

CDC in CENTRAL AMERICA



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The Centers for Disease Control and Prevention (CDC) has collaborated with public health institutions in Central America since the 1960s, initially focusing on parasitic diseases. In 2003, CDC established a Central America Regional (CAR) office in Guatemala which has supported work in Belize, Costa Rica, El Salvador, Honduras, Guatemala, Nicaragua, Panama, and has managed projects in Brazil, Colombia and the Dominican Republic. CDC recently announced the establishment of a new regional office covering Central America and the Caribbean in Panama. Guatemala will continue to support activities throughout the region. CDC works with the ministries of health (MOH), the Council of Ministers of Health of Central America (COMISCA), the Pan American Health Organization (PAHO), and other regional and international partners to address COVID-19, HIV, tuberculosis, vector-borne disease, and antimicrobial resistance. CDC also strengthens laboratory, surveillance, and workforce capacities to prevent, detect, and respond to infectious diseases across the region.



CDC's acute febrile illnesses (AFI) surveillance network in Central America and the Dominican Republic identifies emerging and re-emerging disease threats, strengthens regional collaborations, and increases regional capacity for disease surveillance



CDC collaborates with ministries of agriculture, health, environment, and defense across Central America to conduct One Health Zoonotic Disease Prioritization workshops to prioritize diseases for epidemiological surveillance, prevention, and control



Since 2017, CDC has participated in outbreak investigations for measles, rabies, fungal infections (mucormycosis), dengue, foodborne diseases, and COVID-19



In collaboration with the Government of El Salvador in 2022, CDC is piloting the region's first use of bacteria (Wolbachia) to control mosquito-borne disease transmission



As of 2021, more than 3,600 Frontline, 1,000 Intermediate, and 170 Advanced residents have graduated from Field Epidemiology Training Programs (FETPs) in Central America



To support Central American countries' COVID-19 response, CDC leveraged existing AFI surveillance platforms to test for SARS-CoV-2



CDC partnered with PAHO to strengthen the region's genomic sequencing capacity for SARS-CoV-2 (the virus that causes COVID-19). This partnership established sample analysis systems and supports national laboratories in Panama, Costa Rica, and Guatemala



CDC and partners implement serological surveys to understand COVID-19 trends in communities and healthcare, agriculture, hospitality, and market worker populations in Belize, Dominican Republic, El Salvador, and Guatemala



CDC supports COVID-19 vaccine rollout in Guatemala, Honduras, El Salvador, and Belize. CDC assists with vaccination program management and operations, vaccine promotion in local languages, vaccine outreach to pregnant women, and vaccination scale-up



CDC supports laboratory biosafety activities across the region, such as hosting regional biosafety and biosecurity workshops and certifying biosafety hoods in national laboratories in Guatemala, El Salvador, and Honduras



CDC supports 44 HIV clinics in Central America



Central America was the first PEPFAR-supported region to integrate data on recent infection into HIV surveillance systems. Data are used to identify potential infection clusters to enhance resource delivery and maximize investment and impact

Global Health Security

Helping countries respond to public health threats quickly and effectively within their borders is critical to preventing the spread of disease regionally and around the world. In 2006, CDC expanded the scope of the Central America Regional office to support disease outbreak response, surveillance, laboratory systems, and workforce development in coordination with local, regional, and global public health organizations. CDC has partnered with Brigham and Women's Hospital, Baylor College of Medicine, Washington State University, and Universidad del Valle de Guatemala since 2018 to strengthen epidemiological surveillance for acute febrile illnesses (AFI) and antimicrobial resistance (AMR). CDC also supports surveillance for AFI, AMR, and community and hospital-acquired infections in the Dominican Republic, Belize, Guatemala, and El Salvador.

- CDC and COMISCA support strengthened surveillance of healthcare-associated bloodstream infections (candidemia) in six hospitals in El Salvador
- CDC partners with the Executive Secretariat of COMISCA to strengthen the National Institute of Health in El Salvador
- In 2021, Colombia's National Public Health Institute (NPHI) became one of five NPHI Centers of Excellence that CDC supports globally. Colombia's NPHI serves as a technical resource and partner for public health activities across Central America

Field Epidemiology Training Program (FETP)

CDC's FETP strengthens the public health workforce capacity to investigate and respond to disease outbreaks. Three FETPs – Frontline, Intermediate, and Advanced – train epidemiologists to identify and contain outbreaks before they become epidemics. Trainees also develop skills to gather critical data and turn it into evidence-based action. COMISCA and MOHs lead FETP activities across the Central America region.

- Since 2012, over 100 FETP Central America residents have presented their work at scientific conferences

COVID-19

The first case of COVID-19 in Central America was confirmed in Costa Rica on March 6, 2020. Since the pandemic was declared, CDC has engaged in technical collaboration with Central American countries across response activities. Previous collaborations between CDC and MOHs to expand regional laboratory capacities and surveillance were critical to the region's COVID-19 response. FETP graduates are also instrumental to the region's COVID-19 response as they lead efforts to increase vaccination rates and provide epidemiological technical support to MOHs.

- To support the COVID-19 response in Honduras, CDC donated laboratory equipment and supplies, antigen tests, personal protective equipment, and computer and printers for triage centers
- CDC also helped strengthen rapid response teams' skills in community testing, vaccination promotion campaigns, home-based care, and epidemiologic studies of COVID-related fungal infections (mucormycosis)

HIV and Tuberculosis (TB)

Since 2003, CDC has collaborated with MOHs to respond to the HIV epidemic in Central America. CDC supports countries in Central America to achieve UNAIDS 95-95-95 goals by 2030. CDC works with partners to prioritize increased quality of services for people living with HIV and other populations living with higher risk of infection. CDC supports the scale-up of evidence-based programs that close gaps in HIV prevention, case finding, early antiretroviral treatment (ART) initiation, optimized treatment, and viral load suppression. CDC focuses on:

- Enhancing local capacity for laboratory quality assurance and supporting national efforts to improve the quality of rapid HIV testing
- Strengthening laboratory capacity and network for HIV testing and viral load monitoring
- Preventing new infections among populations living with increased risk of HIV infection, including men who have sex with men, transgender women, and sex workers
- Increasing access to HIV testing through close contact testing and provider-initiated testing and counseling
- Supporting clinics to improve HIV-related health outcomes by linking patients to care after diagnosis, reengaging people whose treatment was interrupted, initiating rapid and early treatment, viral load suppression, and managing other illnesses that occur more frequently among people living with HIV
- Increasing workforce capacity to care for people living with HIV by using the Extension for Community Healthcare Outcomes (ECHO) model to mentor and share knowledge

Migration and Border Health

Global migration and border health impact the health of migrants and cross-border movement of pathogens. CDC engages with national governments, U.S. Embassies, COMISCA, and other partners to improve HIV services for Venezuelan migrants, enhance border health processes, and understand health-related reasons for migration. CDC activities include:

- Implementation of an online survey and virtual regional workshop to identify regional challenges related to International Health Regulations (IHR) focal points
- Assessment visits at points of entry on Guatemala's land borders to identify strengths and challenges
- Development of a border health component for FETP-Frontline
- Partnership with the Latin American Faculty of Social Sciences (FLACSO) and COMISCA to develop traveler mobility and COVID-19 knowledge, attitudes, and practices (KAP) surveys for border crossings
- Engagement in technical collaboration to enhance HIV prevention, care, and treatment services for Venezuelan migrants in Colombia and Peru
- Support of COVID-19 testing and vaccination for migrants returning to Central America from the U.S. and Mexico
- Review of medical records for migrants returning from the U.S. and Mexico to assure compliance with local COVID-19 guidelines

For more country information
<https://www.cdc.gov/globalhealth/countries/central-america/index.html>

