

STRATEGIC FOCUS

The U.S. Centers for Disease Control and Prevention (CDC) began working in Sierra Leone in 2008 through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). After helping the nation respond to Ebola, a permanent country office was established in 2015 to support the Government of Sierra Leone through the Ministry of Health and Sanitation (MoHS). CDC's HIV and Tuberculosis (TB) focus is:

- Providing technical assistance and enhancing partner coordination at the national and district level
- Implementing effective prevention programs by improving HIV testing and preventing mother-to-child transmission
- Strengthening surveillance and program monitoring and evaluation
- Improving care and treatment services including HIV/TB diagnosis and antiretroviral (ART) treatment
- Enhancing point of care laboratory testing for Multi Drug Resistant (MDR)/Extensively Drug Resistant (XDR) TB and HIV/TB co-infection
- Building high quality laboratory systems to support HIV and TB testing

KEY ACTIVITIES AND ACCOMPLISHMENTS

Partnerships

- CDC continues to be a strong and active participant throughout Sierra Leone, including the National AIDS Control Program (NACP)

Laboratory Systems

- CDC and PEPFAR partners continue to strengthen the national HIV program by providing technical assistance to develop and validate the Elimination of Mother-to-Child Transmission (eMTCT) Strategic Plan and eMTCT and Pediatric HIV treatment in the country
- In collaboration with the Global Fund and the African Society for Laboratory Medicine (ASLM), CDC continues to strengthen the capacity of viral load and Early Infant Diagnosis (EID) testing by supporting national expansion of viral load from one to 28 facilities and EID to 21 facilities
- CDC has strengthened the TB testing program through development and review of an integrated specimen Management Policy and Guideline
- CDC has provided support to develop system tools and the implement Quality Management Systems (QMS), which has raised the WHO-AFRO Strengthening Laboratory Management Toward Accreditation (SLMTA) score from 0 to 3 stars in the National Tuberculosis Reference Laboratory, and continues with the aim of attaining accreditation
- CDC provides technical assistance to test TB samples by solid culture and Drug Susceptibility Testing (DST) for first and second line drugs through Line Probe Assays

Data for Decision Making

- CDC is supporting capacity building of MoHS to use data for decision-making to guide HIV and TB programs

Quality Improvement

- Improve coverage of in-patient HIV testing and use of isoniazid preventive therapy (IPT) to prevent TB amongst people living with HIV by supporting MoHS to design and implement two Quality Improvement Collaborative (QICs) involving 24 health care facilities

Technical Assistance

- Supported MoHS to update NACP monitoring and evaluation (M&E) registers to be more robust and responsive to demand at the health facility and program levels, and to enable NACP to track HIV- positive patients screened for TB along the continuum of care for the first time
- Trained five public health workers in Frontline and Intermediate Field Epidemiology Training Program on HIV and TB surveillance
- Provided training to improve HIV services through quality improvement

Key Country Leadership

President:
Julius Maada Bio

Minister of Health:
Alpha Tejan Wurie

U.S. Ambassador:
Maria Brewer

CDC/DGHP Director:
Tushar Singh

Country Quick Facts

Per Capita GNI:
\$490 (2016)

Population:
7.4 million (2016)

Under 5 Mortality:
114/ 100,000 live births
(2016)

Life Expectancy:
52 years (2016)

Global HIV/AIDS Epidemic

Estimated HIV Prevalence
(Ages 15-49): 1.7% (2016)

Estimated AIDS Deaths
(Age ≥15): 2,500 (2016)

Estimated Orphans Due to
AIDS: 26,000 (2016)

Reported Number
Receiving Antiretroviral
Therapy (ART) (Age ≥15):
17,100 (2016)

Global Tuberculosis (TB) Epidemic

Estimated TB Incidence:
304 / 100,000 (2016)

TB patients with known
HIV-status who are HIV-
positive: 14% (2016)

TB Treatment Success
Rate: 88% (2015)

