



CDC in Haiti

The Centers for Disease Control and Prevention (CDC) began working in Haiti in 2002 and initially focused on preventing the transmission of HIV/AIDS and providing care and treatment to those already infected. After a devastating 7.0 magnitude earthquake hit Haiti in January 2010, CDC Haiti expanded the scope of its work to focus on immediate health needs and to address longer-term public health interventions.



CDC STAFF

- 9 U.S. Assignees
- 59 Locally Employed
- 2 Fellows



AT A GLANCE

Population: 10,924,000
Per capita income: \$1,750
Life expectancy at birth: W 65/M 61 yrs
Infant mortality rate: 42/1000 live births



TOP 10 CAUSES OF DEATH

1. HIV **8%**
2. Lower Respiratory Infections **6%**
3. Diarrheal Diseases **5%**
4. Cancer **5%**
5. Ischemic Heart Disease **5%**
6. Stroke **5%**
7. Congenital Birth Defects **4%**
8. Road Injuries **3%**
9. Preterm Birth Complications **3%**
10. Diabetes **3%**

Source: Population Reference Bureau 2015; Haiti
Source: GBD Compare: Haiti, 2015



Global HIV/AIDS

CDC Haiti, with support from the President's Emergency Plan for AIDS Relief (PEPFAR), works in close collaboration with Haiti's Ministry of Health (MSPP) to increase access to quality HIV clinical services, prevent mother-to-child transmission of HIV, and increase laboratory and strategic information capacity. In 2016 CDC Haiti adopted and implemented the World Health Organization's Test and Start strategy, which makes treatment available to anyone who is HIV positive, and reached 80,000 people – over half of all people living with HIV in Haiti. The CDC program also led the development and implementation of key innovative approaches such as the biometric coding for unique patient identification, and the patient linkage and retention program. These interventions significantly improved the PEPFAR Haiti program performance.

Global Health Security Agenda

The Global Health Security Agenda provides a framework for preventing, detecting, and responding to potential infectious disease threats. CDC Haiti is supporting the government of Haiti (GOH) in detecting emerging disease threats by bolstering laboratory and surveillance capacity through establishing a laboratory enhanced surveillance system and disease surveillance networks such as the National Cholera Surveillance System and the National Epidemiologic Surveillance Network. To build a strong, local epidemiologic workforce, CDC's Field Epidemiology Training Program (FETP) works with the MSPP to strengthen national and local public health systems.

Since the Haiti program's inception in 2011, the FETP has graduated 270 students who are trained to respond to disease outbreaks and conduct case investigations of epidemic-prone illnesses. Through mass immunization of children for measles and rubella in 2012 and the co-financing of new vaccines, CDC Haiti is working with partners and the MSPP to control vaccine-preventable diseases.

Disease-Specific Programs

Zika Virus: The GOH confirmed the presence of Zika virus in Haiti in January 2016. To prevent and detect the spread of Zika, CDC Haiti supports targeted mosquito control activities and is working with the National Public Health Laboratory to integrate Zika surveillance into the lab surveillance system.

Lymphatic Filariasis and Malaria: Haiti is on the verge of eliminating two mosquito-borne diseases -- malaria and lymphatic filariasis (LF). National coverage for LF mass drug administration (MDA) was achieved for the first time in March 2012, with over 8 million people treated, including 2.3 million in Port-au-Prince. CDC continues to support treatment assessment surveys to determine eligibility to stop MDA in areas that have achieved reduced prevalence. As a result of improved diagnostics and the availability of effective treatment, confirmed cases of malaria decreased 45% from 2011 to 2015. To further accelerate progress toward elimination, CDC leads the Malaria Zero initiative, an alliance of government, academic and nongovernmental partners whose goal is to eliminate malaria from Hispaniola by 2020.

Cholera

The first cases of cholera were confirmed in Haiti in October 2010. Since the outbreak, CDC has supported the GOH to improve diarrheal disease surveillance, enhance laboratory culture capacity, train rural potable water and sanitation technicians, and evaluate oral cholera vaccine campaigns. Although cholera remains a persistent public health threat, cases are down significantly from the peak of the epidemic in 2011.

Hurricane Matthew

Hurricane Matthew made landfall on October 4, 2016, destroying much of the land, infrastructure, and homes in the southern region of Haiti and leaving over a million people in need of humanitarian aid. CDC Haiti mobilized quickly to deploy teams to the hurricane-affected areas to conduct cholera case investigations and assessments of health care facilities, collect specimens for laboratory testing, and assess rural community water systems.

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



IMPACT IN HAITI



Over 90% of HIV infected pregnant women are on ART



Reduced the positivity rate of HIV transmission from mother-to-child from 9.2% in 2009 to 5.7% in 2016



National Epidemiologic Surveillance Network extended to 643 sites covering more than 60% of the health facilities in Haiti



Enhanced TB diagnostics such as fluorescent microscopy and GeneXpert led to an increase in the number of MDR-TB cases detected and treated in 2016



Approximately 5 million individuals are no longer at risk of LF due to successful implementation of MDA in 101 of 140

For more information please contact

Centers for Disease Control and Prevention CDC - Atlanta
1600 Clifton Road NE, Atlanta, GA 30333

www.cdc.gov/global

Email: cdcglob@cdc.gov

Publication Date May 2017

CS274103