

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

CDC began working in Sierra Leone in the 1970's, focusing on Lassa fever. CDC established an office in Sierra Leone in 2015. CDC works closely with Sierra Leone's Ministry of Health and Sanitation (MOH), National Public Health Agency (NPHA), and funded partner organizations to build and strengthen the country's core public health capabilities. These include data and surveillance; laboratory capacity; workforce and institutions; prevention and response; and policy, communications, and diplomacy. Priority program areas address global health security, HIV and tuberculosis (TB), malaria, and infection prevention control (IPC). Key initiatives include the Global Health Security Agenda (GHSA), U.S. President's Emergency Plan for AIDS Relief (PEPFAR), and the U.S. President's Malaria Initiative (PMI).

KEY ACCOMPLISHMENTS



Data & Surveillance

 Supported establishment of electronic case-based disease surveillance information system used by over 1,300 health facilities. More than 90% of health facilities report data on priority diseases in a timely manner



 Increased ability to detect and diagnose 10 key diseases, including COVID-19, Ebola, yellow fever, cholera, and influenza



Workforce & Institutions

 Supported training of almost 500 public health professionals who graduated through the Field Epidemiology Training Program (FETP), which resulted in at least 1 FETP-trained epidemiologist per 200,000 people



 Assisted the MOH in developing a multisectoral surge personnel deployment plan and roster, which has over 3,800 multidisciplinary surge personnel throughout the country



 Provided support and technical advice to increase the number of people vaccinated for COVID-19 and HPV by countering vaccine misinformation



PROGRAM OVERVIEW

GLOBAL HEALTH SECURITY

CDC's global health security (GHS) work in Sierra Leone increases the country's ability to prevent, detect, and respond to disease outbreaks before they become global epidemics. CDC focuses on strengthening the country's public health systems across surveillance, laboratory, workforce development, and emergency response. CDC provides expertise and support to MOH, NPHA, and other government institutions to strengthen GHS in Sierra Leone. Sierra Leone launched NPHA in December 2023, enabled by CDC's technical and financial support. NPHA serves as a central coordinating structure for public health functions.

Disease Surveillance

CDC supported Sierra Leone's development and implementation of a national electronic Integrated Disease Surveillance and Response system. This includes a reporting system for priority diseases. CDC also supported the establishment of an electronic case-based disease surveillance information system (eCBDS) that reports case-level data. The eCBDS tracks epidemic-prone disease outbreaks and covers both COVID-19 and all epidemic-prone priority disease reporting. The electronic reporting system and eCBDS are key assets to Sierra Leone's COVID-19 response. All districts now have established disease reporting structures for timely communication of potential disease outbreaks.

Laboratory Systems Strengthening

CDC has supported laboratory strengthening in Sierra Leone by training laboratory technicians and investing in the Central Public Health Reference Laboratory. CDC investments in Sierra Leone's laboratory network helped expand:

- · Microbiology and molecular dianostic methods
- Specimen collection and referral
- · Biosafety standard operating procedures
- · Linkage of laboratory results with surveillance case data

Workforce Development

CDC helped Sierra Leone establish FETP in 2016. FETP trains health professionals in collecting, analyzing, and interpreting data to inform evidence-based decisions. Three levels of training—advanced, intermediate, and frontline—enhance national and local surveillance capabilities to investigate outbreaks before they become epidemics. CDC helped transition FETP Frontline to operate under the guidance of MOH. FETP graduates throughout Sierra Leone conduct critical surveillance activities and outbreak investigations for infectious diseases. Diseases have included COVID-19 and viral hemorrhagic fevers such as Ebola and Lassa fever.

Emergency Response

CDC fosters both national and district emergency management capacities, including conducting risk assessments for all districts and supporting training programs in Public Health Emergency Management. CDC's technical assistance included the development of public health emergency response plans for COVID-19 at points of entry and Ebola simulation exercises to identify gaps and prepare for cross-border cases. CDC assisted the MOH in developing a multisectoral surge personnel deployment plan and roster, which

has over 3,800 multidisciplinary surge personnel throughout the country. CDC also supports public health emergency operations centers.

HIV AND TB

CDC has supported PEPFAR activities in Sierra Leone for 10 years. In 2020, Sierra Leone became an official PEPFAR country. CDC took over the PEPFAR program in 2024. CDC continues to support the National HIV Response in 15 healthcare facilities in accordance with UNAIDS 90-90-90 goals. CDC supports PEPFAR's priorities in Sierra Leone, including:

- · Increasing the quality of HIV and TB services
- · Improving HIV-related health outcomes
- Establishing high-quality laboratory systems to support HIV and TB testing for viral load, early infant diagnosis, and TB drug susceptibility
- · Decreasing new HIV infections and maternal and child deaths
- Supporting development of policy guidelines, standard operating procedures, and materials
- Training nurses, midwives, national trainers, mentors, and health facility staff

CDC and PEPFAR are also working to expand community-led monitoring of HIV services and to address HIV-related stigma and discrimination.

MALARIA

Malaria accounts for a large proportion of death and disease in Sierra Leone. More than 2.5 million cases and over 6,800 deaths were reported in 2019. Through the PMI, a CDC resident advisor supports the National Malaria Control Program (NMCP). CDC works to enhance entomologic surveillance and insecticide resistance testing, increase data monitoring and usage, and reduce infant morbidity and mortality. CDC also supported NMCP's adoption and use of bed nets treated with piperonyl butoxide (PBO). Compared to other bed nets used in Sierra Leone, PBO-treated bed nets are four times more effective against mosquitoes. With CDC support, Sierra Leone implemented the world's first national net distribution campaign using the new generation of PBO-treated nets.

INFECTION PREVENTION AND CONTROL

CDC first trained healthcare workers in IPC during the 2014-2016 Ebola epidemic. CDC continued supporting these trainings during the COVID-19 pandemic. IPC trainings help HCWs expand their knowledge, skills and competencies in providing quality healthcare services to patients admitted to COVID-19 centers. CDC also helped MOH establish IPC certification courses. Course graduates continue to support the COVID-19 response within their communities, local health facilities, institutions, and district health management teams. IPC is key to prevention and control of antimicrobial resistance. CDC supports implementation of surgical site infection surveillance in 16 health facilities. This work aims to increase the quality of SSI surveillance and prevent SSI and other healthcare-associated infections.







