STRATEGIC FOCUS

The U.S. Centers for Disease Control and Prevention (CDC) office in Zambia has a long-standing partnership with the Ministry of Health (MOH) and its provincial health offices. Over the past 20 years, CDC has supported the MOH to scale up HIV prevention and treatment programs to turn the tide against the HIV epidemic. In the last year, CDC has focused on increasing access to evidence-based high-impact combination prevention, equitable and enhanced case identification and linkage for pediatrics, adolescents and young persons, and key populations, improving the quality and sustainability of HIV services, including integration of primary care services, non-communicable diseases and mental health. Additionally, CDC has leveraged the systems established by the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR) to build the capacity of local institutions to prevent, detect, and respond to existing and emerging public health threats.

KEY ACTIVITIES AND ACCOMPLISHMENTS

HIV Epidemic Control: With over 1.3 million people living with HIV (PLHIV), Zambia is one of the most affected by HIV globally. HIV is the leading cause of death in Zambia. Through the support provided by PEPFAR, CDC collaborates and coordinates through bilateral and diverse multistakeholder engagement to support a sustainable, equitable, high-impact national HIV response to accelerate progress toward HIV epidemic control. As a key PEPFAR implementing agency, CDC focuses on achieving United Nations Program on HIV/AIDS (UNAIDS) 95-95-95 targets (95 percent diagnosed among all PLHIV, 95 percent on antiretroviral therapy (ART) among those diagnosed, and 95 percent virally suppressed among those treated) for HIV epidemic control. To attain epidemic control, CDC is implementing PEPFAR’s 5-year strategy through a data driven and informed health equity lens to close gaps for children, adolescents, young people, and key populations across the entire cascade and continuum of care.

PEPFAR data, at the end of March 2023 showed, 1,234,392 (~87 percent) PLHIV in Zambia on ART, and viral load suppression among persons on ART was >95 percent. In comparison, children <15 years living with HIV (CLHIV) lag in the attainment of the UNAIDS targets, with ~70 percent of CLHIV knowing their status and on ART; but viral load suppression has steadily increased to 93 percent with wide implementation of pediatric dolutegravir. CDC supports implementing evidence-based HIV programs to reduce new HIV infections and to reduce HIV-related deaths in Lusaka, Southern, Eastern, and Western provinces. Key strategies used include enhancement of advanced HIV care; scaling up differentiated and integrated health service delivery models, implementation of targeted case-finding approaches such as: HIV index patient testing, hot-spot mapping, social networking HIV testing; and strategies to retain clients on care, use of rational appointment systems; and promotion of HIV viral load literacy to enhance viral load coverage.

Tuberculosis (TB) is the leading cause of death among PLHIV. CDC’s efforts focus on integrating HIV and TB case management, including bidirectional HIV and TB case finding integrated treatment services, including TB prevention and infection prevention and control. CDC currently supports the MOH and implementing partners to find, identify, treat, and prevent TB among PLHIV by expanding access to better TB screening, contact tracing, and support for diagnostics to reduce missed cases, especially among pediatric populations. Additionally, CDC has supported four provinces with the procurement of digital X-rays to enhance TB case finding among eligible PLHIV.

Laboratory Strengthening: In collaboration with MOH, CDC continues to support and sustain laboratory diagnostic testing capacity for 24 viral load PCR Laboratories, approximately 202 point-of-care testing platforms, and over 200 hub facilities. To ensure testing results are quality and accurate, CDC has supported the MOH to build a quality assurance coordination unit that spearheads quality management system implementation and support to attain ISO 17043 accreditation. Currently, 11 laboratories have attained ISO 15189, with selected lower-level laboratories seeking national quality management system certification.

Health Information Systems: With PEPFAR funding, CDC has supported the development of the SmartCare National Electronic Health Record system. This system supports clinical service delivery and continuity of care in over 1600 high volume health facilities nationwide with over 2 million enrolled. The system is used in health facilities providing care for >90 percent of PLHIV in Zambia. Data from SmartCare, logistics, laboratory, human resource, and health information systems feed into the national data warehouse for data analysis and visualization.

Key Country Leadership

President: H.E. Hakainde Hichilema
Minister of Health: Hon. Sylvia Masebo
U.S. Ambassador: H.E. Michael Gonzales
CDC Director Andrew F. Auld

Country Quick Facts

Per Capita GNI: $1,170 (2022)
Population (millions): 20.01 (2022)
Under 5 Mortality: 57.7/1,000 live births (2021)
Life Expectancy: 61.2 years (2021)

Global HIV/AIDS Epidemic

Estimated HIV Prevalence (Ages 15-49): 10.8% (2022)
Estimated AIDS Deaths (Ages ≥15): 17,000 (2022)
Estimated Orphans Due to AIDS: 580,000 (2022)
Reported Number Receiving Antiretroviral Therapy (ART) (Ages ≥15): 1,224,357 (2022)

Global Tuberculosis (TB) Epidemic

Estimated TB Incidence: 307/100,000 population (2021)
TB patients with known HIV status who are HIV-positive: 34% (2021)
TB Treatment Success Rate: 91% (2020)

DGHT Country Staff: 84
Locally Employed Staff: 65
Direct Hires: 15
IETA Fellows: 2

Our success is built on the backbone of science and strong partnerships.

September 2023 | The CDC Division of Global HIV & TB activities are implemented as part of the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR); non-HIV related TB activities are supported by non-PEPFAR funding.