# **CDC in Georgia**





## Staff

CDC office (physical presence)

2 U.S. Assignees

3 Locally Employed

# At a Glance

Population: 4,329,000 Per capita income: \$4,700 Life expectancy at birth women/men: 79/69 yrs Infant mortality: 28/1000 live births

Source: Population Reference Bureau Fact Sheet, 2011

# Top 10 Causes of Death

- Ischemic Heart Disease 36%
- 2. Stroke 23%
- 3. Cancer 11%
- 4. Other Circulatory/Heart Diseases 4%
- 5. Chronic Obstructive Pulmonary Disease 3%
- 6. Hypertensive Heart Disease 3%
- 7. Rheumatic Heart Disease
- 8. Cirrhosis 2%
- 9. Diabetes 1%
- 10. Road Injury 1%

Source: GBD Compare (http://viz.healthmetricsandevaluation.org/gbd-compare/), 2010

The Centers for Disease Control and Prevention (CDC) has a strong relationship with the country of Georgia. Partnering with Georgia's National Center for Disease Control and Public Health (NCDC) and other ministries, CDC helps develop institutional capacity to detect and respond to disease outbreaks. CDC provides ongoing technical assistance in outbreak investigation and development of laboratory and epidemiologic capacity in surveillance for a variety of health risk areas, including enteric diseases, botulism, extremely dangerous pathogens, and reproductive health.

#### **Immunization**

CDC has been working with WHO and Georgian institutions in the field of immunization since the 1990s, when they helped to investigate the large-scale diphtheria outbreak in Georgia and implemented an effective immunization campaign to control the outbreak. More recently, CDC assisted the MoH, in collaboration with WHO/Europe, to investigate the measles and rubella outbreak of 2004-2005, and to plan and implement the measles-rubella immunization campaign in 2008. In 2009-2010, CDC and the MoH conducted a widespread study of the blood serum of persons at risk for measles and rubella to assess susceptibility of the remaining population. Currently, CDC continues to work with the MoH to help Georgia achieve measles and rubella elimination by providing technical assistance with the analysis of epidemiologic data, surveillance reviews, immunization program reviews, and supplementary immunization activities. CDC continues to work on ensuring Georgia remains polio-free.

### **Reproductive Health**

In 1999, 2005, and 2010, with USAID support and in collaboration with the Georgian Ministry of Labor, Health, and Social Affairs, CDC conducted three reproductive health surveys and a National Reproductive Age Mortality Study (2009). In partnership with CDC and survey funders, the MoH used the data to assess the reproductive health status of Georgian women, evaluate and target programs and interventions, and develop national policy for improved reproductive health care. CDC technical assistance also built national capacity to conduct survey research, analyze data, and apply findings.

### Field Epidemiology and Laboratory Training Program (FELTP)

CDC has been working closely with the Georgia National Center for Disease Control and Public Health (NCDC) since 1994. At that time, CDC established a program to improve epidemiologic capacity in Georgia and assisted the NCDC in establishing Georgia's first epidemiological bulletin similar to CDC's weekly epidemiological digest, MMWR. In 2009, the program was expanded and named the South Caucasus Field Epidemiology Training Program (SC/FELTP).



This 2-year competency-based program builds self-sustaining workforce capacity in the countries of Georgia, Azerbaijan, and Armenia by training local epidemiologists, veterinarians, and laboratory managers in field epidemiology, veterinary epidemiology, and laboratory quality management systems. In 2011, 11 public health specialists graduated from the program and 16 new public health specialists were enrolled in the program. A total of 43 public health specialists have been enrolled in the program since 2009. In addition, SC/FELTP is developing the first-ever surveillance system for road traffic injuries in Georgia. SC/FELTP offices and classroom are provided by the Georgia NCDC; the program is also supported by the Defense Threat Reduction Agency at the Department of Defense, the US Department of State's Biosecurity Engagement Program, and the Office of Global Health Affairs in the Department of Health and Human Services.

### **Laboratory System Strengthening**

CDC trains local leaders and managers and equips them with skills to improve national and regional laboratory networks, surveillance systems, and quality management systems. Targeted technical assistance is helping the Ministry of Health to integrate new and existing laboratories into a more robust laboratory network. A goal is to strengthen national networks and skills of the local workforce to better coordinate activities and improve the country's surveillance, laboratory, and response systems. CDC also conducts workshops to encourage discussions on bridging animal and human laboratory systems and fostering further collaboration. In this way, CDC is

helping to establish a sustainable, in-country program to strengthen the public health surveillance and laboratory workforce. Since 2008, CDC has been training managers within the Georgia NCDC on laboratory quality management systems and project management. The unified approach to laboratory management capacity building includes: 1) strengthening management capacity through needs-assessments and skill-building workshops; 2) establishing projects facilitated by graduates of the Management for International Public Health course offered by CDC; and 3) developing a comprehensive laboratory quality assurance program and national testing strategy.

#### **Informatics**

CDC helped to develop and deploy the Defense Threat Reduction Agency supported Electronic Integrated Disease Surveillance System (EIDSS), which provides actionable public health data for decision makers. CDC helps to define future modifications and improvements and regularly works with partners to develop and train analytic reporting and visualization functions. To develop a comprehensive surveillance system evaluation CDC worked closely with SC.

For more information please contact Centers for Disease Control and Prevention:

#### CDC-Atlanta

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# Impact in Georgia

- Over 140 specialists from human and animal health sectors of Georgia, Armenia, and Azerbaijan received specialized epidemiology and laboratory training since 2009.
- SC/FELTP investigated 12 outbreaks in 2011 that identified reporting issues currently being addressed by NCDC.
- SC-FELTP outbreak investigations discovered a harmful type of E.coli new to Georgia, leading to active surveillance for this type of bacterium in 2011.