

CDC in Ghana



The Centers for Disease Control and Prevention (CDC) has collaborated with the Ghana Health Service (GHS), Ghana AIDS Commission (GAC), and other agencies since 2008 through the US President's Emergency Program for AIDS Relief (PEPFAR) to support HIV/AIDS prevention, care, and treatment. CDC also provides support to the U.S. President's Malaria Initiative (PMI) through a resident malaria advisor, to influenza surveillance through a regional avian and pandemic influenza advisor, and to the Ghana Field Epidemiology and Laboratory Training Program (FELTP) with technical assistance.

Staff

CDC office (physical presence)
1 U.S. Assignee
4 Locally Employed

At a Glance

Population: 27,672,800
Per capita income: \$3,960
Life expectancy at birth women/men: 63/60 yrs²
Infant mortality rate: 41/1000 live births

Source: Population Reference Bureau 2014; Ghana

Top 10 Causes of Death

1. Lower Respiratory Infections 11%
2. Stroke 9%
3. Malaria 8%
4. Ischemic Heart Disease 6%
5. HIV/AIDS 5%
6. Preterm Birth Complications 4%
7. Diarrheal Diseases 4%
8. Birth Asphyxia & Birth Trauma 4%
9. Meningitis 3%
10. Protein-Energy Malnutrition 3%

Source: WHO Country Health Profiles 2012; Ghana



HIV/AIDS

Through PEPFAR, the CDC Ghana office supports country efforts to build robust health systems and capacities for an effective national HIV response, which supports a data-driven, evidence-based approach tailored to the local epidemic. This in turn boosts health impact and helps to ensure the most efficient use of resources.

CDC is working closely with the Ministry of Health (MOH), GAC, and GHS to build program monitoring and evaluation capacity at the community level, develop and implement a national laboratory strategic plan, and deploy laboratory information management systems to achieve and maintain high quality laboratory networks and quality assurance systems.

An additional priority focus is to improve Ghana's HIV surveillance system and to broaden national health information systems to collect, store, and analyze high-quality data for informed decision-making for improved program performance and outcomes. Moreover, CDC is supporting research in several key areas including a population size estimate and HIV bio-behavioral survey among men who have sex with men, a formative assessment among people who inject drugs, and a key population implementation science study on improving KP linkages and retention in HIV treatment and care services.

Malaria

Under the PMI, a resident advisor is assigned to Ghana by CDC as part of an interagency team with USAID to support the MOH/GHS in implementing malaria prevention and control interventions. These include providing long-lasting insecticide mosquito nets and indoor



residual spraying, preventing malaria in pregnancy, improving diagnostics and case management, surveillance, and monitoring and evaluation of malaria-related activities. Specific examples of CDC technical support include providing guidance in developing new IRS standards, monitoring the impact of a new, longer-lasting insecticide, leading the development of a national insecticide resistance monitoring program and a national resistance and entomological database, collaborating with the Kintampo Center for Diagnostic Excellence in Ghana, supporting the establishment a WHO certified National Archive of Malaria Slides for training and quality assurance, and extensive engagement in the developing the National Malaria M & E Strategic Plan.

Neglected Tropical Diseases

CDC is working with the Ghana Health Service and the National Neglected Tropical Diseases Program to develop and implement a post-mass drug administration surveillance system for lymphatic filariasis, which will provide information on the best method for conducting post treatment surveillance for lymphatic filariasis in countries that have stopped mass drug administration to ensure that any new outbreak transmission is quickly detected.

Influenza

In collaboration with GHS, Noguchi Memorial Institute for Medical Research (NMIMR), and the US Naval Medical Research Unit 3 (NAMRU-3), CDC has been working since 2007 to enhance the surveillance and response capacity of Ghana and West Africa for early detection and response to a possible avian or other pandemic influenza outbreak. CDC Influenza Division (CDC-ID) assisted in building laboratory capacity for influenza detection and response and continues to provide training to health professionals in Ghana and the West Africa region. CDC-ID assigned a regional avian and pandemic influenza advisor to Ghana in 2008 and granted a five-year Research Cooperative Agreement to the NMIMR in 2012 to support a population-based study of seasonal influenza and other respiratory illnesses at a demographic and health surveillance site in Dodowa (now Shai-Osudoku and Ningo-PramPram Districts [SONPD]) to estimate the incidence of acute respiratory tract infections and influenza-associated disease burden.

Health Systems Strengthening

CDC headquarters staff supported developing the FELTP in 2003. Short courses were offered between 2003-2005 during which 66 health professionals were trained in disease surveillance and outbreak investigation. In October 2007 the FELTP program was adopted as a two-year Master of Philosophy degree program at the University of Ghana's School of Public Health. Since 2007, 8 cohorts have been admitted and 28 of 57 residents in first 7 cohorts have graduated. Their investigation and research abstracts have added great value to enhancing the disease surveillance and epidemiology capacity in Ghana. Additionally, Ghana Ministry of Health conducted a Basic FELTP course in late 2014 for 33 participants.

Impact in Ghana

- Sentinel surveillance sites for ILI were established and expanded in all ten regions of Ghana, including military sites
- Trained 125 Ghanaians in monitoring and evaluation
- Completion of the first ever national level survey of Men who have Sex with Men
- Trained seven cohorts of FELTP residents

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For more country information: <http://www.cdc.gov/globalhealth/countries/ghana>

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