/uploads/2020/04/LEGAL-NOTICE-NO.38-2020.pdf]. Accessed 9 November 2020.

3.7.2 Travel restrictions

3.7.2a

In the past year, has the country implemented a ban, without international/bilateral support, on travelers arriving from a specific country or countries due to an infectious disease outbreak?

Yes = 0 , No = 1

Current Year Score: 0

There is evidence that the Kingdom of Lesotho has implemented a ban, without international/bilateral support, on travelers arriving from a specific country or countries due to an infectious disease outbreak in the past year. In a series of COVID-19 legislation, there is evidence that Lesotho has closed its borders during the lock down, and did not allow anyone to enter or leave Lesotho. [1, 2, 3] There is no further evidence found on the websites of the Ministry of Health, Ministry of Foreign Affairs and International Relations, and Ministry of Public Works and Transport. [4, 5, 6]

[1] Government of the Kingdom of Lesotho. Legal Notice No. 68 of 24 August 2020. "Public Health (COVID -19) (Risk Determination and Mitigation Measures) (No.3) Regulations, 2020". [https://www.gov.ls/wp-content/uploads/2020/08/Legal-Notice-No.-68-1.pdf]. Accessed 9 November 2020.

[2] Government of the Kingdom of Lesotho. Legal Notice No. 41 of 6 May 2020. "Public Health (COVID -19) Regulations, 2020." [https://www.gov.ls/wp-content/uploads/2020/05/LEGAL-NOTICE-NO.-41-OF-2020.pdf]. Accessed 9 November 2020.

[3] Government of the Kingdom of Lesotho. Legal Notice No. 38 of 22 April 2020. "Public Health (COVID -19) Regulations, 2020." [https://www.gov.ls/wp-content/uploads/2020/04/LEGAL-NOTICE-NO.38-2020.pdf]. Accessed 9 November 2020.

[4] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 9 November 2020.

[5] Government of Lesotho. "Ministry of Foreign Affairs and International Relations". [https://www.gov.ls/ministry-of-foreign-affairs-and-international-relations/]. Accessed 9 November 2020.

[6] Government of Lesotho. "Ministry of Public Works and Transport". [https://www.gov.ls/ministry-of-public-works-and-transport/]. Accessed 9 November 2020.

transport/]. Accessed 9 November 2020.

Category 4: Sufficient and robust health sector to treat the sick and protect health workers

4.1 HEALTH CAPACITY IN CLINICS, HOSPITALS, AND COMMUNITY CARE CENTERS

4.1.1 Available human resources for the broader healthcare system

4.1.1a

Doctors per 100,000 people

Input number

Current Year Score: 6.92

2010

WHO; national sources

4.1.1b

Nurses and midwives per 100,000 people

Input number

Current Year Score: 325.67

2018

WHO; national sources

4.1.1c

Does the country have a health workforce strategy in place (which has been updated in the past five years) to identify fields where there is an insufficient workforce and strategies to address these shortcomings?

Yes = 1, No = 0

Current Year Score: 1

There is evidence that the Kingdom of Lesotho has a public health workforce strategy in place, covering the period 2005-2025. While there is no evidence that it has been updated in the past five years, it covers the period of research. Lesotho has a "Human Resources Development and Strategic Plan (HRDSP) 2005-2025" of July 2004, as well as a "Retention Strategy for the Health Workforce (RSHW)" of 2010. [1, 2] The HRDSP identifies the existing supply of medical doctors, nurses, laboratory personnel, etc. It also analyses the future supply and staff requirement for the health workforce including the above

mentioned types of personnel, as well as providing a strategic plan. The RSHW establishes the mechanisms through which health professionals can be managed, motivated and retained. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 also reports that Lesotho has human resource availability in terms of clinicians, veterinarians, laboratory technicians, public health personnel, etc. In order to retain its healthcare staff, Lesotho offers housing incentives for doctors, as well as hardship allowances for specific areas. Nonetheless staff turnover remains high. [3] There is no further information provided on the website of the Ministry of Health. [4]

[1] Ministry of Health and Social Welfare. 2004. "Human Resources Development and Strategic Plan (HRDSP) 2005-2025." [https://www.who.int/workforcealliance/countries/Lesotho_HRHPlan.pdf]. Accessed 9 November 2020.

[2] Ministry of Health and Social Welfare. 2010. "Retention Strategy for the Health Workforce." [https://www.k4health.org/sites/default/files/Lesotho_Retention_Strategy.pdf]. Accessed 9 November 2020.

[3] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1]. Accessed 9 November 2020.

[4] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 9 November 2020.

4.1.2 Facilities capacity

4.1.2a

Hospital beds per 100,000 people

Input number

Current Year Score: 130

2006

WHO/World Bank; national sources

4.1.2b

Does the country have the capacity to isolate patients with highly communicable diseases in a biocontainment patient care unit and/or patient isolation room/unit located within the country?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence that the Kingdom of Lesotho has patient isolation for highly communicable diseases.

There is evidence of isolation and treatment capacity for multi-drug resistant tuberculosis (MDR-TB). The Botsabelo Hospital, which treats advanced form of MDR-TB separates patients in wards according to their level of drug resistance. The infrastructure is built around the disease with glass ceiling to allow for UV rays that kill tuberculosis bacteria, and ceiling vents to prevent the disease from spreading. [1] The St. James Mission Hospital also has a male isolation ward, a female isolation ward and paediatric isolation ward in addition to the male, female, and paediatric wards. The hospital does not provide any more details on these wards or their infrastructure. [2] The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 also notes that isolation wards are available in the hospitals. [2] However, according to the JEE they are also often used to accommodate non-infectious patients due to inadequate hospital capacity. [3] Furthermore, news reports show that the Berea isolation hospital for COVID-19 is in poor conditions and lacks adequate equipment and facilities. The news reports do not contain any information on the capacities of the isolation hospital. [4] News outlets also report that the

head of the National Covid-19 Secretariat is concerned about COVID-19 facilities noting that there are only two Intensive Care Units (ICUs) at the Maluti Hospital, which provides for very limited capacity. [5] There is no further information provided on the website of the Ministry of Health. [6]

[1] Partners in Health. 22 September 2016. "Lesotho's One-of-a-Kind Hospital." [https://www.pih.org/article/lesothos-one-of-a-kind-hospital]. Accessed 9 November 2020.

[2] St.James Mission Hospital. [https://hospital.tacosa.org/Departments/hospital-services.html]. Accessed 9 November 2020.

[3] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1]. Accessed 9 November 2020.

[4] Lesotho Times. 29 July 2020. "Lesotho: Ramatlapeng Blasts Govt Over Covid-19 Response". [https://allafrica.com/stories/202007300529.html]. Accessed 9 November 2020.

[5] Lesotho Times. 29 July 2020. "Lesotho: Lives At Risk of Covid-19 Due to Poor Health Facilities - Khasipe". [https://allafrica.com/stories/202007291032.html]. Accessed 9 November 2020.

[6] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 9 November 2020.

4.1.2c

Does the country meet one of the following criteria?

- Is there evidence that the country has demonstrated capacity to expand isolation capacity in response to an infectious disease outbreak in the past two years?

- Is there evidence that the country has developed, updated or tested a plan to expand isolation capacity in response to an infectious disease outbreak in the past two years?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has demonstrated capacity to expand isolation capacity in response to an infectious disease outbreak in the past two years, and there is no evidence that the country has developed, updated or tested a plan to expand isolation capacity in response to an infectious disease outbreak in the past two years. News reports show that the Berea isolation hospital for COVID-19 is in poor conditions and lacks adequate equipment and facilities. The news reports do not contain any information on the capacities of the isolation hospital. [1] News outlets also report that the head of the National Covid-19 Secretariat is concerned about COVID-19 facilities noting that there are only two Intensive Care Units (ICUs) at the Maluti Hospital, which provides for very limited capacity. [2] Although the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that isolation wards are available in the hospitals, it also notes that they are also often used to accommodate non-infectious patients due to inadequate hospital capacity. The JEE does not provide any further evidence on the matter. [3] There is no further information provided on the website of the Ministry of Health. [4] The Disaster Management Authority (DMA) does not have a website.

[1] Lesotho Times. 29 July 2020. "Lesotho: Ramatlapeng Blasts Govt Over Covid-19 Response". [https://allafrica.com/stories/202007300529.html]. Accessed 29 April 2021.

[2] Lesotho Times. 29 July 2020. "Lesotho: Lives At Risk of Covid-19 Due to Poor Health Facilities - Khasipe". [https://allafrica.com/stories/202007291032.html]. Accessed 29 April 2021.

[3] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1]. Accessed 9 November 2020.

[4] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 29 April 2021.

4.2 SUPPLY CHAIN FOR HEALTH SYSTEM AND HEALTHCARE WORKERS

4.2.1 Routine health care and laboratory system supply

4.2.1a

Is there a national procurement protocol in place which can be utilized by the Ministries of Health and Agriculture for the acquisition of laboratory supplies (e.g. equipment, reagents and media) and medical supplies (e.g. equipment, PPE) for routine needs?

Yes for both laboratory and medical supply needs = 2, Yes, but only for one = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a national procurement protocol in place which can be utilized by the Ministries of Health and Agriculture for the acquisition of laboratory supplies (e.g. equipment, reagents and media) and medical supplies (e.g. equipment, PPE) for routine needs. However, Lesotho has an online tender notice on the website of its government. [1] The tender notices published on the website did not include any on acquisition of laboratory supplies and medical supplies. Lesotho also has a public procurement law as per "Public Procurement Regulations" of 2007, which gives ministries the right to carry out public procurement. There are however no specific provisions made for acquisition of laboratory supplies and medical supplies. [2] There is no further evidence provided on the websites of the Ministry of Health, and the Ministry of Agriculture and Food Security. [3, 4] The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 also does not provide any evidence on this issue. [5]

[1] Government of Lesotho. "Tender Notices." [<https://www.gov.ls/document-category/tenders/page/5/>]. Accessed 9 November 2020.

[2] Government of Lesotho. 2007. "Public Procurement Regulations." [<https://lesotholii.org/legislation/sl/1-0>]. Accessed 9 November 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 9 November 2020.

[4] Government of Lesotho. "Ministry of Agriculture and Food Security." [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 9 November 2020.

[5] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 9 November 2020.

4.2.2 Stockpiling for emergencies

4.2.2a

Does the country have a stockpile of medical supplies (e.g. MCMs, medicines, vaccines, medical equipment, PPE) for national use during a public health emergency?

Yes = 2, Yes, but there is limited evidence about what the stockpile contains = 1, No = 0

Current Year Score: 2

There is evidence that the Kingdom of Lesotho has a stockpile of medical supplies (e.g. MCMs, medicines, vaccines, medical equipment, PPE) for national use during a public health emergency. According to the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017, Lesotho holds a supply of countermeasures at the national level including vaccines for yellow fever and rabies. [1] The National Drug Service Organization (NDSO) is the body that has the mandate to

procure, store and distribute drugs and medical supplies in Lesotho. [1, 2] In the case of a health emergency, supplies can also be gathered from health facilities in the districts and then be restocked by the NDSO. However, the JEE also states that there is a need to develop protocols for the fast tracking of supplies of medical countermeasures from NDSO in case of public health emergencies. Furthermore, Reliefweb reports that the Turkish Cooperation and Coordination Agency (TIKA) has provided Lesotho with medical supplies for healthcare workers and institutions such as disinfectants, gloves, masks, etc. [3] The United Nations also reports that 100,000 facemasks have been donated to Lesotho in the face of the health emergency for frontline healthcare workers. [4] Lastly, the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 note that Lesotho does not have a mechanism for fast-tracking medical supplies in case of an emergency. [1] There is no further evidence on the websites of the Ministry of Health, Ministry of Home Affairs, and the Ministry of Defence and National Security. [5, 6, 7] The Disaster Management Authority (DMA) does not have a website.

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 21 November 2020.

[2] National Drug Service Organization (NDSO). [<http://ndso.co.ls/>]. Accessed 9 November 2020.

[3] Reliefweb. 5 May 2020. "TIKA Provided Medical Supplies to the Kingdom of Lesotho to Support Its Fight against COVID19". [<https://reliefweb.int/report/lesotho/t-ka-provided-medical-supplies-kingdom-lesotho-support-its-fight-against-covid19>]. Accessed 9 November 2020.

[4] United Nations. 25 August 2020. "Critical COVID-19 protective supplies delivered to frontline workers in Kingdom of Lesotho". [https://www.un.org/technologybank/critical_covid-19_protective_supplies_delivered_Lesotho]. Accessed 9 November 2020.

[5] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 9 November 2020.

[6] Government of Lesotho. "Ministry of Home Affairs". [<https://www.gov.ls/ministry-of-home-affairs/>]. Accessed 9 November 2020.

[7] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 9 November 2020.

4.2.2b

Does the country have a stockpile of laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

Yes = 2, Yes, but there is limited evidence about what the stockpile contains = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a stockpile of laboratory supplies (e.g. reagents, media) for national use during a public health emergency. There is no evidence provided on the websites of the Ministry of Health, Ministry of Home Affairs, and the Ministry of Defence and National Security. [1, 2, 3] The Disaster Management Authority does not have an online presence. Lastly, the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 does not provide any evidence on the matter. [4]

[1] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 9 November 2020.

[2] Government of Lesotho. "Ministry of Home Affairs". [<https://www.gov.ls/ministry-of-home-affairs/>]. Accessed 9 November 2020.

[3] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 9 November 2020.

[4] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>].

Accessed 21 November 2020.

4.2.2c

Is there evidence that the country conducts or requires an annual review of the national stockpile to ensure the supply is sufficient for a public health emergency?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence that the Kingdom of Lesotho conducts or requires an annual review of the national stockpile to ensure the supply is sufficient for a public health emergency. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 states that there is a need to develop protocols for the fast tracking of supplies of medical countermeasures from NDSO in case of public health emergencies. The JEE does not provide any further evidence on the matter. [1] There is no further evidence on the websites of the National Drug Service Organization (NDSO), Ministry of Health, Ministry of Home Affairs, and the Ministry of Defence and National Security. [2, 3, 4, 5] The Disaster Management Authority (DMA) does not have a website.

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 29 April 2021.

[2] National Drug Service Organization (NDSO). [<http://ndso.co.ls/>]. Accessed 29 April 2021.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 29 April 2021.

[4] Government of Lesotho. "Ministry of Home Affairs". [<https://www.gov.ls/ministry-of-home-affairs/>]. Accessed 29 April 2021.

[5] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 29 April 2021.

4.2.3 Manufacturing and procurement for emergencies

4.2.3a

Does the country meet one of the following criteria?

- Is there evidence of a plan/agreement to leverage domestic manufacturing capacity to produce medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency?
- Is there evidence of a plan/mechanism to procure medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 0

There is no evidence of a plan/agreement to leverage domestic manufacturing capacity to produce medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency in the Kingdom of Lesotho. There is also no evidence of a plan/mechanism to procure medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency. The Ministry of Health publishes procurement notices on its website, but they do not include any procurements for medical supplies during a public health emergency. [1] Lesotho also has a public procurement law as per "Public Procurement Regulations" of 2007, which gives ministries the right to carry out public procurement. There are however no specific provisions made for acquisition of medical supplies during a public health emergency. [2] There is also no evidence provided on the websites of the Ministry of Health, Ministry of Home Affairs, and

the Ministry of Defence and National Security. [3, 4, 5] The Disaster Management Authority does not have an online presence.

[1] Government of Lesotho. "Tender Notices". [<https://www.gov.ls/document-category/tenders/>]. Accessed 11 November 2020.

[2] Government of Lesotho. 2007. "Public Procurement Regulations." [<https://lesotholii.org/legislation/sl/1-0>]. Accessed 11 November 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 11 November 2020.

[4] Government of Lesotho. "Ministry of Home Affairs". [<https://www.gov.ls/ministry-of-home-affairs/>]. Accessed 11 November 2020.

[5] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 11 November 2020.

4.2.3b

Does the country meet one of the following criteria?

- Is there evidence of a plan/agreement to leverage domestic manufacturing capacity to produce laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

- Is there evidence of a plan/mechanism to procure laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 0

There is no evidence of a plan/agreement to leverage domestic manufacturing capacity to produce laboratory supplies (e.g. reagents, media) for national use during a public health emergency in the Kingdom of Lesotho. There is also no evidence of a plan/mechanism to procure laboratory supplies (e.g. reagents, media) for national use during a public health emergency. The Ministry of Health publishes procurement notices on its website, but they do not include any procurements for laboratory supplies during a public health emergency. [1] Lesotho also has a public procurement law as per "Public Procurement Regulations" of 2007, which gives ministries the right to carry out public procurement. There are however no specific provisions made for acquisition of laboratory supplies during a public health emergency. [2] There is also no evidence provided on the websites of the Ministry of Health, Ministry of Home Affairs, and the Ministry of Defence and National Security. [3, 4, 5] The Disaster Management Authority does not have an online presence.

[1] Government of Lesotho. "Tender Notices". [<https://www.gov.ls/document-category/tenders/>]. Accessed 11 November 2020.

[2] Government of Lesotho. 2007. "Public Procurement Regulations." [<https://lesotholii.org/legislation/sl/1-0>]. Accessed 11 November 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 11 November 2020.

[4] Government of Lesotho. "Ministry of Home Affairs". [<https://www.gov.ls/ministry-of-home-affairs/>]. Accessed 11 November 2020.

[5] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 11 November 2020.

4.3 MEDICAL COUNTERMEASURES AND PERSONNEL DEPLOYMENT

4.3.1 System for dispensing medical countermeasures (MCM) during a public health emergency

4.3.1a

Does the country have a plan, program, or guidelines in place for dispensing medical countermeasures (MCM) for national use during a public health emergency (i.e., antibiotics, vaccines, therapeutics and diagnostics)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has any plans for dispensing medical countermeasures during a public health emergency. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 does not provide any evidence on such plans. The JEE states that there is a need to develop protocols for the fast tracking of supplies of medical countermeasures from the National Drug Service Organization (NDSO) in case of public health emergencies. [1] There is no further evidence provided on the webpages of NDSO, the Ministry of Health, and the Ministry of Defence and National Security. [2, 3, 4] The Disaster Management Authority (DMA) does not have a website.

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 11 November 2020.

[2] National Drug Service Organization (NDSO). [<http://ndso.co.ls/>]. Accessed 11 November 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 11 November 2020.

[4] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 11 November 2020.

4.3.2 System for receiving foreign health personnel during a public health emergency

4.3.2a

Is there a public plan in place to receive health personnel from other countries to respond to a public health emergency?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a public plan in place to receive health personnel from other countries to respond to a public health emergency. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes that there are no agreements for the deployment of external health care professionals. [1] The JEE recommends that formal mechanisms are put in place for requesting and receiving international health professionals in case of public health emergencies. However, in October 2020, Lesotho received 10 doctors from China to support the health system against COVID-19. The Chinese team also brought personal protective equipments and testing materials. [2] There is no further evidence provided on the websites of the Ministry of Health, the Ministry of Home Affairs, and the Ministry of Defence and National Security. [3, 4, 5] The Disaster Management Authority (DMA) does not have a website.

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 11 November 2020.

[2] Lesotho Times. 7 October 2020. "Majoro Welcomes Chinese Experts to Lesotho". [<https://lestimes.com/majoro-welcomes-chinese-experts-to-lesotho/>]. Accessed 11 November 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 11 November 2020.

[4] Government of Lesotho. "Ministry of Home Affairs". [<https://www.gov.ls/ministry-of-home-affairs/>]. Accessed 11 November 2020.

[5] Government of Lesotho. "Ministry of Defence and National Security." [<https://www.gov.ls/ministry-of-defence-and-national-security/>]. Accessed 11 November 2020.

4.4 HEALTHCARE ACCESS

4.4.1 Access to healthcare

4.4.1a

Does the constitution explicitly guarantee citizens' right to medical care?

Guaranteed free = 4, Guaranteed right = 3, Aspirational or subject to progressive realization = 2, Guaranteed for some groups, not universally = 1, No specific provision = 0

Current Year Score: 2

2020

World Policy Analysis Center

4.4.1b

Access to skilled birth attendants (% of population)

Input number

Current Year Score: 77.9

2014

WHO/World Bank/United Nations Children's Fund (UNICEF)

4.4.1c

Out-of-pocket health expenditures per capita, purchasing power parity (PPP; current international \$)

Input number

Current Year Score: 44.19

2017

WHO Global Health Expenditure database

4.4.2 Paid medical leave

4.4.2a

Are workers guaranteed paid sick leave?

Paid sick leave = 2, Unpaid sick leave = 1, No sick leave = 0

Current Year Score: 2

2020

World Policy Analysis Center

4.4.3 Healthcare worker access to healthcare

4.4.3a

Has the government issued legislation, a policy, or a public statement committing to provide prioritized healthcare services to healthcare workers who become sick as a result of responding to a public health emergency?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the government of the Kingdom of Lesotho has issued legislation or a policy committing to provide prioritised healthcare services to workers who become sick as a result of responding to a public health emergency. There is no evidence of such a commitment in the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017. Furthermore, Lesotho does not have a public health emergency response plan. [1] The Disaster Management Authority (DMA), which is responsible for disaster management does not have a website. There is no further evidence provided on the website of the Ministry of Health. [2]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 11 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 11 November 2020.

4.5 COMMUNICATIONS WITH HEALTHCARE WORKERS DURING A PUBLIC HEALTH EMERGENCY

4.5.1 Communication with healthcare workers

4.5.1a

Is there a system in place for public health officials and healthcare workers to communicate during a public health emergency?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a system in place for public health officials and healthcare workers to communicate during a public health emergency. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes a lack of a multi-hazard risk communication strategy. The JEE reports that there is no formal communication platform or mechanism in place for internal communications during public health emergencies, but informal communication does take place inside and outside of the Ministry of Health. Consequently, communication responsibilities across different sectors and actors are informal and not effectively implemented. [1] Furthermore, Lesotho does not have a public health emergency response plan, or a disaster risk reduction strategy. There is no further evidence provided on the

website of the Ministry of Health. [2] The Disaster Management Authority (DMA) does not have a website.

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 11 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 11 November 2020.

4.5.1b

Does the system for public health officials and healthcare workers to communicate during an emergency encompass healthcare workers in both the public and private sector?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has a system in place for public health officials and healthcare workers to communicate during a public health emergency that includes both the public and private sector. The Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017 notes a lack of a multi-hazard risk communication strategy. The JEE reports that there is no formal communication platform or mechanism in place for internal communications during public health emergencies, but informal communication does take place inside and outside of the Ministry of Health. Consequently, communication responsibilities across different sectors and actors are informal and not effectively implemented. [1] Furthermore, Lesotho does not have a public health emergency response plan, or a disaster risk reduction strategy. There is no further evidence provided on the website of the Ministry of Health. [2] The Disaster Management Authority (DMA) does not have a website.

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 11 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 11 November 2020.

4.6 INFECTION CONTROL PRACTICES AND AVAILABILITY OF EQUIPMENT

4.6.1 Healthcare associated infection (HCAI) prevention and control programs

4.6.1a

Is there evidence that the national public health system is monitoring for and tracking the number of healthcare associated infections (HCAI) that take place in healthcare facilities?

Yes = 1 , No = 0

Current Year Score: 1

There is evidence that the Kingdom of Lesotho's public health system is monitoring healthcare-associated infections (HCAI). According to the Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho (JEE) of 2017, surveillance of HCAI is regularly conducted on high risk groups. Furthermore, as per the JEE, control measures are assessed and monitored. As such, the "Infection Prevention and Control Plan (IPCP)" of 2016 includes processes that may be used to prevent and control nosocomial infections. [1] The IPCP however is not publicly available. The JEE also reports that there are Infection Prevention Committees (IPC) that function in various health facilities. There are no further updates or evidence on this issue

provided on the website of the Ministry of Health. [2]

[1] World Health Organization (WHO). July 2017. "Joint External Evaluation of IHR Core Capacities of the Kingdom of Lesotho". [<https://apps.who.int/iris/bitstream/handle/10665/259162/WHO-WHE-CPI-REP-2017.47-eng.pdf?sequence=1>]. Accessed 11 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 11 November 2020.

4.7 CAPACITY TO TEST AND APPROVE NEW MEDICAL COUNTERMEASURES

4.7.1 Regulatory process for conducting clinical trials of unregistered interventions

4.7.1a

Is there a national requirement for ethical review (e.g., from an ethics committee or via Institutional Review Board approval) before beginning a clinical trial?

Yes = 1, No = 0

Current Year Score: 0

There is no national requirement for ethical review before beginning a clinical trial in the Kingdom of Lesotho. The 2011 "Lesotho Pharmaceutical Country Profile" published by the Ministry of Health and Social Welfare, now the Ministry of Health, in collaboration with the World Health Organization (WHO) reports that there are no legal provision in Lesotho regarding clinical trials and requirements for ethical review. [1] The report also states that there is no Medicines Regulatory Agency (MRA) in Lesotho and that there are no legal provisions establishing the powers and responsibilities of a MRA. There is no evidence that the situation has changed and there is no further evidence provided on the websites of the Ministry of Health, and the Ministry of Communication, Science and Technology. [2, 3]

[1] Ministry of Health and Social Welfare. 2011. "Lesotho Pharmaceutical Country Profile."

[https://www.who.int/medicines/areas/coordination/Lesotho_PSCPNarrativeQuestionnaire_19072011.pdf?ua=1]. Accessed 11 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 11 November 2020.

[3] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 11 November 2020.

4.7.1b

Is there an expedited process for approving clinical trials for unregistered medical countermeasures (MCM) to treat ongoing epidemics?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence of an expedited process for approving clinical trials for unregistered medical countermeasures to treat ongoing pandemics in the Kingdom of Lesotho. The 2011 "Lesotho Pharmaceutical Country Profile" published by the Ministry of Health and Social Welfare, now the Ministry of Health, in collaboration with the World Health Organization (WHO) reports that there are no legal provision in Lesotho regarding clinical trials and requirements for ethical review. [1] The report also states that there is no Medicines Regulatory Agency (MRA) in Lesotho and that there are no legal provisions establishing the

powers and responsibilities of a MRA. There are no further updates or evidence that the situation has changed and there is no further evidence provided on the websites of the Ministry of Health, and the Ministry of Communication, Science and Technology. [2, 3]

[1] Ministry of Health and Social Welfare. 2011. "Lesotho Pharmaceutical Country Profile."

[https://www.who.int/medicines/areas/coordination/Lesotho_PSCPNarrativeQuestionnaire_19072011.pdf?ua=1]. Accessed 11 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 11 November 2020.

[3] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 11 November 2020.

4.7.2 Regulatory process for approving medical countermeasures

4.7.2a

Is there a government agency responsible for approving new medical countermeasures (MCM) for humans?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of a government agency responsible for approving new medical countermeasures for humans in the Kingdom of Lesotho. The 2011 "Lesotho Pharmaceutical Country Profile" published by the Ministry of Health and Social Welfare, now the Ministry of Health, in collaboration with the World Health Organization (WHO) reports that there is no Medicines Regulatory Agency (MRA) in Lesotho and that there are no legal provisions establishing the powers and responsibilities of a MRA. Furthermore, the report also states that there are also no legal provision in Lesotho regarding clinical trials and requirements for ethical review. [1] There is no evidence that the situation has changed. There is however evidence from the Trade Portal of the Kingdom of Lesotho that there is a Medicines Regulatory Unit (MRU) at the Ministry of Health, which approves the Certificate of Pharmaceutical Product for the country of origin and the importation of habit forming drugs. [2] There are no further updates or evidence regarding and a MRA or the MRU in the websites of the Ministry of Health, and the Ministry of Communication, Science and Technology. [3, 4]

[1] Ministry of Health and Social Welfare. 2011. "Lesotho Pharmaceutical Country Profile."

[https://www.who.int/medicines/areas/coordination/Lesotho_PSCPNarrativeQuestionnaire_19072011.pdf?ua=1]. Accessed 11 November 2020.

[2] Kingdom of Lesotho. "The Lesotho Trade Portal".

[<https://www.lesothotradeportal.org.ls/index.php?r=searchProcedure/view1&id=21>]. Accessed 11 November 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 11 November 2020.

[4] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 11 November 2020.

4.7.2b

Is there an expedited process for approving medical countermeasures (MCM) for human use during public health emergencies?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of an expedited process for approving medical countermeasures for human use during public health emergencies in the Kingdom of Lesotho. The 2011 "Lesotho Pharmaceutical Country Profile" published by the Ministry of Health and Social Welfare, now the Ministry of Health, in collaboration with the World Health Organization (WHO) reports that there are no legal provision in Lesotho regarding clinical trials and requirements for ethical review. [1] The report also states that there is no Medicines Regulatory Agency (MRA) in Lesotho and that there are no legal provisions establishing the powers and responsibilities of a MRA. There is no evidence that the situation has changed and there is no further evidence provided on the websites of the Ministry of Health, and the Ministry of Communication, Science and Technology regarding this issue. [2, 3]

[1] Ministry of Health and Social Welfare. 2011. "Lesotho Pharmaceutical Country Profile." [https://www.who.int/medicines/areas/coordination/Lesotho_PSCPNarrativeQuestionnaire_19072011.pdf?ua=1]. Accessed 11 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 11 November 2020.

[3] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of-communications-science-and-technology/>]. Accessed 11 November 2020.

Category 5: Commitments to improving national capacity, financing plans to address gaps, and adhering to global norms

5.1 INTERNATIONAL HEALTH REGULATIONS (IHR) REPORTING COMPLIANCE AND DISASTER RISK REDUCTION

5.1.1 Official IHR reporting

5.1.1a

Has the country submitted IHR reports to the WHO for the previous calendar year?

Yes = 1, No = 0

Current Year Score: 1

2020

World Health Organization

5.1.2 Integration of health into disaster risk reduction

5.1.2a

Are epidemics and pandemics integrated into the national risk reduction strategy or is there a standalone national disaster risk reduction strategy for epidemics and pandemics?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that pandemics are integrated into the national disaster risk reduction strategy and there is no standalone disaster risk reduction strategy for pandemics. There is no evidence that the Kingdom of Lesotho has a national disaster risk reduction strategy. There is no evidence provided on the website of the Ministry of Health, and the Disaster Management Authority (DMA) does not have a website. [1] The Government of Lesotho has published a public tender notice for a Consultancy to Develop a Regional Disaster Risk Reduction Strategic Plan (RDRRSP) 2016-2030. [2] However, there is no evidence on the status of the RDRRSP.

[1] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 11 November 2020.

[2] Government of Lesotho. "Tender Notices". [https://www.gov.ls/document-category/tenders/page/3/]. Accessed 11 November 2020.

5.2 CROSS-BORDER AGREEMENTS ON PUBLIC HEALTH AND ANIMAL HEALTH EMERGENCY RESPONSE

5.2.1 Cross-border agreements

5.2.1a

Does the country have cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to public health emergencies?

Yes = 2, Yes, but there is evidence of gaps in implementation = 1, No = 0

Current Year Score: 2

There is evidence that the Kingdom of Lesotho is part of a regional group, with regards to public health emergencies, and there is no evidence of gaps in implementation. Lesotho is a partner country in the East, Central, and Southern Africa Health Community (ECSA-HC). The ECSA-HC is an inter governmental health organization, which promotes regional cooperation in health. It promotes cooperation, collaboration, research, capacity building, policy development and advocacy in health. [1] The partner countries collaborate in prevention and control of infectious disease. The ECSA-HC have also established cross-border surveillance zones using a One Health approach. [2] These cross-border surveillance zones are chosen based on the length of the border, the burden of disease, human and animal activities, presence of health facilities and laboratories, etc. Cross-border committees are established to conduct oversight of surveillance and response, risk assessment, managing laboratories, resource mobilization, etc. There are cross-border zones between Lesotho and Uganda, and Lesotho and South Africa in diseases surveillance, emergency preparedness and response. [2, 3] There is no further evidence provided on the website of the Ministry of Health. [4]

[1] East, Central, and Southern Africa Health Community (ECSA-HC). [http://ecsahc.org/ecsahc-at-a-glance/]. Accessed 13 November 2020.

[2] African Society for Laboratory Medicine. 11 December 2018. "Strengthening Cross-Border Diseases Surveillance through Cross-Border Zoning". [http://aslm2018.org/strengthening-cross-border-diseases-surveillance-through-cross-border-zoning/]. Accessed 13 November 2020.

[3] East, Central, and Southern Africa Health Community (ECSA-HC). August 2018. "ECSA-Health Community Supports the Lesotho-South Africa Cross-Border Zones for Disease Surveillance Expansion." [http://ecsahc.org/wp-content/uploads/2018/10/August-Newsletter-Final-1.pdf]. Accessed 13 November 2020.

[4] Government of Lesotho. "Ministry of Health." [https://www.gov.ls/ministry-of-health/]. Accessed 13 November 2020.

5.2.1b

Does the country have cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to animal health emergencies?

Yes = 2, Yes, but there is evidence of gaps in implementation = 1, No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has cross-border agreements, protocols or MOUs with neighbouring countries, or as part of a regional group with regards to animal health emergencies. However, the Kingdom of Lesotho is a partner country in the East, Central, and Southern Africa Health Community (ECSA-HC). The ECSA-HC is an inter governmental health organization, which promotes regional cooperation in health. It promotes cooperation, collaboration, research, capacity building, policy development and advocacy in health. [1] The ECSA-HC have also established cross-border surveillance zones using a One Health approach. [2] These cross-border surveillance zones are chosen based on the length of the border, the burden of disease, human and animal activities, presence of health facilities and laboratories, etc. Cross-border committees are established to conduct oversight of surveillance and response, risk assessment, managing laboratories, resource mobilization, etc. There are cross-border zones between Lesotho and Uganda, and Lesotho and South Africa in diseases surveillance, emergency preparedness and response. Although the corss-border zones are also chosen taking into account animal activities, there is no evidence provided on animal health emergencies.[2, 3] There is no further evidence provided on the website of the Ministry of Health. [4]

[1] East, Central, and Southern Africa Health Community (ECSA-HC). [<http://ecsahc.org/ecsahc-at-a-glance/>]. Accessed 13 November 2020.

[2] African Society for Laboratory Medicine. 11 December 2018. "Strengthening Cross-Border Diseases Surveillance through Cross-Border Zoning". [<http://aslm2018.org/strengthening-cross-border-diseases-surveillance-through-cross-border-zoning/>]. Accessed 13 November 2020.

[3] East, Central, and Southern Africa Health Community (ECSA-HC). August 2018. "ECSA-Health Community Supports the Lesotho-South Africa Cross-Border Zones for Disease Surveillance Expansion." [<http://ecsahc.org/wp-content/uploads/2018/10/August-Newsletter-Final-1.pdf>]. Accessed 13 November 2020.

[4] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 13 November 2020.

5.3 INTERNATIONAL COMMITMENTS

5.3.1 Participation in international agreements

5.3.1a

Does the county have signatory and ratification (or same legal effect) status to the Biological Weapons Convention?

Signed and ratified (or action having the same legal effect) = 2, Signed = 1, Non-compliant or not a member = 0

Current Year Score: 2

2021

Biological Weapons Convention

5.3.1b

Has the country submitted confidence building measures for the Biological Weapons Convention in the past three years?

Yes = 1, No = 0

Current Year Score: 0

2021

Biological Weapons Convention

5.3.1c

Has the state provided the required United Nations Security Council Resolution (UNSCR) 1540 report to the Security Council Committee established pursuant to resolution 1540 (1540 Committee)?

Yes = 1 , No = 0

Current Year Score: 1

2021

Biological Weapons Convention

5.3.1d

Extent of United Nations Security Council Resolution (UNSCR) 1540 implementation related to legal frameworks and enforcement for countering biological weapons:

Very good (60+ points) = 4, Good (45–59 points) = 3, Moderate (30–44 points) = 2, Weak (15–29 points) = 1, Very weak (0–14 points) or no matrix exists/country is not party to the BWC = 0

Current Year Score: 2

2021

Biological Weapons Convention

5.3.2 Voluntary memberships

5.3.2a

Does the country meet at least 2 of the following criteria?

- Membership in Global Health Security Agenda (GHSA)
- Membership in the Alliance for Country Assessments for Global Health Security and IHR Implementation (JEE Alliance)
- Membership in the Global Partnership Against the Spread of Weapons and Materials of Mass Destruction (GP)
- Membership in the Australia Group (AG)
- Membership in the Proliferation Security Initiative (PSI)

Needs to meet at least two of the criteria to be scored a 1 on this measure. , Yes for five = 1 , Yes for four = 1 , Yes for three = 1 , Yes for two = 1 , Yes for one = 0 , No for all = 0

Current Year Score: 0

2021

Global Health Security Agenda; JE Alliance; Global Partnership; Australia Group; PSI

5.4 JOINT EXTERNAL EVALUATION (JEE) AND PERFORMANCE OF VETERINARY SERVICES PATHWAY (PVS)

5.4.1 Completion and publication of a Joint External Evaluation (JEE) assessment and gap analysis

5.4.1a

Has the country completed a Joint External Evaluation (JEE) or precursor external evaluation (e.g., GHSA pilot external assessment) and published a full public report in the last five years?

Yes = 1, No = 0

Current Year Score: 1

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

5.4.1b

Has the country completed and published, within the last five years, either a National Action Plan for Health Security (NAPHS) to address gaps identified through the Joint External Evaluation (JEE) assessment or a national GHSA roadmap that sets milestones for achieving each of the GHSA targets?

Yes = 1, No = 0

Current Year Score: 0

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

5.4.2 Completion and publication of a Performance of Veterinary Services (PVS) assessment and gap analysis

5.4.2a

Has the country completed and published a Performance of Veterinary Services (PVS) assessment in the last five years?

Yes = 1, No = 0

Current Year Score: 0

2021

OIE PVS assessments

5.4.2b

Has the country completed and published a Performance of Veterinary Services (PVS) gap analysis in the last five years?

Yes = 1, No = 0

Current Year Score: 0

2021

OIE PVS assessments

5.5 FINANCING

5.5.1 National financing for epidemic preparedness

5.5.1a

Is there evidence that the country has allocated national funds to improve capacity to address epidemic threats within the past three years?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Kingdom of Lesotho has allocated national funds to improve capacity to address epidemic threats within the past three years. There is no evidence found on this matter on the websites of the Ministry of Health, Ministry of Agriculture and Health Security, the Office of the King, and the Office of the Prime Minister. [1, 2, 3, 4] Lastly, the "Citizens' Guide to the 2019/2020 Budget" of 28 February 2019 by the Ministry of Finance of the Kingdom of Lesotho does not provide any evidence on national funds allocated to improve capacity to address epidemic threats. However, it does note that the ministry will increase coverage of Anti-Retroviral Treatment (ART) of HIV as well as increase targeted HIV testing for factory workers, Lesbian Gay Transgender Bisexual and Intersexual (LGTBI) community, migrant workers, and adolescents and young women. [5]

[1] Government of Lesotho. "Ministry of Health". [<https://www.gov.ls/ministry-of-health/>]. Accessed 13 November 2020.

[2] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 13 November 2020.

[3] Government of Lesotho. "The Office of the King". [<https://www.gov.ls/the-monarchy/>]. Accessed 13 November 2020.

[4] Government of Lesotho. "The Office of the Prime Minister". [<https://www.gov.ls/prime-ministers-office/>]. Accessed 13 November 2020.

[5] Ministry of Finance of the Kingdom of Lesotho. 28 February 2019. "Citizens' Guide to the 2019/2020 Budget." [<http://www.finance.gov.ls/documents/Budget%20Formulation/Citizens%20Budget%20Guide/Citizens%20Guide%202019-20%20Final.pdf>]. Accessed 21 November 2020.

5.5.2 Financing under Joint External Evaluation (JEE) and Performance of Veterinary Services (PVS) reports and gap analyses

5.5.2a

Does the Joint External Evaluation (JEE) report, National Action Plan for Health Security (NAPHS), and/or national GHSA roadmap allocate or describe specific funding from the national budget (covering a time-period either in the future or within the past five years) to address the identified gaps?

Yes = 1 , No/country has not conducted a JEE = 0

Current Year Score: 0

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

5.5.2b

Does the Performance of Veterinary Services (PVS) gap analysis and/or PVS assessment allocate or describe specific funding from the national budget (covering a time-period either in the future or within the past five years) to address the identified gaps?

Yes = 1 , No/country has not conducted a PVS = 0

Current Year Score: 0

2021

OIE PVS assessments

5.5.3 Financing for emergency response

5.5.3a

Is there a publicly identified special emergency public financing mechanism and funds which the country can access in the face of a public health emergency (such as through a dedicated national reserve fund, an established agreement with the World Bank pandemic financing facility/other multilateral emergency funding mechanism, or other pathway identified through a public health or state of emergency act)?

Yes = 1 , No = 0

Current Year Score: 1

The Kingdom of Lesotho is eligible for the World Bank pandemic financing facility. Lesotho is on the list of countries eligible for International Development Association (IDA) funding, and is therefore eligible for the World Bank's Pandemic Emergency Financing Facility. [1] This fund provides financing to low-income countries affected by a large-scale disease outbreak to prevent it from reaching pandemic proportions. [2] There is no evidence of other sources of emergency funding from the Ministry of Health's web page. [3] Furthermore, the World Bank has approved a credit of USD 7.5 million on 14 May 2020 to support the government of Lesotho in its efforts to deal with the COVID-19 emergency. The funds will be used for epidemiological investigation on contact tracing, travelers screening at points of entry, prevention and control at health facilities, isolation and treatment capabilities, protective equipment, etc. [4]

[1] International Development Association (IDA). "Borrowing Countries". [<http://ida.worldbank.org/about/borrowing-countries>]. Accessed 13 November 2020.

[2] World Bank (WB). December 2017. "Pandemic Emergency Financing Facility Operational Brief for Eligible Countries". [<http://pubdocs.worldbank.org/en/119961516647620597/PEF-Operational-Brief-Dec-2017.pdf>]. Accessed 7 March 2019.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 13 November 2020.

[4] World Bank. 14 May 2020. "World Bank Approves \$7.5 Million to Support Lesotho's Efforts to Address COVID-19 Pandemic". Accessed 13 November 2020.

5.5.4 Accountability for commitments made at the international stage for addressing epidemic threats

5.5.4a

Is there evidence that senior leaders (president or ministers), in the past three years, have made a public commitment either to:

- Support other countries to improve capacity to address epidemic threats by providing financing or support?
- Improve the country's domestic capacity to address epidemic threats by expanding financing or requesting support to improve capacity?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 0

There is no evidence of public commitment by senior leaders of the Kingdom of Lesotho to provide financing or other support to other countries to improve their capacity to address epidemic threats or to improve its own capacity by expanding domestic funding or seeking foreign funding. There is no evidence that Lesotho has offered any funds through the Global Health Security (GHS) Tracking Dashboard. [1] There is also no evidence of relevant statements on websites of the Ministry of Health, the Ministry of Agriculture and Food Security, the Ministry of Foreign Affairs and International Relations, the World Health Organization (WHO), or media outlets. [2, 3, 4]

[1] Global Health Security (GHS) Tracking Dashboard. "Lesotho Funder Profile".

[<https://tracking.ghscosting.org/#analysis/LS/d>]. Accessed 13 November 2020.

[2] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 13 November 2020.

[3] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 13 November 2020.

[4] Government of Lesotho. "Ministry of Foreign Affairs and International Relations." [<https://www.gov.ls/ministry-of-foreign-affairs-and-international-relations/>]. Accessed 13 November 2020.

5.5.4b

Is there evidence that the country has, in the past three years, either:

- Provided other countries with financing or technical support to improve capacity to address epidemic threats?
- Requested financing or technical support from donors to improve the country's domestic capacity to address epidemic threats?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 1

There is evidence that the Kingdom of Lesotho has requested financing or technical support from donors to improve the country's domestic capacity to address epidemic threats, but there is no evidence that Lesotho has provided other countries with financing or technical support to improve capacity to address epidemic threats in the past three years. There is evidence via the Global Health Security Funding Tracker that Lesotho has invested donor financed to improve domestic capacity to address epidemic threats. The tracker notes that Lesotho has received funding from multiple donors to enhance health security including prevention, detection and response, and the majority of funds are dedicated to the national laboratory system. The rest are distributed among antimicrobial resistance, workforce development, emergency response, immunization, real time surveillance, preparedness, reporting, etc. [1] There is also evidence that the World Bank has approved a credit of USD 7.5 million on 14 May 2020 to support the government of Lesotho in its efforts to deal with the COVID-19 emergency. The funds will be used for epidemiological investigation on contact tracing, travelers screening at points of entry, prevention and control at health facilities, isolation and treatment capabilities, protective equipment, etc. [2]

There is no further evidence provided on the websites of the Ministry of Health, Ministry of Foreign Affairs and International Relations, the World Health Organization (WHO), or media sources. [3, 4, 5]

[1] Global Health Security Funding Tracker. "Lesotho". [<https://tracking.ghscosting.org/details/136/recipient>]. Accessed 14 November 2020.

[2] World Bank. 14 May 2020. "World Bank Approves \$7.5 Million to Support Lesotho's Efforts to Address COVID-19 Pandemic". Accessed 14 November 2020.

[3] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 14 November 2020.

[4] Government of Lesotho. "Ministry of Foreign Affairs and International Relations." [<https://www.gov.ls/ministry-of-foreign-affairs-and-international-relations/>]. Accessed 14 November 2020.

[5] World Health Organization (WHO). "Lesotho". [<https://www.who.int/countries/lso/>]. Accessed 14 November 2020.

5.5.4c

Is there evidence that the country has fulfilled its full contribution to the WHO within the past two years?

Yes = 1, No = 0

Current Year Score: 0

2021

Economist Impact analyst qualitative assessment based on official national sources, which vary by country

5.6 COMMITMENT TO SHARING OF GENETIC AND BIOLOGICAL DATA AND SPECIMENS

5.6.1 Commitment to sharing genetic data, clinical specimens, and/or isolated specimens (biological materials) in both emergency and nonemergency research

5.6.1a

Is there a publicly available plan or policy for sharing genetic data, clinical specimens, and/or isolated specimens (biological materials) along with the associated epidemiological data with international organizations and/or other countries that goes beyond influenza?

Yes = 1, No = 0

Current Year Score: 0

There is no publicly available plan or policy for sharing genetic data, epidemiological data, clinical specimens, and/or isolated specimens (biological materials) with international organizations and/or other countries that goes beyond influenza. There is no evidence of a plan or policy on the websites of the Ministry of Health, the Ministry of Agriculture and Food Security, and the Ministry of Communications, Science and Technology. [1, 2, 3] There is also no evidence on the "National Health Strategic Plan 2017-2022" of 2016. [4]

[1] Government of Lesotho. "Ministry of Health." [<https://www.gov.ls/ministry-of-health/>]. Accessed 12 November 2020.

[2] Government of Lesotho. "Ministry of Agriculture and Food Security". [<https://www.gov.ls/ministry-of-agriculture-and-food-security/>]. Accessed 12 November 2020.

[3] Government of Lesotho. "Ministry of Communications, Science and Technology." [<https://www.gov.ls/ministry-of->

communications-science-and-technology/]. Accessed 12 November 2020.

[4] Ministry of Health. December 2016. "National Health Strategic Plan 2017-2022".

[http://www.nationalplanningcycles.org/sites/default/files/planning_cycle_repository/lesotho/lesotho_revised_nhsp_2017-22_final_draft1.pdf]. Accessed 12 November 2020.

5.6.1b

Is there public evidence that the country has not shared samples in accordance with the Pandemic Influenza Preparedness (PIP) framework in the past two years?

Yes = 0, No = 1

Current Year Score: 1

There is no public evidence that the Kingdom of Lesotho has not shared samples in accordance with the PIP framework in the past year. The World Health Organization (WHO) has not reported any non-compliance in the past year by Lesotho, nor did a search for media articles on this produce any results. [1, 2]

[1] World Health Organization (WHO). "Virus sharing". [http://www.who.int/influenza/pip/virus_sharing/en/]. Accessed 12 November 2020.

[2] World Health Organization (WHO). "Lesotho". [<https://www.afro.who.int/countries/lesotho>]. Accessed 12 November 2020.

5.6.1c

Is there public evidence that the country has not shared pandemic pathogen samples during an outbreak in the past two years?

Yes = 0, No = 1

Current Year Score: 1

There is no public evidence that the country has not shared pandemic pathogen samples during an outbreak in the past two years. There is no evidence of WHO press releases or other media reporting suggesting that Lesotho has failed to share a sample of a pandemic pathogen during an outbreak in the past two years, including COVID-19 samples. [1, 2, 3]

[1] World Health Organization (WHO). "Lesotho". [<https://www.afro.who.int/countries/lesotho>]. Accessed 12 November 2020.

[2] World Health Organization (WHO). "Disease Outbreak News Lesotho". [<https://www.who.int/csr/don/archive/country/iso/en/>]. Accessed 12 November 2020.

[3] World Health Organization (WHO). 26 August 2020. "COVID-19 Situation Update for the WHO African Region." [https://apps.who.int/iris/bitstream/handle/10665/334003/SITREP_COVID-19_WHOAFRO_20200826-eng.pdf]. Accessed 21 November 2020.

Category 6: Overall risk environment and vulnerability to biological threats

6.1 POLITICAL AND SECURITY RISK

6.1.1 Government effectiveness

6.1.1a

Policy formation (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 2

2020

Economist Intelligence

6.1.1b

Quality of bureaucracy (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 1

2020

Economist Intelligence

6.1.1c

Excessive bureaucracy/red tape (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 1

2020

Economist Intelligence

6.1.1d

Vested interests/cronyism (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 2

2020

Economist Intelligence

6.1.1e

Country score on Corruption Perception Index (0-100, where 100=best)

Input number

Current Year Score: 41

2020

Transparency International

6.1.1f

Accountability of public officials (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 1

2020

Economist Intelligence

6.1.1g

Human rights risk (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 1

2020

Economist Intelligence

6.1.2 Orderly transfers of power

6.1.2a

How clear, established, and accepted are constitutional mechanisms for the orderly transfer of power from one government to another?

Very clear, established and accepted = 4, Clear, established and accepted = 3, One of the three criteria (clear, established, accepted) is missing = 2, Two of the three criteria (clear, established, accepted) are missing = 1, Not clear, not established, not accepted = 0

Current Year Score: 3

2021

Economist Intelligence

6.1.3 Risk of social unrest

6.1.3a

What is the risk of disruptive social unrest?

Very low: Social unrest is very unlikely = 4, Low: There is some prospect of social unrest, but disruption would be very limited = 3, Moderate: There is a considerable chance of social unrest, but disruption would be limited = 2, High: Major social unrest is likely, and would cause considerable disruption = 1, Very high: Large-scale social unrest on such a level as to seriously challenge government control of the country is very likely = 0

Current Year Score: 1

2021

Economist Intelligence

6.1.4 Illicit activities by non-state actors

6.1.4a

How likely is it that domestic or foreign terrorists will attack with a frequency or severity that causes substantial disruption?

No threat = 4, Low threat = 3, Moderate threat = 2, High threat = 1, Very high threat = 0

Current Year Score: 4

2021

Economist Intelligence

6.1.4b

What is the level of illicit arms flows within the country?

4 = Very high, 3 = High, 2 = Moderate, 1 = Low, 0 = Very low

Current Year Score: 3

2020

UN Office of Drugs and Crime (UNODC)

6.1.4c

How high is the risk of organized criminal activity to the government or businesses in the country?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 1

2021

Economist Intelligence

6.1.5 Armed conflict

6.1.5a

Is this country presently subject to an armed conflict, or is there at least a moderate risk of such conflict in the future?

No armed conflict exists = 4, Yes; sporadic conflict = 3, Yes; incursional conflict = 2, Yes, low-level insurgency = 1, Yes; territorial conflict = 0

Current Year Score: 3

2021

Economist Intelligence

6.1.6 Government territorial control

6.1.6a

Does the government's authority extend over the full territory of the country?

Yes = 1, No = 0

Current Year Score: 1

2021

Economist Intelligence

6.1.7 International tensions

6.1.7a

Is there a threat that international disputes/tensions could have a negative effect?

No threat = 4, Low threat = 3, Moderate threat = 2, High threat = 1, Very high threat = 0

Current Year Score: 1

2021

Economist Intelligence

6.2 SOCIO-ECONOMIC RESILIENCE

6.2.1 Literacy

6.2.1a

Adult literacy rate, population 15+ years, both sexes (%)

Input number

Current Year Score: 76.64

2014

United Nations Development Programme (UNDP); United Nations Educational, Scientific and Cultural Organization (UNESCO);
The Economist Intelligence Unit

6.2.2 Gender equality

6.2.2a

United Nations Development Programme (UNDP) Gender Inequality Index score

Input number

Current Year Score: 0.45

2018

United Nations Development Programme (UNDP); The Economist Intelligence Unit

6.2.3 Social inclusion

6.2.3a

Poverty headcount ratio at \$1.90 a day (2011 PPP) (% of population)

Input number

Current Year Score: 9.6

2017

World Bank; Economist Impact

6.2.3b

Share of employment in the informal sector

Greater than 50% = 2, Between 25-50% = 1, Less than 25% = 0

Current Year Score: 1

The share of employment in the informal sector is 49.1% for Lesotho. The data is made available in 2012 by the International Labour Organization (ILO) and pertains to the year 2008. [1] This is the last publicly available data.

[1] International Labour Organization (ILO). June 2012. "Statistical update on employment in the informal economy".

[http://laborsta.ilo.org/applv8/data/INFORMAL_ECONOMY/2012-06-Statistical%20update%20-%20v2.pdf]. Accessed 13 November 2020.

6.2.3c

Coverage of social insurance programs (% of population)

Scored in quartiles (0-3, where 3=best)

Current Year Score: 0

2016, or latest available

World Bank; Economist Impact calculations

6.2.4 Public confidence in government

6.2.4a

Level of confidence in public institutions

Input number

Current Year Score: 1

2021

Economist Intelligence Democracy Index

6.2.5 Local media and reporting

6.2.5a

Is media coverage robust? Is there open and free discussion of public issues, with a reasonable diversity of opinions?

Input number

Current Year Score: 1

2021

Economist Intelligence Democracy Index

6.2.6 Inequality

6.2.6a

Gini coefficient

Scored 0-1, where 0=best

Current Year Score: 0.45

Latest available.

World Bank; Economist Impact calculations

6.3 INFRASTRUCTURE ADEQUACY

6.3.1 Adequacy of road network

6.3.1a

What is the risk that the road network will prove inadequate to meet needs?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 2

2021

Economist Intelligence

6.3.2 Adequacy of airports

6.3.2a

What is the risk that air transport will prove inadequate to meet needs?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 2

2021

Economist Intelligence

6.3.3 Adequacy of power network

6.3.3a

What is the risk that power shortages could be disruptive?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 1

2021

Economist Intelligence

6.4 ENVIRONMENTAL RISKS

6.4.1 Urbanization

6.4.1a

Urban population (% of total population)

Input number

Current Year Score: 28.59

2019

World Bank

6.4.2 Land use

6.4.2a

Percentage point change in forest area between 2006–2016

Input number

Current Year Score: 0

2008-2018

World Bank; Economist Impact

6.4.3 Natural disaster risk

6.4.3a

What is the risk that the economy will suffer a major disruption owing to a natural disaster?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 1

2021

Economist Intelligence

6.5 PUBLIC HEALTH VULNERABILITIES

6.5.1 Access to quality healthcare

6.5.1a

Total life expectancy (years)

Input number

Current Year Score: 53.7

2018

United Nations; World Bank, UNICEF; Institute for Health Metrics and Evaluation (IHME); Central Intelligence Agency (CIA)
World Factbook

6.5.1b

Age-standardized NCD mortality rate (per 100 000 population)

Input number

Current Year Score: 1137.2

2019

WHO

6.5.1c

Population ages 65 and above (% of total population)

Input number

Current Year Score: 4.93

2019

World Bank

6.5.1d

Prevalence of current tobacco use (% of adults)

Input number

Current Year Score: 29.7

2018

World Bank

6.5.1e

Prevalence of obesity among adults

Input number

Current Year Score: 16.6

2016

WHO

6.5.2 Access to potable water and sanitation

6.5.2a

Percentage of homes with access to at least basic water infrastructure

Input number

Current Year Score: 68.65

2017

UNICEF; Economist Impact

6.5.2b

Percentage of homes with access to at least basic sanitation facilities

Input number

Current Year Score: 42.75

2017

UNICEF; Economist Impact

6.5.3 Public healthcare spending levels per capita

6.5.3a

Domestic general government health expenditure per capita, PPP (current international \$)

Input number

Current Year Score: 179.41

2018

WHO Global Health Expenditure database

6.5.4 Trust in medical and health advice

6.5.4a

Trust medical and health advice from the government

Share of population that trust medical and health advice from the government , More than 80% = 2, Between 60-80%, or no data available = 1, Less than 60% = 0

Current Year Score: 1

2018

Wellcome Trust Global Monitor 2018

6.5.4b

Trust medical and health advice from medical workers

Share of population that trust medical and health advice from health professionals , More than 80% = 2, Between 60-80%, or no data available = 1, Less than 60% = 0

Current Year Score: 1

2018

Wellcome Trust Global Monitor 2018