The Centers for Disease Control and Prevention (CDC) established an office in Guinea in 2015 during the Ebola outbreak in West Africa to help strengthen capacities to prevent, detect, and respond to public health threats. In collaboration with the Ministry of Health (MOH) and other partners in Guinea, CDC continues to strengthen laboratory, surveillance, workforce, and emergency management capacities to respond to disease outbreaks in support of the Global Health Security Agenda. CDC also helps prevent and control malaria through the U.S. President’s Malaria Initiative.

CDC helped transition the national and 38 district Emergency Operations Centers (EOCs) over to the MOH.

In 2021, Guinean EOCs coordinated outbreak responses for COVID-19, Ebola, yellow fever, measles, Lassa fever, Marburg virus disease, and vaccine-derived polio.

CDC, the African Epidemiology Network (AFENET), and the MOH trained over 12,000 health workers to use the District Health Information Software 2 (DHIS2) for routine and epidemiological surveillance.

Since 2016, 213 Frontline graduates and 35 Intermediate graduates have completed Guinea’s Field Epidemiology Training Programs (FETPs) and 10 Guineans graduated from Burkina Faso’s FETP-Advanced.

In only 5 years, FETP helped Guinea achieve over half of the International Health Regulations requirements to have one epidemiologist per 200,000 people.

Over 98% of FETP graduates hold key surveillance positions at the national, regional, and district levels.

In 2019, Guinea graduated Africa’s first francophone FETP-intermediate cohort.

Since 2011, Guinea has implemented two universal coverage campaigns for long-lasting insecticide-treated bed nets (ITNs), increased access to artemisinin-based chemoprevention, and rolled-out rapid diagnostic tests.

The proportion of children under the age of 5 who sleep under a bed net increased from 5% to 27% since 2011.
Global Health Security

CDC helps Guinea prevent, detect, and respond to infectious disease outbreaks according to the goals outlined in the Global Health Security Agenda (GHSA). In close partnership with the MOH and other partners, CDC provides technical collaboration and support for emergency management, disease surveillance, laboratory systems, and workforce development. CDC helped establish Guinea’s first public health Emergency Operations Center (EOC) in 2015. The national EOC is an integral part of the MOH’s National Agency for Health Security (ANSS), which has now established an EOC in each of Guinea’s 38 districts. In addition to responding to disease outbreaks, district EOCs also support polio, tetanus, and measles vaccination campaigns.

Health Systems Strengthening

CDC began facilitating the District Health Information Software 2 (DHIS2) in 2015 to manage routine and epidemic-prone disease surveillance data and rapidly detect disease outbreaks in Guinea. In 2018, CDC and partners developed standardized data collection tools that include updated case notification forms and combined case data from clinical and laboratory sources. These tools are now integrated into the DHIS2 system. CDC and the African Epidemiology Network (AFENET) also supported the MOH to incorporate COVID-19 and Ebola modules into DHIS2 and train public health workers to use the system. In 2019, CDC transitioned community-based disease surveillance activities over to the MOH. CDC continues to support DHIS2 trainings for health facility staff and community health workers across all 38 Guinean districts.

COVID-19

The first case of COVID-19 in Guinea was confirmed on March 13, 2020. Early in the pandemic, CDC and the African Epidemiology Network (AFENET) directly supported Guinea’s COVID-19 response and facilitated incorporation of the COVID-19 module into DHIS2. FETP mentors, graduates, and current participants rapidly mobilized in March 2020 and continue to lead epidemic response activities including:

- Disease surveillance
- Border health
- Infection prevention and control
- Case investigation and management
- Laboratory testing and reporting
- Risk communication and community engagement
- Vaccination

Field Epidemiology Training Program (FETP)

In partnership with Research Triangle Institute International (RTI), AFENET, and Guinea’s MOH, CDC established a FETP in 2016 to strengthen workforce capacity to investigate and respond to disease outbreaks. Two levels of training—intermediate and frontline—help national, regional, and local public health systems stop outbreaks before they become epidemics. Each of Guinea’s 38 districts and eight regions now have at least three FETP graduates who are key leaders in epidemiological data collection and analysis and outbreak investigation. In 2019, Guinea became the first African country to graduate a francophone cohort of FETP-Intermediate. In 2021, FETP graduates led key management, case and outbreak investigation, and disease surveillance activities for COVID-19 and Ebola.

Public health workers learn how to use personal protective equipment at a training facilitated by CDC-GHSA in Guinea. Photo by Patrick Adams/RTI International
Laboratory Capacity Strengthening

CDC collaborates with the MOH’s national laboratory and regional laboratories to strengthen diagnostic systems for priority diseases. CDC has provided equipment, reagents, and training to increase testing capacity for meningitis, cholera, shigellosis, and brucellosis in two regional laboratories in Labe and Kankan. In collaboration with the MOH, International Medical Corps, and Georgetown University, CDC also supported the development and implementation of a national specimen referral policy.

Malaria

Malaria is endemic and is the second leading cause of death in Guinea. Under the U.S. President’s Malaria Initiative (PMI), CDC assigned a resident advisor to Guinea to support malaria prevention and control. CDC engages in several key prevention and disease control activities including:

- Increasing access to long-lasting insecticide-treated nets (ITNs)
- Indoor residual spraying
- Preventing malaria in pregnancy
- Enhancing diagnostics and case management
- Vector control and resistance monitoring
- Providing seasonal chemoprevention to children

Ebola

From 2014-2016, Guinea experienced the largest and most complex outbreak of Ebola in global history. The epidemic started in Guinea and spread to several other countries, including Sierra Leone and Liberia. CDC deployed over 300 staff to respond to Ebola in Guinea. CDC assisted the MOH and World Health Organization with epidemiology and disease surveillance, contact tracing, data management, infection prevention and control, laboratory strengthening, quality assurance, border health, emergency management, and communication. CDC’s continued support since 2014 played an important role in Guinea’s increased capacity to rapidly contain the 2021 Ebola outbreak. Local health workers continue to systematically use rapid tests to confirm whether any deaths are due to Ebola in areas that recently experienced cases or outbreaks. CDC continues to support development and implementation of vaccination strategies to prevent future Ebola outbreaks.

CDC STAFF

1. U.S. Assignee
2. Locally Employed

AT A GLANCE

Population: > 13 million
Per capita income: $2,580
Life expectancy: F 63 / M 61 years
Infant mortality rate: 48/1,000 live births

Sources:
World Bank, 2020; Population Reference Bureau, 2021

TOP 10 CAUSES OF DEATH

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

Source:
GBD Compare 2019, Guinea

For more country information
www.cdc.gov/globalhealth/countries/guinea

A social mobilizer in Guinea circulates in a market to announce an upcoming polio campaign. Photo by Louie Rosencrans/CDC