

STRATEGIC FOCUS

The U.S. Centers for Disease Control and Prevention (CDC) Angola office (CDC-Angola) established a partnership with the Angola Ministry of Health (MOH) in 2002 to strengthen the national public health system. In 2004, CDC began building capacity within the MOH to respond to the HIV/AIDS epidemic. CDC-Angola collaborates with the MOH and the Instituto Nacional de Luta Contra o SIDA's (INLS) to strengthen public health and clinical systems; to deliver quality HIV testing and treatment services; and to respond to emergent public health threats. CDC-Angola's strategic focus is to work with implementing partners (IPs) to:

- Build public health capacity and infrastructure
- Strengthen health information systems

KEY ACTIVITIES AND ACCOMPLISHMENTS

Building Public Health Capacity

Strengthening Public Health and HIV Testing, Treatment, and Retention Services

CDC-Angola focuses on implementing HIV programming in 22 health facilities across the four provinces of Benguela, Cunene, Huambo, and Lunda Sul. In collaboration with the MOH, CDC-Angola supports a combined facility-community approach for index testing to maximize the impact of HIV testing at the 22 U.S. President's Emergency Plan for AIDS Relief (PEPFAR) supported health facilities. CDC-Angola provides technical assistance for implementing the "Test and Treat" program, which aims to start patients newly diagnosed with HIV on anti-retroviral therapy (ART) the same day they are diagnosed. Patients remaining on ART for life is key to epidemic control. CDC-Angola provides retention-focused technical assistance to health facilities and healthcare providers and supports work in community settings to provide an integrated approach to HIV and tuberculosis (TB) care and ensure uninterrupted treatment.

Strengthening HIV/AIDS Policies

CDC-Angola's technical assistance to the MOH and INLS facilitated key HIV policy changes in Angola. These HIV policy changes include: 1) updated ART regimens to include Tenofovir Lamivudine Dolutegravir for adults and children; 2) pharmacies to dispense up to three months of ART to patients to decrease interruptions in treatment; and 3) revised national HIV laboratory procedures.

Strengthening Laboratory Systems and Networks

CDC-Angola's technical assistance is developing laboratory quality assurance/management systems and building laboratory capacity to increase high-quality HIV diagnostic and management services. CDC-Angola support facilitated the development of a national point of care early infant diagnosis testing package, including a transport network for laboratory samples from health facilities, and implementing an electronic laboratory information system to track HIV exposed children. CDC supports an External Quality Assurance (EQA) system, enabling the MOH to enroll nine COVID-19 laboratories into EQA programs and to implement a lab information system for COVID-19.

Strengthening Health Information Systems

Data Collection and Use: CDC-Angola supported a comprehensive HIV/TB Data Quality Assessment in 2019. The results improved monitoring and evaluation systems and piloted a facility-based electronic HIV patient tracking system. In collaboration with the MOH, CDC-Angola developed a national register of patients with HIV infection at each PEPFAR-supported point of service to reduce duplicate data and improve linkage to treatment and retention of patients.

Key Country Leadership

President:
João Manuel Gonçalves Lourenço

Minister of Health:
Sílvia Paula Valentim Lutucuta

U.S. Ambassador:
Tulinabo Mushingi

CDC/DGHT Director:
Karidia Diallo

[Country Quick Facts](https://worldbank.org/en/where-we-work)
(worldbank.org/en/where-we-work)

Per Capita GNI:
\$1,900 (2022)

Population (millions):
35.58 (2022)

Under 5 Mortality:
69.4/1,000 live births (2021)

Life Expectancy:
62 years (2021)

[Global HIV/AIDS Epidemic](https://aidsinfo.unaids.org)
(aidsinfo.unaids.org)

Estimated HIV Prevalence (Ages 15-49): 1.5% (2022)

Estimated AIDS Deaths (Age ≥15): 9,700 (2022)

Estimated Orphans Due to AIDS: 300,000 (2022)

Reported Number Receiving Antiretroviral Therapy (ART) (Age ≥15): 136,234 (2022)

[Global Tuberculosis \(TB\) Epidemic](https://who.int/tb/country/data/profiles/en/)
(who.int/tb/country/data/profiles/en/)

Estimated TB Incidence: 325/100,000 population (2021)

TB Patients with Known HIV Status who are HIV Positive: 12% (2021)

TB Treatment Success Rate: 53% (2020)

DGHT Country Staff: 05

Locally Employed Staff: 05
Direct Hires: 02
Fellows & Contractors: 00

Our success is built on the backbone of science and strong partnerships.

