

CDC in Sierra Leone

Factsheet



Staffing
No U.S. Assignees or
Locally Employed Staff

Impact in Sierra Leone

- Laboratory capacity expanded by converting the National HIV Reference Laboratory into a national infectious diseases public health laboratory, which offers a much broader range of services including serology, molecular diagnostics, and microbiology
- Support of the global polio eradication initiative contributed to zero polio cases identified in since 2010

Sierra Leone at a Glance

Population:	6,242,140
Per capita income:	\$1,360
Life expectancy at birth women/men:	45/45 yrs
Under 5 mortality	128/1000 live births

Population Reference Bureau, 2013

The Centers for Disease Control and Prevention (CDC) began working in Sierra Leone in 2008 through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). CDC supports laboratory and surveillance capacity building activities for HIV and other infectious diseases. CDC also supports training to build basic disease detection and response capacity in the workforce. With no permanent in-country presence, CDC coordinates activities from its Atlanta headquarters through site visits and with the assistance of implementing partners in-country, the Association of Public Health Laboratories and the Africa Field Epidemiology Network.

Top 10 Causes of Deaths in Sierra Leone

1. Malaria	17%	6. HIV	4%
2. Lower respiratory infections	9%	7. Cancer	4%
3. Protein-Energy Malnutrition	9%	8. Stroke	4%
4. Pre-Term Birth Complications	5%	9. Tuberculosis	4%
5. Diarrheal disease	5%	10. Ischemic Heart Disease	2%

Source: GBD Compare (<http://viz.healthmetricsandevaluation.org/gbd-compare/>), 2010

HIV/AIDS

National Public Health Laboratory

CDC and PEPFAR partners assisted in establishing the Central Public Health Reference Laboratory (CPHRL) in 2011. The CPHRL offers serology, molecular, and microbiology public health services. Through Atlanta-based technical assistance, CDC assists the National AIDS Commission to institute and promote lab safety, quality control, and quality assurance in HIV/AIDS laboratory methods; supports the development of a laboratory information network protocol for HIV and related opportunistic infections; installs laboratory HIV diagnostic equipment; trains staff on current HIV diagnostic methods; and provides guidance to institute a phased national HIV proficiency testing program with support from WHO.

Monitoring and Evaluation

CDC conducted a pre-pilot evaluation to assess infrastructure, systems, and potentials for integration into the existing maternal and child health program and will develop guidelines to conduct an expanded pilot. CDC provided a national review, assessments, and technical assistance to the NAS and partners to address gaps in pediatric HIV services. CDC also established an in-country prevention of mother-to-child pediatric technical work group to harmonize activities in early infant diagnosis services.

Surveillance

CDC provided support and technical expertise in the expansion of the antenatal surveillance survey from 13 to 20 sentinel sites.



Partnerships

CDC's development of strong partnerships with NAS, MoHS, WHO, UNICEF, the Department of Defense, and the United States Agency for International Development has led to the establishment of an MoHS-led laboratory and surveillance technical workgroup, the development of a national laboratory strategic plan, and an MoHS-approved national laboratory policy.

Immunization

The focus of CDC-supported polio eradication activities is to increase the immunity of the population through immunization campaigns, to strengthen surveillance, to prevent re-importation of wild poliovirus, and to minimize the consequences of further international spread of virus into West Africa. CDC deployed 27 public health professionals to work in Sierra Leone on immunization activities through the Stop the Transmission of Polio program since the program began in 1999. CDC also co-founded the Measles & Rubella Initiative partnership that is working to eliminate measles and rubella in Sierra Leone as well as in the other parts of the world.

Influenza

In early 2009, the joint CDC/ Naval Medical Research Unit No.3 team conducted an assessment in Sierra Leone to determine the country's capacity and willingness to set up an influenza sentinel surveillance system. Since then an influenza reference laboratory has been established in Lakka, staff attended a regional influenza surveillance training organized by CDC, and a laboratory technician was trained on techniques to isolate influenza virus, as well as on the management of an influenza sentinel surveillance system. With support from the Sierra Leone Ministry of Health, as well as the World Health Organization, an influenza surveillance system was established and now has grown to 8 sites. With CDC-provided diagnostic materials and equipment, the Sierra Leone Influenza Reference Laboratory will take over testing all specimens that need to be tested for influenza.

Global Health Initiative

The Global Health Initiative (GHI) is an approach to instituting integrated, coordinated and results-driven global health investments. It supports all U.S. Government agencies to work as one. With the support of CDC and other partners, the PMTCT program in Sierra Leone is working toward integration within the maternal child health program, thereby significantly increasing access to care. It is also working with the Integrated Disease Surveillance and Response (IDSR) program to leverage surveillance systems as a vehicle for referral of specimens for diagnosis toward elimination of mother-to-child HIV transmission.

Publication Date: August 2014

For more information please contact Centers for Disease Control and Prevention:

CDC-Atlanta
1600 Clifton Road NE, Atlanta, GA 30333
Email: cgh@cdc.gov
Web: www.cdc.gov/globalhealth