VISION
To ensure universal access to care, treatment, and support services for all HIV-infected and -affected children and their families throughout Lesotho; support prevention of new infections; and equip healthcare providers with knowledge and skills to manage common paediatric illnesses.

MISSION
To provide high-quality, high-impact, highly ethical paediatric and family-centred health care, health professional training, and clinical research, focused on HIV/AIDS, tuberculosis, malaria, malnutrition, and other conditions impacting the health and well-being of children and families worldwide.

The photography in this report was generously provided by Smiley Pool.
Dear Supporters,

It is an honour for me to present the Baylor College of Medicine Children’s Foundation - Lesotho (Baylor-Lesotho) annual report for the year 2016 / 2017. We have seen incredible growth in the number of staff members (25 to 200) and in the scope of the Foundation’s operations during the 12 years of its existence.

Thanks to the Baylor College of Medicine International Pediatric AIDS Initiative (BIPAI), Baylor College of Medicine, Texas Children’s Hospital, Bristol-Myers Squibb Foundation, and to the funding and guidance of the Lesotho Ministry of Health, we now consist of the Children’s Clinical Centre of Excellence in Maseru and five Satellite Clinical Centres of Excellence in five of the districts of Lesotho. We have also kindly been allocated clinic space at the Queen ‘Mamohato Memorial Hospital in Maseru, which we use for our clinic dedicated to adolescent care.

This year we have been fully engaged in supporting some of the initiatives the Ministry has adopted, such as ‘Test and Treat’, which has accelerated the country’s progress toward achieving the UN’s 90-90-90 targets.

Other activities have included:
• Treatment of patients with third line antiretroviral medications donated by Janssen Pharmaceuticals through the New Horizons Initiative.
• Strengthening of programmes for adolescents and young adults focusing on HIV prevention, adherence counselling, psychosocial support, and transition to adult HIV care.
• Tuberculosis prevention, diagnosis, and treatment.

I would like to express gratitude to the BIPAI management and our Board of Directors for their oversight, to the Ministry of Health for their support, to our funders and generous donors (individual and organisational), and to our partners in all our numerous projects.

We, the staff of the Foundation, are enriched and privileged to serve our patients and to make a difference in their lives.

Sincerely,

Edith Mohapi, M.B.B.S., F.A.A.P.
Executive Director

Right: Patients receive care at the Baylor-Lesotho COE.
Lesotho, one of the smallest countries in the southern African region, ranks second in the world in HIV prevalence and first in TB prevalence.

Out of more than 2 million Basotho, 319,000 live with HIV. Of these, 13,000 are children and 306,000 are adults. Although the epidemic has not worsened, the incidence has not significantly declined over the years.

To combat this disease, the government of Lesotho has partnered with numerous health organisations and sponsors. The partnership between Baylor College of Medicine International Pediatric AIDS Initiative and the Lesotho government took effect in 2005. The first-of-its-kind centre of excellence (COE) was started in Maseru, and over the years satellite centres of excellence (SCOEs) have been extended to five of the 10 districts of Lesotho.

The primary role of Baylor-Lesotho is to provide comprehensive medical, social, psychosocial, and supportive services for HIV-infected children, adolescents and their families nationwide. We also work to train health professionals throughout the country in paediatric HIV care and management.
“This year we have been fully engaged in supporting some of the initiatives the Ministry has adopted, such as ‘Test and Treat’, which has accelerated the country’s progress toward achieving the UN’s 90-90-90 targets.” - Dr. Edith Mohapi

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| Left: Baylor-Lesotho is now in its 12th year of operations serving the children of Lesotho.
Improving HIV and TB care

With funding from USAID, we began a two-year programme in April 2017 focused on improving the quality of HIV and TB care for children and adolescents in public health facilities in three districts. Known by the acronym of its objectives—mentoring, expanding, linking, differentiating, and decentralising—MELD is laying a foundation within the Lesotho health system for sustainable HIV/TB care.

Palliative Care for Children

Working with many young patients with life-threatening illnesses, we saw a great need for comprehensive, national palliative care in Lesotho. BCMCF-L personnel collaborated with local and international experts to advocate for and develop the Children’s Palliative Care Programme, launched by the Ministry of Health in October 2017. The programme aims to improve the quality of life not only for patients but also their families.

Focus on Excellence

Every organisation has room for improvement, and BCMCF-L has taken a methodical and proactive approach to identifying and addressing deficiencies. The quality improvement projects (QIP) implemented this year have already led to more efficiency and better care for patients. The ultimate aim of QIP is to ensure excellent clinical services are provided consistently and that visiting health professionals can learn by our examples.

Supporting Immunisation

During evaluations of suspected measles cases in 2016, the Ministry of Health identified rubella as a frequent cause of febrile rash illness in children (7.6 cases/100,000 population) and introduced the measles rubella (MR) vaccine in February 2017 to address this health need. As the WHO's Expanded Programme on Immunization introduced the new vaccine, BCMCF-L participated in the campaign at national and local levels. Nurses vaccinated children at the COE and SCOEs, in communities, and at schools, providing health education and other preventive services.
A Voice for Youth

We’re on national radio. Since February 2017, WISE YOUTH, a group of our young adult clients have hosted a weekly radio show called Positive Living, in which they empower their peers across the country on challenging life issues. Read the feature story in this report to learn more about their initiative.

Expanding Our Team

As HIV care providers roll out new strategies to reach the 90-90-90 UNAIDS targets, BCMCF-L has trained additional lay counsellors, with funding from PEPFAR, to staff local health facilities across the country. These non-medical staff will help implement the new ‘Test and Treat’ national campaign, part of a new approach to HIV care that initiates HIV-positive individuals on ART as quickly as possible, regardless of how advanced the virus is. Timely treatment prevents HIV transmission to uninfected people and reduces disease and death related to HIV among those infected. Lay counsellors perform an important role in freeing up nurses and providing HIV testing and social services.

First in Prevention

BCMCF-L is one of the first health facilities in the country to offer antiretroviral medications to prevent HIV infection for individuals at high risk of acquiring the disease. One such high-risk group is discordant couples, in which one partner is infected with HIV and the other is not. In addition to treating the infected partner, the un-infected partner can use PrEP (pre-exposure HIV prophylaxis) for additional protection. Our specialists are among a panel of experts advising the Ministry of Health on how to implement PrEP nationwide.
**Always Working To Provide Better Care**

BCMCF-L is known throughout the country for the excellent services it provides. Although we excel in what we do, there is always room for improvement. This thought led us to establish quality improvement projects (QIP), in which our healthcare workers identify shortcomings in our daily activities and present their findings to the rest of the staff. Then we collectively make recommendations on how the services can be improved. For instance, the antibiotic isoniazid is recommended to all HIV-infected patients after a case of tuberculosis, but we identified delays in the prescription of isoniazid for qualifying patients. A QIP was designed to address this gap in quality care. Subsequent evaluations showed the correction was effective—patients are now receiving their isoniazid in a timely manner.

**A Better Way to Dispense HIV Medication**

Before this reporting year, all of our patients were required to visit the COE every month to pick up their ARV medicine. This was meant to improve adherence and eliminate some of the difficulty of storing medication at home, along with giving patients a chance to meet with our staff more frequently. This was how most treatment programmes in Africa worked. But as these programmes expanded, it has become clear that a single approach is not appropriate for everyone. The Ministry of Health has instructed facilities to differentiate their care approaches according to the needs of each patient. One strategy BCMCF-L has introduced at the Maseru COE is the transition from monthly refills to multi-month dispensing, in which clients take home a three-month supply of medicine. This move was well received by our patients and caregivers as it meant less absenteeism from work and school. Patients without adherence issues or complications may only need consultation by a nurse or doctor every three months. For our staff, multi-month dispensing has reduced their workload, enabling them to focus additional time and attention to those who need our expertise the most.
Introducing Reproductive Health Services

BCMCF-L is unique among health facilities in Lesotho for providing comprehensive, multidisciplinary healthcare services in a single visit to the clinic. To maintain this excellence of service, we upgraded our package of clinical care provision to include reproductive health. We offer family planning services to our patients and to the general population. Although we do not offer voluntary male medical circumcisions, we do encourage and refer our patients to facilities where the procedure is provided and we follow up with them as part of the preventive strategy against HIV transmission. Cervical cancer is one of the biggest health issues in Lesotho, especially among women living with HIV. As a result, BCMCF-L has trained nurses in preparation for offering cervical cancer screening to all eligible patients.

Taking on Tuberculosis

Lesotho has the highest prevalence of TB in the world. Children remain the most challenging population when it comes to diagnosis of TB as their clinical presentation differs from that of adults and they are unable to spontaneously produce sputum (phlegm samples used in lab analysis). To help combat this infection, BCMCF-L is mentoring staff at government health facilities to improve diagnosis using sputum induction beyond just our clinics. Sputum induction is a procedure that uses a type of saline solution to enable children and those unable to expectorate to produce sputum. The goal is to equip nearly every health facility in Lesotho to perform sputum induction in children, part of our continuing support for the National Tuberculosis Programme.
On the Hunt for HIV

We are midway through a five-year CDC-funded project called Strengthening Tuberculosis and AIDS Response through District-based Programming in Lesotho (STAR-L), implemented under the Elizabeth Glaser Pediatric AIDS Foundation (EG-PAF). The driving goal of the project is to identify as many HIV-positive children and adolescents as possible in two districts, Berea and Leribe, and start them on treatment. BCMCF-L is supporting the project by mentoring and training health professionals at clinics throughout the two districts. Clinical teams consisting of a doctor and a nurse provide direct patient care to children and adolescents living with HIV and build capacity of nurses through one-on-one mentorship at public health facilities. Since we began in 2015, we have already tested more than 150,000 clients, exceeding the testing targets set by the President’s Emergency Plan for AIDS Relief (PEPFAR).

We’re using a variety of strategies to identify patients. Some of these are:

1. Provider-initiated testing and counselling (PITC). Rather than only testing patients who volunteer themselves for HIV testing, our lay counsellors encourage all patients to do so. PITC helps to overcome the stigma and other barriers that prevent people from getting tested.

2. Family tree testing campaigns at health facilities. With this campaign, clinics urged their registered patients who are HIV-positive to bring family members in for testing. We held the campaigns on weekends and reimbursed participants for their transport, resulting in the testing of over 9,000 new patients.

3. Targeted community HIV-testing services (HTS). We reached out directly to residents in the vicinity of each clinic, traveling to their homes to offer HIV tests.
4. Testing in preschools and traditional/cultural schools. We partnered with preschools and cultural schools to offer HIV tests for students.

5. Follow-up with infants born to HIV-infected mothers. Lay counsellors systematically checked patient records for HIV-exposed infants and contacted their caregivers to encourage them to return for testing and to remain in care until 18 months of age. Of the 1,077 patients we reached, 703 came back for testing. Twelve infants tested positive for HIV and were linked to treatment.

Our efforts so far have led to a stark increase in the number of Berea and Leribe residents tested for HIV. Most health facilities showed HTS coverage rates over 90%, marking strong progress toward reaching UNAIDS’ 90-90-90 objective: to have 90% of people with HIV know their status, 90% of those diagnosed started on therapy, and 90% of those on treatment to have viral suppression.

Lay counsellors have been integral to the success of the STAR-L project. Over 200 non-medical staff trained to provide HTS and screen for TB have been stationed at public health facilities throughout Leribe and Berea. In April 2017, we began an initiative using lay counsellors to provide TB screening using simple questions and to obtain sputum samples for presumptive cases (i.e. those who responded ‘yes’ to a screening question). The data show how successful the programme has been: Previously, the most effective health facilities obtained a sputum sample for only 70% of presumptive cases; with the help of lay counsellors, we sent sputum samples for over 95% of presumptive cases.
Toward Universal HIV/AIDS Care in Lesotho

Providing Universal Services for HIV/AIDS (PUSH) is a five-year USAID-funded project, implemented under EGPAF, that began in 2016. The project’s mission is similar to BIPAI’s and supports high-quality, family-centred, comprehensive HIV care and treatment and PITC across three districts of Lesotho: Maseru, Mafeteng, and Mohale’s Hoek. It also aims to strengthen national and district capacity to deliver HIV programmes by training healthcare workers on HIV and TB and participating in policy, protocol, and guidelines review.

The role of BCMCF-L is to support child and adolescent HIV/TB initiatives. In the past year, our lay counsellors tested over 160,000 clients, and 485 children received sputum induction for diagnosis of pulmonary TB at supported health facilities. Training is a key aspect of our participation in the project. Thirty-one healthcare workers (nurses, nurse assistants, and professional counsellors) participated in the offsite clinical attachment training programme at the Maseru COE and the Mohale’s Hoek Satellite COE. Staff from 76 health facilities received didactic training, mentorship, or supervision from doctors, nurses, social workers, and psychologists.

Members of Teen Club at the COE and Mohale’s Hoek SCOE gathered monthly, and periodic ‘Caregivers Days’ invited parents and other caregivers to participate in disclosure workshops to improve the conversation regarding knowledge and disclosure of HIV status within families. The project also funded Wise Youth Clubs for young adults at the COE, Mohale’s Hoek SCOE, and Mafeteng Government Hospital.

A new youth-led organisation, Positive Living, formed by the members of Wise Ones Youth Group at the COE, began hosting its own radio show devoted to HIV issues. The radio slots were funded by PUSH, and the broadcasts covered themes such as “Prevention,” “Healthy Living,” “HIV 101,” “Real Talk About Real Challenges,” “Love and Dating,” and “Education.”

MELD, a Comprehensive HIV Project

MELD stands for mentorship of healthcare workers, expansion of clinical care services, linking mothers and infants together in HIV care, and decentralising and differentiating care to best meet patients’ unique needs. This two-year, USAID-funded project is part of a global effort under the Technical Sup-
port to PEPFAR Programmes, which aim to create sustainable HIV services that will continue even after PEPFAR funding has ended. Our project, implemented alongside Baylor College of Medicine Children’s Foundation – Malawi, runs from April 2017 to April 2019.

MELD’s paediatric/adolescent mentorship component is similar to that of the PUSH project, and it covers the same three districts of Maseru, Mafeteng, and Mohale’s Hoek. To avoid duplication of effort, PUSH and MELD paediatric/adolescent mentors support designated health facilities.

The MELD project also supports improvements in PMTCT, and Exposed Infant Diagnosis (EID) nurses have begun to follow up with exposed infants who missed testing. EID nurses engage with village health workers, community support groups, and local leaders to reach families and children who need HIV testing. To date, 97 exposed children have been identified, and we are in the process of trying to locate and test those willing and able to return to the clinic.

**HIV Care Goes Mobile**

Mobilising HIV Identification and Treatment (MHIT) is a three-year project funded by a consortium led by Vodafone Foundation. Launched in 2015, the project provides community-based HIV prevention and treatment services targeting children and pregnant women in rural communities that may not otherwise have access to care.

BCMCF-L operates mobile outreach clinics in Maseru and Leribe districts with funding support from Elton John AIDS Foundation. Health services are provided to participants in their local communities through collaboration with Ministry of Health and other partners.
Continuing Medical Education Sessions

At BCMCF-L we provide weekly continuing medical education (CME) to our staff members and other health providers. In each Friday morning session, a staff member presents a topic, update, or case study. Usually these are related to HIV/TB, but we do not exclude other issues related to childhood illness. At times, an expert from outside BCMCF-L is invited to present on specific topics as need arises.

Resistance Testing Workshop

In January 2017, the South African NGO Right to Care and the Southern African HIV Clinicians Society hosted a “Resistance Made Easy” workshop. It was directed at senior professional nurses, pharmacists, and doctors who regularly deal with patients on ART and whose clients are not improving despite receiving medication, known as treatment failure. BCMCF-L participated in the workshop and later prepared a CME session to further disseminate the important lessons learnt during the workshop to the rest of the staff and others who attend CME. Learning included the identification and management of treatment failure, including use of new medications.

Attachments

BCMCF-L is the largest facility in Lesotho offering comprehensive paediatric HIV/TB care. Because of this, health training institutions in the country request us to assist in the education of their students, especially during their clinical skills attachments (rotations). This year, we attached nursing, social work, and pharmacy technician students. We further continue to offer one-week clinical attachments involving didactic education and skills development at the COE and SCOEs for professional nurses and nurse assistants working in ART clinics.
Emergency Response Refresher Course

In December 2016, a team of doctors from BCMCF-L organised and participated in the World Health Organization's Emergency Triage Assessment and Treatment (ETAT) refresher course for professional nurses from COE, SCOEs, and government health facilities. It was a one-day workshop aimed at reminding attendees how to handle childhood emergency situations, such as choking, severe dehydration, and shock. The format included lectures and discussions as well as practical skills stations. The ETAT refresher course was led by Dr. Kimberly Farr, a Global Health Paediatric Resident from Texas Children’s Hospital.

Helping Babies Breathe Refresher Course

BCMCF-L continues to collaborate with Queen ‘Mamohato Memorial Hospital on various child health initiatives. Dr. Lauren Williams, a Global Health Paediatric Resident from Texas Children’s Hospital, led several ‘Helping Babies Breathe’ courses for hospital nurses based in maternity and neonatal units. BCMCF-L nurses were trained as facilitators when the neonatal resuscitation programme was introduced with support from Texas Children’s Hospital in 2012, and we now offer the course to other institutions as requested.

National Care and Treatment Guidelines

BCMCF-L is actively involved in trainings and workshops organised by the Ministry of Health mainly addressing TB and HIV issues. Clinical personnel have supported HIV testing and counselling, HIV management, and tuberculosis diagnosis and management sessions as requested.
In 2005, BIPAI and the government of Lesotho partnered to form the Baylor College of Medicine Children’s Foundation in Lesotho. We provide comprehensive outpatient care, treatment, and support services free of charge for HIV-infected infants, children, adolescents, and their families.

Two programmes that make us unique are our Teen Clubs and Wise Ones Youth Groups that support HIV-infected adolescents and young adults. Through peer-education, mentorship, counselling, and the development of life skills and leadership abilities, we aim to empower Lesotho’s HIV-infected youth. The Wise Ones Youth Group is for Teen Club graduates, ages 18 to 24, who remain in clinical care at BCMCF-L. They meet once a month to participate in educational and recreational activities. Topics have included healthy relationships, career planning, teen pregnancy, and nutrition.

In December 2016, young adult clients staffed a booth at the shopping mall in recognition of World AIDS Day. Presenters for a local radio station met them and invited

**Wise Ones Youth Group, Positive Living Radio Show & Positive Living Youth Outreach**

Positive Living Radio, a weekly show featuring true life stories of HIV-positive Basotho youth.
them to present on Mxxl 91.0 Space Age Radio, a youth-based radio station in Maseru. In February 2017, these Wise Youth members, with the support of BCMCF-L staff, launched Positive Living, a weekly radio show featuring the true life stories of HIV-positive Basotho youth. Presenters share their experiences of growing up with HIV infection and struggles during school years. Others talked about having relationships with partners who do not have HIV. One of the most powerful presentations involved a young woman educating others on the effectiveness of HIV prevention by sharing that her 2-year-old daughter is HIV negative.

The goals of the project are to empower HIV-positive youth, combat stigma and discrimination, and reduce new infections of HIV in Lesotho. By giving HIV-positive youth a platform to share their stories, the wider public can learn about their lives and gain a deeper understanding of HIV.

Every month, the Wise Youth who are members of the Positive Living Coordinating Committee meet with BCMCF-L staff to plan the theme of the upcoming month and the topic for each episode within that theme. Members of Wise Youth take turns hosting a new episode of Positive Living every week on Mxxl Radio, currently airing on Wednesdays at 4:30pm. They are accompanied by BCMCF-L staff members, who answer the more technical medical questions during the show when needed. On the last week of each month, BCMCF-L staff members host an episode without the Wise Youth on insights from their training and professional experience. This allows Positive Living to better achieve its goal of disseminating accurate, thorough information to Basotho youth.

Inspired by the success of Positive Living, the Committee members have now founded and registered their own non-governmental organisation, Positive Living Youth Outreach (PLYO). The mission of PLYO is provide health education and share life stories on HIV/AIDS, sexual and reproductive health, and other issues by speaking at community centres, schools, health clinics, and on media outlets. They’re trying to spread awareness, decrease stigma, and raise the confidence of HIV-positive youth. Several members have been approached by Ministry of Health personnel, non-governmental organisations, tertiary educational institutions, and community groups to promote prevention of HIV infection among young people.
**Board of Trustees**

**Mr. Michael B. Mizwa**  
Chairman of the Board  
Chief Operating Officer, BIPAI

**Dr. Diane Nguyen**  
Secretary  
Vice President, BIPAI

**Mrs. Majoel Makhakhe**  
Member

**Mrs. Sebongile Nkholise**  
Member

**Programmes and Services**

**Maternal Health**
- Prevention of mother-to-child transmission of HIV
- Family planning

**HIV Services**
- HIV testing and counselling
- ART provision
- Viral load monitoring
- Management of treatment failure including second-line and third-line treatment
- PrEP (preventative treatment)

**Integrated Child Health Care**
- Growth and development monitoring
- Immunisation

**Adolescent Care**
- QMMH Adolescent Clinic
- Teen Club
- Wise Ones Youth Group
- Teen Pregnancy Clinic
- Sexual and reproductive health services

**Tuberculosis**
- Symptom screening
- Sputum induction
- Treatment
- Isoniazid Preventive Therapy
Generosity, collaboration and support from the following organizations allow BCMCFL to carry out its mission and assist in improving the lives of our patients, for which we are grateful. The following list of our partners and donors is by no means complete.

- AIDS Orphan Care
- Brentwood Baptist Church, Houston, USA
- Bristol-Myers Squibb employees
- Catholic Relief Services
- Champions for Life
- Clinton Health Access Initiative, Lesotho
- Elizabeth Glazer Pediatric AIDS Foundation
- Elton John AIDS Foundation
- ICAP at Columbia University
- International Resource Institute
- Janssen Pharmaceuticals
- Mothers to Mothers, Lesotho
- Musco Family Trust, USA
- Paediatric AIDS Treatment for Africa
- Population Services International, Lesotho
- Princeton in Africa
- Riders for Health, Lesotho
- Queen 'Mamohato Memorial Hospital
- Vodafone Foundation

Dr. Edith Mohapi says goodbye after 12 years as Executive Director of Baylor-Lesotho.
Back cover: Adolescents receive psycho-social support to address their unique challenges.