

## 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 (PHO). Over the past 20 years, CDC supported the MOH to scale-up key HIV programs to turn the tide against the HIV epidemic in Zambia. In the last year, CDC has focused on improving case identification for people living with HIV (PLHIV) and immediate linkage to treatment, improving the quality of HIV services in a sustainable way and building capacity of local institutions to prevent, detect and respond to public health threats.

## KEY ACTIVITIES AND ACCOMPLISHMENTS

**HIV Epidemic Control:** With over 1.3 million PLHIV, Zambia is one of the countries most affected by HIV globally. 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. As a key PEPFAR implementing agency, CDC focuses on helping meet the joint 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.

According to PEPFAR data, by the end of March 2022, 1,202,998 (90 percent) PLHIV in Zambia were on ART, and HIV viral load (VL) suppression among persons on ART was > 95 percent. CDC supports implementing evidence-based HIV programs to reduce new HIV infections and HIV-related deaths in Lusaka, Southern, Eastern, and Western provinces. Key strategies used include targeted case finding, HIV index patient testing, hot-spot mapping, social networking HIV testing and strategies to retain clients on care, use of HIV differentiated service delivery models such as multi-month dispensing of ART, use of rational appointment systems, and promotion of HIV viral load literacy.

### Laboratory Strengthening

CDC supports MOH and partners in scaling up laboratory services to provide high-quality diagnosis and monitoring towards epidemic control. With CDC support and strengthened laboratory infrastructure, the MOH doubled the number of HIV VL tests performed to approximately 1 million tests in 2021. CDC has provided technical assistance to eight laboratories resulting in improved quality of testing and attainment of laboratory accreditation to international standards: University Teaching Hospital, Livingstone Central Hospital, Nchanga North General Hospital, Tropical Diseases Research Centre, Chest Disease Hospital, Arthur Davison children's hospital, Ndola Teaching Hospital, and Levy Mwanawasa Hospital.

### HIV and Tuberculosis (TB)

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 and to help sustain Zambia's efforts by expanding access to better TB screening, contact tracing, and diagnostics to find missing cases.

**PHIA Survey:** CDC supported the MOH in undertaking its second Population-based HIV Impact Assessment (PHIA) survey to measure the impact of HIV prevention and treatment services. Data from the survey is critical in charting a course to reach HIV epidemic control: full PHIA results are expected in September 2022.

### Health Information Systems

With PEPFAR funding, CDC supported the development of SmartCare, a national Electronic Health Record system. SmartCare supports clinical and continuity of care by providing confidential, portable health records to clients on an electronic SmartCare card. Over 2 million people are enrolled in the system at over 1,600 facilities. SmartCare is used in health facilities that provide care for >90 percent of PLHIV in Zambia.

### COVID-19

Since the pandemic's start, CDC has supported Zambia's response with disease surveillance strategy and contact tracing, leveraging the existing PEPFAR supported laboratory network as the backbone of the COVID-19 laboratory network. CDC has supported the development of COVID-19 clinical guidelines for case management, health informatics, science-based public health communications, created vaccine demand, trained health workers, and assisted in related epidemiologic studies.

### Key Country Leadership

President:  
H.E. Hakainde Hichilema

Minister of Health:  
Hon. Sylvia Masebo

U.S. Ambassador:  
H.E. Michael Gonzales

CDC Director  
Dr. Andrew F. Auld

**Country Quick Facts**  
([worldbank.org/en/where-we-work](http://worldbank.org/en/where-we-work))

Per Capita GNI:  
\$1,040 (2021)

Population (millions):  
18.92 (2021)

Under 5 Mortality:  
61.4/1,000 live births  
(2019)

Life Expectancy:  
64 years (2020)

**Global HIV/AIDS Epidemic**  
([aidsinfo.unaids.org](http://aidsinfo.unaids.org))

Estimated HIV Prevalence  
(Ages 15-49): 10.8% (2021)

Estimated AIDS Deaths  
(Age ≥15): 17,000 (2021)

Estimated Orphans Due to  
AIDS: 620,000 (2021)

Reported Number  
Receiving Antiretroviral  
Therapy (ART) (Age ≥15):  
1,153,938 (2021)

**Global Tuberculosis  
(TB) Epidemic**  
([who.int/tb/country/data/profiles/en](http://who.int/tb/country/data/profiles/en))

Estimated TB Incidence :  
319/100,000 population  
(2020)

TB patients with known HIV  
status who are HIV-positive:  
39% (2020)

TB Treatment Success Rate:  
89% (2019)

**DGHT Country Staff: 79**  
Locally Employed Staff: 61  
Direct Hires: 14  
Fellows & Contractors: 4

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

September 2022 | 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

