

CDC in ZAMBIA



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The Centers for Disease Control and Prevention (CDC) has worked with the Ministry of Health (MOH), Zambia National Public Health Institute (ZNPPI), and provincial health offices since 2000 to address HIV, tuberculosis (TB), malaria, COVID-19, and other infectious diseases. CDC also supports national program efforts to strengthen health systems, including disease surveillance, laboratory, and health information systems, public health workforce capacity strengthening, establishing the ZNPPI, and public health emergency preparedness.



With CDC support, Zambia Field Epidemiology Training Program (FETP) graduates have responded to cholera, polio, measles, typhoid, anthrax, salmonella, and COVID-19 epidemics since 2014



Zambia adapted the CDC-supported HIV laboratory infrastructure for hundreds of thousands of COVID-19 tests. This contributed to Zambia achieving one of the highest COVID-19 testing rates in Africa



CDC helped train more than 500 public health workers and more than 1,000 clinicians in COVID-19 prevention, response, mitigation, and management



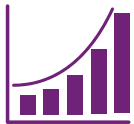
CDC and partners pioneered integration of COVID-19 vaccination in HIV clinics across Zambia



CDC helped seven Zambian laboratories achieve ISO 15189 accreditation and continues to support the country's commitment to quality diagnostic services



In just four years, the ECHO (Extension for Community Healthcare Outcomes) program expanded to 311 health facilities across all of Zambia's 10 provinces



With CDC support and strengthened laboratory infrastructure, the MOH doubled the number of HIV viral load tests performed to approximately one million tests per year



As of December 2021, 88% of people living with HIV in Zambia were on antiretroviral therapy (ART)



The data management systems established for HIV monitoring and evaluation are now used in an integrated approach for TB and lower respiratory infection surveillance



As of 2022, cervical cancer screening services are available in nearly 213 health facilities across the country



More than 250,000 adolescent girls have been fully vaccinated against human papillomavirus (HPV) in Zambia since 2018



To address malaria, CDC supported development and implementation of a national insecticide resistance-monitoring program since 2006

Field Epidemiology Training Program (FETP)

CDC helped establish Zambia's FETP in 2014 to strengthen workforce capacities to investigate and respond to disease outbreaks. FETP trains epidemiologists to perform disease surveillance and contain outbreaks of diseases like HIV, tuberculosis, and COVID-19. Participants learn critical skills for data collection and analysis and using data to inform action. The program has a sustainable home within ZNPHI. Zambia's FETP graduates have conducted early COVID-19 vaccine effectiveness studies, implemented the first SARS-CoV-2 prevalence study in Africa, investigated false positive HIV diagnoses to inform national policy, and investigated outbreaks related to consumption of a maize homebrew.

COVID-19

The first cases of COVID-19 in Zambia were confirmed on March 18, 2020. Since the pandemic was declared, CDC has supported Zambia with disease surveillance strategy and contact tracing, leveraging the existing laboratory network as the backbone of the COVID-19 laboratory network, developing COVID-19 clinical guidelines for case management, health informatics, science-based public health communication for Zambians, and epidemiologic studies. CDC also supported the COVID-19 vaccination campaign with vaccination strategies, safety surveillance, and integrating COVID-19 vaccination into existing health structures. FETP residents and graduates have filled critical positions in the country's COVID-19 response as they lead outbreak surveillance and response activities. FETP residents have also conducted epidemiologic investigations that impacted policy and public health action.

Health Systems Strengthening

CDC supports public health systems strengthening in Zambia by engaging in:

- Workforce development, including expanded academic and clinical training programs in the University of Zambia and the University Teaching Hospital and using the ECHO platform to enhance training and mentorship
- Enhancement of epidemiology, disease surveillance, health information systems, and program monitoring
- Establishment and continued support of the Zambia NPHI to strengthen public health surveillance and the capacities to detect and respond to health threats and serve as an NPHI Center of Excellence, supporting other NPHIs in the region
- Evaluations to assess program impact and inform rapid adjustments to address the evolving HIV epidemic
- Support of the Government of Zambia to lead public health responses
- Support of local organizations to provide health services at the community level

HIV and Tuberculosis (TB)

HIV is the leading cause of death in Zambia. Through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), CDC works with Zambia to build a sustainable, high-impact national HIV response to accelerate progress toward HIV epidemic control. CDC supports implementation of key HIV programs to reduce new HIV infections and HIV-related deaths in Lusaka and Southern, Eastern, and Western provinces. Key strategies used in meeting the UNAIDS 90:90:90 goals include targeted case finding, index testing, hot spot mapping and social networking testing, and strategies to retain clients on care. Zambia met the UNAIDS 90:90:90 goals in 2019 and is now focused on achieving the 95:95:95 goals for 2030. Since TB is the leading cause of death among people living with HIV, CDC focuses on integrating HIV and TB case management. CDC supports the MOH to enhance TB testing platforms increase access of TB Preventive Therapy (TPT) for people living with HIV.

Health Information Systems

With PEPFAR funding, CDC supported development of SmartCare, a national Electronic Health Record (EHR) system. SmartCare supports clinical care and continuity of care by providing confidential portable health records to clients on a smart card. More than 2 million people are enrolled in the system at over 1,600 facilities. More than 260 high-volume facilities have gone paperless to use the system in real-time.

Non-Communicable Diseases

Women living with HIV experience increased risk of human papillomavirus (HPV) and cervical cancer. Before the introduction of antiretroviral therapy (ART), women living with HIV were not screened for cervical cancer. With CDC support, Zambia launched a long-term, culturally appropriate, community-based training program in community health promotion to address cervical cancer. Through PEPFAR, CDC also provides policy and clinical guidance for hypertension, diabetes, mental health, and other comorbidities for people living with HIV.

Malaria

Malaria is a leading cause of death and disease in many countries, with young children and pregnant women as the most affected groups. Under the U.S. President's Malaria Initiative, CDC assigned a resident advisor to the malaria-endemic country of Zambia to support implementation of malaria prevention and control activities. CDC contributes to the development and monitoring and evaluation of activities, including:

- Providing long-lasting insecticide-treated nets and indoor residual spraying
- Preventing malaria in pregnancy
- Enhancing diagnostics and case management



CDC STAFF

15 U.S. Assignees
61 Locally Employed



AT A GLANCE

Population: > 18.3 million
Per capita income: \$3,360
Life expectancy: F 67/M 64 years
Infant mortality rate: 42/1,000 live births

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



TOP 10 CAUSES OF DEATH

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

Source:
GBD Compare 2019, Zambia



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