

CDC in Angola

The Centers for Disease Control and Prevention (CDC) Angola office officially opened in October 2002. CDC Angola supports the Angola Ministry of Health (MOH) by providing critical support for HIV surveillance and laboratory and health system strengthening. In addition, CDC trains healthcare professionals to expand and improve the quality of healthcare in Angola.



CDC STAFF

- 2 U.S. Assignees
- 3 Locally Employed



AT A GLANCE

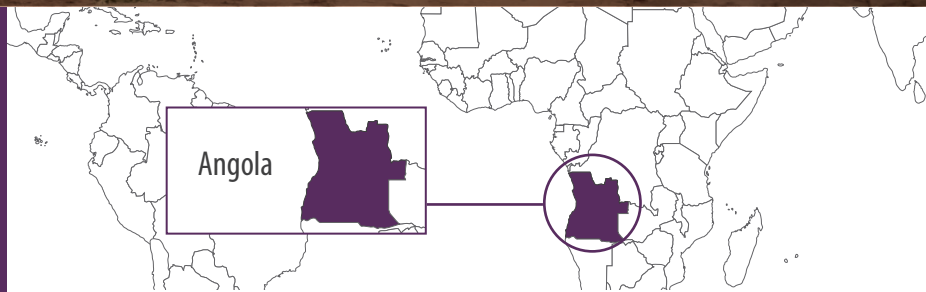
Population: 27,503,506
Per capita income: \$4,180
Life expectancy at birth: W 63/M 60 yrs
Infant mortality rate: 44/1000 live births



TOP 10 CAUSES OF DEATH

1. Diarrheal diseases
2. Neonatal disorders
3. HIV/AIDS & TB
4. NTDs & malaria
5. Other noncommunicable diseases
6. Nutritional deficiencies
7. Cardiovascular diseases
8. Unintentional injuries
9. Mental and substance abuse
10. Other communicable, maternal, neonatal and nutritional diseases

Source: National Statistics Institute
Source: GBD Compare, Angola: 2016



HIV/AIDS

Through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), CDC supports HIV program planning and decision-making in Angola by strategically strengthening health systems to enable data-driven, evidence-based decision-making for maximum health impact. This approach also helps to ensure the most effective, efficient use of resources.

Specific activities include working closely with the MOH to strengthen laboratory capacity, health information systems, and disease surveillance; to train healthcare professionals; and to monitor programs. CDC also supports nine model healthcare facilities, which provide high-quality HIV and TB services in Luanda, showcasing best practices. This model will be replicated throughout the country.

The focus of this work is to:

- Improve the quality and coverage of HIV testing and antiretroviral services through providing support to high-quality, cost-effective models for HIV care and treatment and building institutional capacity.
- Support a longitudinal electronic database to follow patients from HIV diagnosis through viral load (VL) monitoring at PEPFAR-supported sites.
- Improve HIV surveillance and strengthen management, oversight, and monitoring of HIV and TB service delivery.
- Support scale-up of VL monitoring and continuous quality improvement activities for HIV rapid testing, VL, early infant diagnosis, and TB testing using GeneXpert.

Health Systems Strengthening

CDC continues to support the MOH in implementing the Field Epidemiology Laboratory Training Program (FELTP) and complementary, shorter applied epidemiology courses. FELTP residents provide service to the MOH by working in the field to:

- Conduct epidemiologic investigations and surveys.
- Evaluate surveillance systems and perform disease control and prevention measures.
- Report their findings to decision- and policy-makers.
- Assess HIV data collection and reporting systems and HIV adherence rates and support partner notification services in PEPFAR-supported model clinics.

President's Malaria Initiative (PMI)

PMI's overall approach to health systems strengthening is to provide technical assistance to various levels of the government in budget and finance, health management information systems, workforce capacity building, and logistics and supply chain management, with a particular emphasis on strengthening provincial malaria program management. The main emphasis for Angola in FY 2017 is implementing a national universal insecticide-treated bednet distribution campaign and improving the supply chain.

Parasitic Diseases

PMI works in concert with the National Malaria Control Program (NMCP) to improve case management in Angola and supports the NMCP's transition from routine clinical diagnosis of malaria to laboratory confirmation of all suspected malaria cases. Enhanced proficiency in the laboratory diagnosis of malaria in Angola is achieved through PMI-supported training and supervision for case management strengthening and laboratory diagnosis and quality control.

Laboratory Strengthening

CDC assists the MOH in building a sustainable and integrated laboratory network as a critical and core component of the overall healthcare system. This assistance includes:

- National assessment of the tiered public health laboratory system.
- National strategic plan to strengthen the public health laboratory network.
- Implementation of laboratory quality systems through the Strengthen Laboratory Management towards Accreditation (SLMTA).
- Other Lab Projects.
- Blood Safety.

For more country information

www.cdc.gov/globalhealth/countries/angola



IMPACT IN ANGOLA



In 2016, CDC through PEPFAR scaled up routine HIV viral load monitoring and use of GeneXpert for TB diagnosis.



In 2016, FELTP trainees participated in a large yellow fever outbreak investigation and malaria epidemic.



On December 24, 2016 Angola declared the end of a year-long yellow fever outbreak, the largest reported in the last 30 years. CDC's Global Disease Detection Program deployed over 40 staff to support the MOH with surveillance, epidemiology, laboratory diagnostics, case management, social mobilization, and vaccination campaign logistics.



In 2016, Angola met the standard for WHO polio-free certification, (standard OPV3 coverage and AFP surveillance levels); no wild poliovirus detected since July 2011. Angola is currently participating in WHO's Polio Transition Planning process.

For more information please contact

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Publication Date October 2017

CS274103