



# CDC in Guinea

The Centers for Disease Control and Prevention (CDC) established an office in Guinea in 2015, during the Ebola outbreak in West Africa, to help develop capacities to prevent, detect, and respond to public health threats. In collaboration with implementing partners, CDC continues to work with Guinea on strengthening the country's laboratory, surveillance, workforce, and emergency management capacity to respond to disease outbreaks in support of the Global Health Security Agenda; and implement interventions for malaria prevention and control under the U.S. President's Malaria Initiative.



## CDC STAFF

- 1 U.S. Assignee
- 7 Locally Employed



## AT A GLANCE

- Population: 12,717,176 (2017)
- Per capita income: \$2,270
- Life expectancy at birth: F 61/M 58 years
- Infant mortality rate: 68/1,000 live births

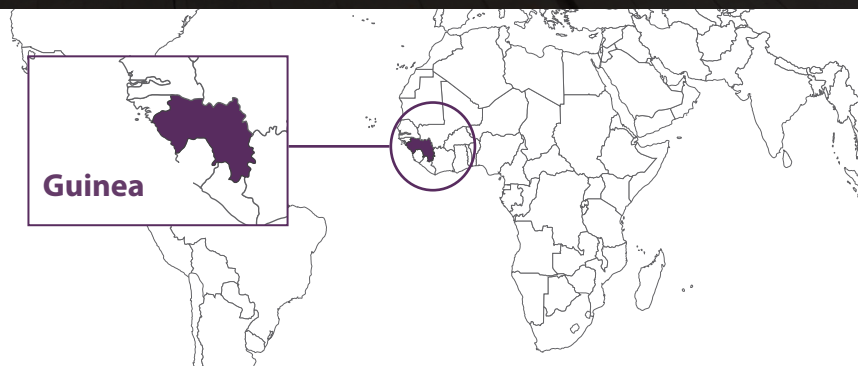
Sources:  
World Bank 2018, Guinea  
Population Reference Bureau 2018, Guinea



## TOP 10 CAUSES OF DEATH

1. Lower respiratory infections
2. Malaria
3. Neonatal disorders
4. Ischemic heart disease
5. Stroke
6. Tuberculosis
7. Diarrheal diseases
8. HIV/AIDS
9. Congenital defects
10. Meningitis

Source:  
GBD Compare 2018, Guinea



## Global Health Security

In today's globally connected world, disease threats can spread faster and more unpredictably than ever before. CDC's global health security efforts in Guinea improve the country's ability to prevent, detect, and respond to infectious disease outbreaks before they become epidemics that could affect global populations. These efforts help Guinea reach the targets outlined in the Global Health Security Agenda (GHSa), a global partnership launched in 2014 to help make the world safer from infectious disease threats. Working closely with the Ministry of Health (MOH) and implementing partners, CDC provides expertise and support to 4 GHSa technical areas: emergency management, disease surveillance, laboratory systems, and workforce development.

CDC supported the establishment of the first public health Emergency Operations Center (EOC) in Guinea in 2015. This national EOC is an integral part of the MOH National Agency for Health Security (ANSS). With support from CDC, the ANSS has established an EOC in each of its 38 districts. Between January 2015 and March 2019, the national EOC has been activated 3 times for yellow fever, and district EOCs have been activated 9 times. In addition to responding to yellow fever, anthrax, and Lassa fever cases, the district EOCs have been activated to support polio, tetanus, and measles vaccination campaigns.

## Community-Based Surveillance

CDC and implementing partners provided equipment and training to strengthen the capacity of community health workers, who played an important role in the early detection of epidemic-prone disease cases and outbreaks in 18 of 38 districts. In 2019, CDC and partners developed a transition plan to help the sustainable transfer of these activities to the MOH.



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention

## Field Epidemiology Training Program

CDC, in partnership with Research Triangle Institute International (RTI), the African Epidemiology Network (AFENET) and Guinea's MOH, established a Field Epidemiology Training Program (FETP) in 2016 to strengthen the capacity of its workforce to investigate and respond to disease outbreaks. As of April 2019, 130 human health and 16 animal health staff have graduated from the program and hold key surveillance and emergency response positions throughout the country. Each of the 38 districts and the 8 regions of Guinea now have at least 2 graduates from the program who play a leading role in the collection and analysis of epidemiological data and participate in outbreak investigations. FETP graduates have conducted 43 investigations since 2016.

Three levels of training—advanced, intermediate, and frontline—help develop national, regional, and local capabilities to stop diseases at their source. In January 2019, Guinea started Africa's first FETP intermediate-level cohort in French. Six trainees are scheduled to graduate from the regional FETP advanced-level program in 2020. The FETP program is under the leadership of the ANSS.

## Laboratory Capacity Building

CDC's technical assistance to the MOH national laboratory has helped strengthened diagnostics for priority diseases and the decentralization of laboratory capacity from the national to the regional level. CDC has provided equipment, reagents, and training to laboratory technicians in the regions of Labe and Kankan. These laboratories now have the capacity to test for most priority diseases. CDC, in collaboration with International Medical Corps and Georgetown University, supported Guinea in the development of a national specimen referral policy and its implementation.

## Health Systems Strengthening

Through a collaboration between CDC, RTI, MOH, and WHO, standardized data collection tools were developed in 2018. These tools include updated case notification forms and combine case data from clinical and laboratory sources. These tools have been integrated into the DHIS2 surveillance system.

## Malaria

Malaria is the second leading cause of death in Guinea. Under the U.S. President's Malaria Initiative, CDC has assigned a resident advisor to the malaria-endemic country of Guinea to support the implementation of malaria prevention and control interventions. These interventions include providing long-lasting insecticide-treated nets and indoor residual spraying; preventing malaria in pregnancy; improving diagnostics and case management; vector control and resistance monitoring; and providing seasonal chemoprevention to approximately one million children.

## Ebola

From 2014-2016, Guinea fought the largest and most complex outbreak of Ebola in history. The epidemic started in Guinea and spread to several other countries, including the heavily impacted countries of Sierra Leone and Liberia. The 2014-2016 outbreak resulted in more than 28,000 reported cases and 11,000 deaths in 10 countries.

CDC deployed over 300 staff to combat Ebola in Guinea. CDC partnered with the Public Health Agency of Canada and FETP medical epidemiologists of the Democratic Republic of Congo and Haiti to provide support to the MOH and WHO. CDC provided technical assistance for epidemiology and surveillance, contact tracing, data management, infection prevention and control, laboratory capacity building and quality assurance, border health, emergency management, and communication.

CDC played a leading role in the use of a rapid test for Ebola during the epidemic and for the signing of an agreement between the U.S. Ambassador and the Minister of Health that allowed for the irradiation of the MOH Ebola sample and their return to Guinea where it can now be used for research.



## CDC IMPACT IN GUINEA



One national and 38 district EOCs have been fully transitioned to the MOH. The EOCs have been activated for outbreak response and vaccination campaigns.



47% (18 of 38) districts have community-based surveillance capacity for early detection of potential disease threats through assistance from CDC and implementing partners.



146 FETP-frontline graduates hold key surveillance positions and have participated in 43 investigations since 2016.



In 2019, Guinea started the first FETP-intermediate cohort in Africa to be taught in French.



Established 2 regional laboratories with testing capacity previously only available at the national laboratory.

**For more country information, visit:**  
[www.cdc.gov/globalhealth/countries/guinea](http://www.cdc.gov/globalhealth/countries/guinea)

**For more information, please contact:**

Centers for Disease Control and Prevention  
1600 Clifton Road NE, Atlanta, GA 30329-4018

[www.cdc.gov/global](http://www.cdc.gov/global)  
Email: [cdcglobal@cdc.gov](mailto:cdcglobal@cdc.gov)