National Action Plan for Health Security (NAPHS)
Addressing Disease Threats and Improving Country Capacity

Building Better Health Security

A disease threat anywhere can be a threat everywhere. Developing the health security capacity needed to manage infectious disease outbreaks is a challenge for many countries. The Joint External Evaluation (JEE) and National Action Plan for Health Security (NAPHS) processes are parts of a voluntary whole-of-government approach to identify gaps in health security across 19 technical areas and implement activities to address them.

Collectively, these tools help governments
- Strengthen their health security capacity
- Gain domestic support from the highest political levels for health security work
- Direct partners to areas where more support is needed

Both the JEE and NAPHS are integral to meeting requirements set forth by the WHO International Health Regulations (IHR 2005). The U.S. Centers for Disease Control and Prevention (CDC) provides technical expertise to generate a realistic and actionable NAPHS for each country to mitigate infectious disease threats.

Steps in the process from JEE to NAPHS implementation

- **Establish a starting point**: Review risk and capacity assessments; determine priorities.
- **Develop a plan**: Design activities to address the gaps and build capacity from the starting point.
- **Implement and track the plan**: Analyze needs for government, partner, and donor funding and other resources; perform periodic reviews and updates of the plan.

Benefits to Host Country

The NAPHS enables governments to determine their own health security priorities while encouraging donors and partners to fill in gaps identified by a country’s JEE. With support from the CDC and international partners, countries are able to

- Produce high-impact and technically sound NAPHS activities
- Design activities to address gaps in health security
- Implement, monitor, and evaluate NAPHS activities
Many of the world’s most dangerous diseases, including Ebola, anthrax, cholera, and yellow fever are a great concern for Uganda; and the country continues to be a high-risk hotspot for infectious disease outbreaks. In 2017, Uganda completed its first JEE, which documented the need to improve the country’s health security across 19 technical areas.

Making Progress

In 2018, Uganda began working with partners to address these infectious disease risks from an all-of-government approach through the NAPHS. Within this process, Uganda

- **Secured $1 million** from the non-profit and private sectors to take action on critical NAPHS activities.
- **Improved emergency preparedness and response capacities** to strengthen surveillance, laboratory, supply chain, risk communication, and personnel systems.
- **Moved from no capacity (red) to limited capacity (yellow)** in 2 technical areas: National legislation, policy, and financing, and Points of entry.
- **Developed an integrated health security training curriculum**, which raised the level of alertness for outbreaks in districts, health facilities, and communities.

Partnerships with a Purpose

Building health security capacity depends on contributions from partners such as

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<tr>
<th>COLLABORATION</th>
<th>TECHNICAL EXPERTISE</th>
<th>FUNDING</th>
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<tr>
<td><strong>between</strong></td>
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<tr>
<td>• Government of Uganda</td>
<td>• U.S. Centers for Disease Control and Prevention (CDC)</td>
<td>• Johnson &amp; Johnson</td>
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<td>• Private Sector Roundtable</td>
<td>• Infectious Diseases Institute (IDI)</td>
<td>• Resolve to Save Lives (RTSL)</td>
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<td>• World Health Organization (WHO)</td>
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Next Steps for Uganda

Uganda hired a NAPHS Acceleration Team with the support of CDC, IDI, and RTSL to manage NAPHS implementation and monitoring. The country is on track to continue to make improvements in its health capacity and plans to “Get out of Red” for five indicators within the JEE during the first year of the NAPHS launch. These indicators are within the three technical areas: Preparedness, Points of entry, as well as National legislation, policy, and financing. This will make Uganda the first country in to Africa to accomplish this milestone.