

CDC in Burkina Faso

Factsheet



Staffing
2 U.S. Assignees
No Locally Employed

Impact in Burkina Faso

- Completed first nationwide vaccination campaign for bacterial meningitis in 2010
- 17 million doses of polio vaccine and 2.4 million doses of measles vaccine were given to children under five
- 134 health professions were trained in outbreak investigation in the region through FELTP-related trainings
- More than 12 million people were vaccinated against meningitis



The Centers for Disease Control and Prevention (CDC) began an ongoing collaboration with the Ministry of Health and Government (MoH) of Burkina Faso in 1991 to provide guidance for polio eradication. This collaboration has expanded to include other important health issues. CDC has most recently focused on strengthening the country's public health system, introducing and evaluating new vaccines, and continuing to work toward polio eradication and measles elimination. While CDC does not maintain an office in Burkina Faso, two CDC staff are detailed to the World Health Organization (WHO) West Africa Inter-Country Support Team in Ouagadougou. CDC promotes healthier, safer lives in Burkina Faso through technical assistance and through collaboration with in-country partners including the U.S. Peace Corps, the University of Ouagadougou, and WHO.

Top 10 Causes of Death in Burkina Faso

1. Malaria	22%	6. Preterm Birth Complications	3%
2. Lower Respiratory Infections	13%	7. Protein-energy Malnutrition	3%
3. Diarrheal Disease	12%	8. Road Injuries	3%
4. Meningitis	5%	9. Stroke	3%
5. HIV	3%	10. Sepsis	2%

Source: GBD Compare (<http://viz.healthmetricsandevaluation.org/gbd-compare/>), 2010

Immunization

CDC, in collaboration with its partners, provides technical and financial support to Burkina Faso for polio eradication and measles pre-elimination activities. In 2009 Burkina Faso experienced its largest measles outbreak on record (>50,000 cases). CDC provided assistance with the outbreak epidemiology. CDC also assisted with designing and implementing studies investigating the risk factors associated with contracting measles during the outbreak. For recent nationwide polio vaccination campaigns CDC provided assistance with planning, implementation, and supervision of campaign activities. In 2009 and 2010, CDC staff, in partnership with WHO, provided training to U.S. Peace Corps-Burkina Faso volunteers on surveillance-related activities and immunizations for vaccine-preventable diseases. CDC will send an epidemiologist to WHO's West Africa inter-country support team to assist with vaccine-preventable disease activities.

Burkina Faso has not detected a wild poliovirus case since October 2009.

Influenza

CDC and partners have collaborated with the Institut de Recherche en Sciences de Sante (IRSS) in Burkina Faso to establish influenza surveillance and diagnostic capacity. IRSS is one of five new laboratories that have joined the WHO External Quality Assessment Project for influenza laboratories. CDC also



Burkina Faso at a Glance

Population:	17,482,000
Per capita income:	\$1,170
Life expectancy at birth women/men:	57/55 yrs
Under 5 mortality:	73/1,000 live births

Population Reference Bureau, 2012



Tobacco Control

The Global Youth Tobacco Survey (GYTS) collects data to determine tobacco use and factors that contribute to tobacco use among 13-to-15-year-olds. Two cities in Burkina Faso conducted GYTS in 2001 and repeated the survey in 2006 and 2009. The Global School Personnel Survey conducted in 2006 and 2009 collected information on tobacco use, knowledge, and attitudes of school personnel toward tobacco, and information about tobacco control policies and teaching resources in schools. For these surveys CDC provides technical support and helps establish standard survey procedures, design, and sample selection.

Bacterial Diseases

CDC conducts research on the transmission and burden of select pathogens that cause diseases. Study results inform policy makers and help them reach decisions about introducing vaccines and other interventions to effectively reduce the burden of disease in the country. One bacterial disease that has inflicted significant suffering due to repeated epidemics is meningitis. In 2006 and 2007 more than 40,000 cases of epidemic meningitis were reported in Burkina Faso. The first nationwide vaccination campaign with MenAfriVac in Burkina Faso in 2010 represented more than 10 years of work to develop a safe, effective, affordable vaccine to end meningitis as a public health concern in sub-Saharan Africa. Through its unique role in implementing and evaluating the vaccine, CDC provides intensive technical support, mentoring for surveillance, and laboratory confirmation of meningitis in Burkina Faso. CDC and its partners continue to assess the vaccine's capability to reduce transmission and to produce "herd immunity" in the Burkinabe population. In addition, CDC provides full-time support for meningitis activities with a medical epidemiologist on WHO's West Africa inter-country support team.

Field Epidemiology and Laboratory Training Program (FELTP)

The West Africa FELTP is a two-year, regional, in-service training program in applied epidemiology and public health laboratory practice created within the Multi Disease Surveillance Center (MDSC) based in Ouagadougou, Burkina Faso. The program began in 2010 by enrolling twelve residents, three from each of the four participating countries (Burkina Faso, Mali, Niger, and Togo). The West Africa-FELTP prepares field epidemiology, public health laboratory, and veterinary residents for leadership positions in various levels of the MoH in their respective countries. The residents provide services to their home MoH during their training through field placements. Residents from Burkina Faso have evaluated the surveillance system of highly pathogenic avian influenza, have been at the forefront in investigations of yellow fever, and have participated in the introduction of a new meningococcal vaccine campaign. The program was initially sponsored by MDSC with technical assistance provided by CDC, through funding from USAID, and in partnership with the MoH s of Burkina Faso, Mali, Niger, and Togo.

Publication Date: December 2013

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