

A Theoretical Framework for Integrating Non-Communicable Disease Screening into HIV Care Platforms in Lesotho: A Synergistic Approach for Health Systems Strengthening

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Abstract

Background: Lesotho faces a concurrent high burden of HIV and a rising prevalence of non-communicable diseases (NCDs), straining a resource-limited health system. Vertical HIV programmes and nascent NCD services operate in parallel, resulting in fragmented care and missed opportunities for holistic management.

Purpose and objectives: This article develops a theoretical framework for integrating community health worker-led NCD screening into established HIV care platforms in Lesotho. It aims to delineate a synergistic model that leverages existing HIV infrastructure to strengthen systemic resilience and improve comprehensive primary care.

Methodology: The framework was constructed through a synthesis of integration theories, including the Chronic Care Model, and contextualised by a review of Lesotho's health policy documents, operational reports, and programme evaluations from 2021–2024.

Findings/Key insights: The framework proposes three interdependent pillars: task-shifting NCD screening to community health workers; adapting health information systems for combined data capture; and restructuring supply chains for essential NCD commodities. A critical insight is that success depends on a co-designed training curriculum. Preliminary pilot data from 2023–2024 indicates such integration could increase hypertension screening coverage among people living with HIV by an estimated 40%.

Conclusion: Integrating NCD screening into HIV care platforms is a feasible, strategic approach for building a more resilient and person-centred health system in Lesotho. The theoretical framework offers a structured pathway for policy and programme design.

Recommendations: Implementation should commence with phased pilots in high-HIV-burden districts by 2026. National policy must be revised to formally include NCD screening in community health worker portfolios and to secure sustainable financing for integrated commodity chains and supervision.

Key words: Health systems integration; non-communicable diseases; HIV; task-shifting; community health workers; Lesotho; primary health care.

Contribution statement: This article provides a novel, context-specific theoretical framework for integrating NCD and HIV services in Lesotho, directly informing national policy and implementation strategy.

Keywords: *Health systems strengthening, Integrated care, Non-communicable diseases, Sub-Saharan Africa, Task-shifting, Theoretical framework, HIV care continuum*