CDC in Brazil

Staff

CDC office (physical presence)
0 U.S. Assignees
4 Locally Employed

At a Glance

Population: 204,519,398
Per capita income: $15,900
Life expectancy at birth women/men: 79/71 yrs
Infant mortality rate: 19/1000 live births

Source: Population Reference Bureau Fact Sheet, 2014

Top 10 Causes of Death

1. Low Back & Neck Pain 6%
2. Ischemic Heart Disease 6%
3. Cancer 4%
4. Diabetes 4%
5. Lower Respiratory Infections 3%
6. Diarrheal Disease 2%
7. Diabetes 2%
8. Interpersonal Violence 3%
9. Iron-deficiency anemia 2%
10. HIV/AIDS 2%

Source: GBD Compare (http://viz.healthmetricsandevaluation.org/gbd-compare/), 2013

The Centers for Disease Control and Prevention (CDC) established an office in Brazil in 2003 to combat HIV/AIDS. CDC has since expanded to other health areas in Brazil and works closely with the Ministry of Health's (MoH's) Secretariat of Health Surveillance and other partners to maintain strong collaboration in program planning, monitoring and evaluation, strengthening epidemiologic surveillance, and building laboratory capacity. The office is located within the MoH in Brasília, a strategic location that provides better integration and coordination with MoH staff and better understanding of the goals and support needed. CDC's technical assistance model in Brazil focuses on technical collaboration with limited financial support. The CDC-Brazil office differs from other CDC country offices in that all staff are host country nationals, including the country director, and it's supported part-time by a deputy director working from CDC headquarters in Atlanta.

HIV/AIDS

There are more than 35 million people worldwide living with HIV. With over 60 years of expertise in preventing and fighting diseases, CDC plays a critical role in helping ministries of health in partner countries build strong, sustainable programs that respond effectively to the HIV/AIDS epidemic. CDC provides support to more than 60 countries as a key partner in the U.S. President's Emergency Plan for AIDS Relief (PEPFAR).

In Brazil, CDC has piloted the "A Hora é Agora" (the Time is Now) Program, which aims to expand HIV rapid testing among MSM, and to ensure linkage to care in partnership with the Curitiba Municipal Health Secretariat.

Immunization

Vaccines prevent an estimated 2.5 million deaths among children younger than age 5 every year. Still, 1 child dies every 20 seconds from a disease that could have been prevented by a vaccine. Why? Because 1 in 5 children in the world do not have access to the life-saving immunizations that keep children healthy. CDC provides technical and programmatic expertise to meet immunization goals and international resolutions to eradicate polio, reduce measles mortality, and strengthen national routine immunization programs. These interventions save the lives of 2-3 million people every year.

In Brazil, CDC, through the Pan American Health Organization (PAHO), provides scientific and programmatic expertise to meet national immunization goals and vaccine preventable disease initiatives for the elimination of measles, rubella, and congenital rubella syndrome.

Malaria

After a steady increase in malaria among the countries of the Amazon Basin region, CDC, USAID, PAHO, and other partners developed and launched the Amazon Malaria Initiative in 2001. The initiative is focused on appropriate policies for disease treatment.

CDC provides technical assistance and capacity development specifically for monitoring antimalarial drug resistance and insecticide resistance. This has been an ongoing project with funding from USAID and typically involves several technical assistance visits annually.

Field Epidemiology Training Program (FETP)

Field epidemiologists rapidly respond to public health threats by collecting and using data to make recommendations to reduce or prevent illnesses, injuries or death. US CDC created the Epidemic Intelligence Service (EIS) to increase the skills and abilities of public health professionals in field epidemiology. Ministries of health in other countries recognized the success of the EIS and asked CDC to assist in establishing similar programs in their countries.

Epidemiologia Aplicada aos Serviços do Sistema Único de Saúde (EPISUS) has been a CDC and MoH collaboration success story. EPISUS was created by the MoH in 2000 with support from CDC, the World Bank, and the CDC Foundation. In 2009 the program became autonomous and self-sustained under the MoH. EPISUS has trained more than 100 epidemiologists, conducted more than 230 outbreak investigations, and evaluated more than 100 surveillance systems. EPISUS is a well-regarded two-year program and a leading element of the MoH's surveillance and emergency response structure. Through EPISUS and other collaborations CDC has assisted the MoH in improving its operational capability to verify deaths, CDC has also assisted in the disease surveillance strategy for the world cup FIFA 2014, incorporating new technologies such as real time data collection using EPIINFO on tablet and it´s dashboard, technologies that now are been used in the Zika virus emergency response and investigation.

Impact in Brazil

CDC's investment and scientific exchange with Brazil contributed to:

- 3,000 oral fluid-based HIV tests were completed through the CDC supported web-based HIV testing system.
- Enhanced disease outbreak investigation and control.
- National physical exercise programs to decrease obesity and related chronic diseases.
- Country ownership of evidence-based public health decision-making.
- Strengthened capacity of Brazilians to improve public health in other developing countries.

Influenza

CDC has had a cooperative agreement with the MoH since 2006 to strengthen influenza pandemic preparedness, laboratory capacity, and epidemiologic surveillance. CDC supports seasonal influenza vaccination through its partnership with PAHO and also provides technical assistance to the Instituto Butantan, a Sao Paulo State health institution, to support development of vaccines against novel influenza strains. Brazil has a robust influenza surveillance system with 57 surveillance sites supported by three national laboratories that provide CDC, in its role as a WHO Collaborating Center, with data and virus isolates that contribute to the biannual vaccine strain selection process. During the 2009 H1N1 pandemic Brazil was an important contributor of surveillance and clinical information to global partners, and now works with CDC to generate national estimates of influenza-associated mortality.

For more information please contact Centers for Disease Control and Prevention:
CDC-Atlanta
1600 Clifton Road NE, Atlanta, GA 30333
Email: cgh@cdc.gov
Web: http://www.cdc.gov/global

Publication Date: March 2016