

Accessible link: https://www.cdc.gov/global-health/countries/guinea.html

CDC established an office in Guinea in 2015. CDC Guinea works closely with the Ministry of Health (MOH) and other partners in Guinea to build and strengthen the country's core public health capabilities. These include data and surveillance; laboratory capacity; workforce and institutions; prevention and response to health threats; innovation and research; policy, communications and diplomacy. Priority programs address health systems strengthening, emergency management, malaria, and Ebola.

# **KEY ACCOMPLISHMENTS**



Surveillance

Facilitated development of the District Health Information Software 2 (DHIS2) to manage routine and epidemic-prone disease surveillance data for rapid outbreak detection



Laboratory

Provided equipment, reagents, and training to increase testing capacity for meningitis, cholera, shigellosis, and brucellosis in two regional laboratories in Labe and Kankan



**Workforce &** Institutions

Trained over 12,000 health workers to DHIS2 for routine and epidemiological surveillance at laboratories, and national and district health departments across all 38 Guinean districts



Prevention & Response

· Helped establish Guinea's first public health Emergency Operations Center (EOC), an integral part of the MOH's National Agency for Health Security, which has now established an EOC across 38 Guinean districts



Innovation & Research

Provided on-the ground technical assistance on the Ebola survivor programs



Provided risk communication and community engagement activities for COVID-19 and Ebola



# **PROGRAM OVERVIEW**

## **GLOBAL HEALTH SECURITY**

CDC's global health security work in Guinea focuses on strengthening the country's public health systems across the following core areas:

## **Health Systems Strengthening**

CDC began facilitating the DHIS2 in 2015 to manage routine and epidemic-prone disease surveillance data and to rapidly detect disease outbreaks in Guinea. CDC and partners developed standardized data collection tools that include updated case notification forms and combined case data from clinical and laboratory sources. These tools are integrated into the DHIS2 system. CDC and the African Epidemiology Network also supported the MOH to incorporate COVID-19 and Ebola modules into DHIS2 and train public health workers to use the system. In 2019, CDC transitioned community-based disease surveillance activities over to the MOH. CDC continues to support DHIS2 trainings for health facility staff and community health workers across all 38 Guinean districts.

# **Workforce Development**

CDC helped establish Guinea's FETP in 2016 to strengthen workforce capacity to investigate and respond to disease outbreaks. Two levels of training— intermediate and frontline—help national, regional, and local public health systems stop outbreaks before they become epidemics. FETP-Advanced trainees complete the program in neighboring Burkina Faso. FETP graduates have led key management, case and outbreak investigations, and disease surveillance activities for COVID-19 and Ebola. CDC has supported training of over 300 public health workers who graduated from the Field Epidemiology Training Program (FETP).

## **Laboratory Systems Strengthening**

CDC collaborates with the MOH's national laboratory and regional laboratories to strengthen diagnostic systems for priority diseases. CDC has provided equipment, reagents, and training to increase testing capacity for meningitis, cholera, shigellosis, and brucellosis in two regional laboratories in Labe and Kankan. In collaboration with the MOH, International Medical Corps, and Georgetown University, CDC also supported the development and implementation of a national specimen referral policy.



## **Emergency Management**

CDC helped establish Guinea's first public health Emergency Operations Center (EOC) in 2015. The national EOC is an integral part of the MOH's National Agency for Health Security, which has now established an EOC in each of Guinea's 38 districts. In addition to responding to disease outbreaks, district EOCs also support polio, tetanus, and measles vaccination campaigns.

During the COVID-19 pandemic, CDC supported several activities including:

- · Disease surveillance
- · Border health
- · Infection prevention and control
- Case investigation and management
- · Laboratory testing and reporting
- · Risk communication and community engagement
- Vaccination

#### **TB**

Guinea's population of 12 million people is at risk of malaria. Under the U.S. President's Malaria Initiative (PMI), CDC assigned a resident advisor to Guinea to support malaria prevention and control. CDC engages with United States Agency for International Development (USAID) in several key prevention and disease control activities including:

- · Increasing access to mosquito nets
- · Indoor residual spraying
- · Preventing malaria in pregnancy
- · Enhancing diagnostics and case management
- · Vector control and resistance monitoring
- · Providing seasonal chemoprevention to children

## **EBOLA**

From 2014-2016, Guinea experienced the largest and most complex outbreak of Ebola in global history. The epidemic started in Guinea and spread to several other countries, including Sierra Leone and Liberia. CDC deployed over 300 staff to respond to Ebola in Guinea. CDC assisted the MOH and World Health Organization with:

- Epidemiology and disease surveillance
- Contact tracing and data management
- Infection prevention and control
- · Laboratory strengthening
- · Quality assurance
- · Border health
- Emergency management
- Communication







