

CDC *in* CÔTE D'IVOIRE



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The Centers for Disease Control and Prevention (CDC) established a research station in Côte d'Ivoire in 1987 for the Retrovirus Côte d'Ivoire (CDC Retro-CI) project during the emerging HIV epidemic. The launch of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) in 2004 expanded CDC's support. CDC works with the Government of Côte d'Ivoire to address COVID-19, HIV, tuberculosis, malaria, Ebola, and influenza. CDC and partners strengthen laboratory, surveillance, and workforce capacities to respond to disease outbreaks in support of the Global Health Security Agenda.



With CDC support, community health workers (CHWs) investigated 420 community-based health alerts



As of March 2021, over 380 Field and Epidemiology Training Program (FETP)-Frontline graduates from human, animal, and environmental sectors work across all 113 health districts



CDC helped establish Côte d'Ivoire's first national Emergency Operations Center (EOC), three EOCs in Ebola-sensitive regions, and three EOCs in regions with the highest rates of COVID-19



CDC trained 23 trainers in COVID-19 rapid antigen testing, who subsequently trained 60 response staff in four regions



CDC supported COVID-19 contact-tracing training for over 320 health facility and health district workers and 450 CHWs in Abidjan, Sud-Comoé, and Gbêkè



In 2021, CDC's Retro-CI laboratory was the first site in West Africa and one of 14 worldwide that WHO designated as a pre-qualification site for HIV molecular diagnostics evaluation



CDC experts supported the Ministry of Health and Public Hygiene (MSHP) to increase availability of tuberculosis preventive therapy (TPT), resulting in a tenfold increase in the number of PLHIV receiving TPT between 2020 and 2021



In September 2018, Côte d'Ivoire was the first francophone country in Africa to complete CDC's Violence Against Children and Youth Survey (VACS)



Despite supply chain challenges related to COVID-19, 86% of PLHIV on treatment at CDC-supported sites received timely viral load testing. 91% of these PLHIV demonstrated viral suppression in 2021



Through PMI, CDC and the National Malaria Control Program (NMCP) provided more than 2.8 million long lasting insecticide-treated mosquito nets (LLINs) in 11 districts



In 2021, more than 60,000 structures were sprayed during the Indoor Residual Spray (IRS) campaign that helped protect more than 200,000 people from malaria



In early 2022, Côte d'Ivoire expects to establish a system to estimate the burden and severity of influenza, update protocols, and increase epidemiological surveillance in hospitals and health centers

Global Health Security

In today's globally connected world, diseases spread faster and more unpredictably than ever before. CDC's global health security efforts in Côte d'Ivoire help increase the country's ability to prevent, detect, and respond to infectious disease outbreaks before they become epidemics that could affect global populations. These efforts help Côte d'Ivoire reach the goals outlined in the Global Health Security Agenda (GHS). CDC provides expert support to the Ministry of Health and Public Hygiene (MSHP) and other partners across 11 technical areas of the GHS Action Packages. These Action Packages help Côte d'Ivoire strengthen core public health capacities, including disease surveillance, laboratory systems, workforce development, emergency management, cross-border collaboration, immunizations, and infection prevention and control. CDC also:

- Helps establish national and regional EOCs and provide equipment, technical support, and training
- Supports central and regional laboratory activities for respiratory viruses and antimicrobial resistance
- Supports FETP-Frontline, -Intermediate, and -Advanced courses
- Trains healthcare workers in HIV and COVID-19 surveillance, detection, and case management
- Trains CHWs in Event-Based Surveillance and engages CHWs in community-based disease surveillance
- Increases preparedness for Ebola Virus Disease response through simulation exercises (Simex)
- Assists the Côte d'Ivoire National Public Health Institute (INSP) research center
- Collaborated with the Bill & Melinda Gates Foundation to establish the poliomyelitis emergency center and train staff

COVID-19

The first confirmed case of COVID-19 in Côte d'Ivoire was reported on March 11, 2020. Since the pandemic was declared, CDC has supported data collection, case investigation, and contact tracing in Côte d'Ivoire. FETP graduates are engaged in these activities and are instrumental to the national COVID-19 response. Previous collaborations between CDC and the MSHP in decentralizing diagnosis of epidemic disease pathogens and strengthening community-based surveillance were critical to Côte d'Ivoire's COVID-19 response. Due to this effort, SARS-CoV-2 testing is conducted at six regional laboratories and one teaching hospital laboratory. CDC staff at the Retro Côte d'Ivoire (Retro-CI) laboratory provide direct SARS-CoV-2 testing support. CDC continues to support all eleven regional laboratories in routine microbiology testing. CDC also:

- Strengthens laboratory and non-laboratory practices by training people in biosafety and biosecurity
- Supports infection prevention and control (IPC) assessments and trainings and supplies materials
- Supports partners with COVID-19 vaccination scale-up through trainings, technical collaboration, and surveillance for adverse effects following immunization

HIV and Tuberculosis (TB)

Côte d'Ivoire is home to approximately 380,000 people living with HIV. CDC is a key implementer of PEPFAR and works with the MSHP and HIV service providers to build sustainable, high-impact national programs. Achieving and maintaining HIV viral suppression is crucial to preventing HIV-related deaths, preventing transmission, and ultimately ending HIV worldwide. To accelerate progress towards HIV epidemic control in Côte d'Ivoire, CDC and partners:

- Prioritize HIV testing efforts among:
 - Sub-populations with disproportionately poor health outcomes, including men, children, and HIV-exposed infants
 - Populations who experience higher risk of infection, including sex workers, men who have sex with men, transgender people, adolescent girls, and young women
 - Pregnant and breastfeeding women, as the nation strives towards elimination of mother-to-child transmission
- Support increased linkage, continuity of treatment, and quality of HIV services
- Strengthen program monitoring and disease surveillance
- Enhance data availability, quality, and use for decision-making
- Provide training, decentralize services, establish external quality control programs, and implement a national viral load dashboard to strengthen laboratory systems
- Collaborate with faith-based and community-based organizations to provide educational presentations and messaging to increase HIV literacy and decrease HIV-related stigma and discrimination
- Support clinics to identify, treat, and prevent TB among people living with HIV

Malaria

Malaria is the leading cause of mortality among children under five in Côte d'Ivoire and continues to be the top reason for child hospitalizations. Malaria is endemic throughout the entire year, with peaks during the rainy season. Through PMI, CDC supports malaria prevention and control activities, including providing LLINs and IRS, preventing malaria in pregnancy, and increasing the quality of diagnostics and case management.

Influenza

CDC works with Côte d'Ivoire to strengthen disease surveillance and laboratory capacities to prevent, detect, and respond to influenza. CDC collaborates with MSHP, the National Institute for Public Hygiene, and the Pasteur Institute of Côte d'Ivoire (PCI) to support the national influenza surveillance network. The IPCI was designated as a WHO National Influenza Center and monitors trends in activity, seasonality, and basic epidemiology of influenza. This surveillance network was also leveraged to detect COVID-19 cases. CDC works with partners to support an influenza surveillance network across 9 sentinel sites in Korhogo, Man, Yopougon, Maca, San-Pedro, Treichville, Bouake, Yamoussoukro, and Agnibilekro.

Surveillance of highly pathogenic avian influenza is critical to promoting human health and limiting outbreaks among wild and domestic bird populations. CDC supports a three-year wildlife health surveillance pilot program focused on H5N1 avian influenza virus in two nature reserves and five rest areas for migratory birds. The program will use a One Health approach to train 23 animal and human health officers and 60 community leaders in laboratory technical skills and enhanced wildlife monitoring.



CDC STAFF

9 U.S. Assignees
54 Locally Employed



AT A GLANCE

Population: > 26.3 million
Per capita income: \$2,280
Life expectancy: F 59/M 56 years
Infant mortality rate: 58/1,000 live births

Sources:
World Bank 2020, Côte d'Ivoire



TOP 10 CAUSES OF DEATH

1. Malaria
2. Neonatal disorders
3. Lower respiratory infections
4. HIV/AIDS
5. Ischemic heart disease
6. Stroke
7. Diarrheal diseases
8. Tuberculosis
9. Congenital birth defects
10. Cirrhosis and other chronic liver diseases

Source:
GBD Compare 2019, Côte d'Ivoire



For more country information
www.cdc.gov/globalhealth/countries/cote-d-ivoire