CDC’s Contribution to the Global Health Security Agenda
Summary of 2017 Accomplishments in 17 Priority Countries

What is the GHSA?

The Global Health Security Agenda (GHSA) is a worldwide effort to strengthen countries’ ability to prevent, detect, and respond to public health emergencies and infectious disease threats. The Centers for Disease Control and Prevention (CDC) plays a leading role in the implementation of GHSA in 17 priority countries: Bangladesh, Burkina Faso, Cameroon, Côte d’Ivoire, Guinea, Ethiopia, India, Indonesia, Kenya, Liberia, Mali, Pakistan, Senegal, Sierra Leone, Tanzania, Uganda, and Vietnam.

Preventing avoidable epidemics, including naturally occurring, intentional, and accidental outbreaks.

- **Antimicrobial Resistance**
  - Countries: 6
  - Population: 1.65 billion
  - Designated laboratory facilities that conducted antimicrobial susceptibility tests (AST) and reported to the designated national body in the last 6 months

- **Zoonotic Disease**
  - Countries: 6
  - Population: 1.86 billion
  - Developed or strengthened surveillance data are shared between human and relevant animal health sectors for all prioritized zoonotic diseases

- **Biosafety/Biosecurity**
  - Countries: 4
  - Population: 1.32 billion
  - Securing national laboratories through physical security controls and electronic inventories for all dangerous pathogens and toxins

- **Immunization**
  - Countries: 13
  - Population: 2.0 billion
  - Strengthened and improved community immunization coverage based on surveillance of disease burden

Detecting threats, including emerging biological threats, at the earliest possible moment.

- **National Lab Systems**
  - Countries: 9
  - Population: 1.73 billion
  - Increasing laboratory testing capacity for all country-prioritized pathogens using core tests

- **Surveillance**
  - Countries: 10
  - Population: 1.86 billion
  - Expanded national surveillance systems linking suspect case reports and laboratory data from all subnational jurisdictions

- **Reporting**
  - Countries: 10
  - Population: 1.71 billion
  - Improving national database(s) to include laboratory data for priority notifiable diseases or syndromes with case-based reporting

- **Workforce Development**
  - Countries: 17
  - Population: 2.44 billion
  - Established or expanded the public health workforce-training of field-based epidemiologists (disease detectives)
Responding rapidly and effectively to biological threats of international concern.

<table>
<thead>
<tr>
<th>Emergency Operations Centers</th>
<th>Public Health and Law Enforcement</th>
<th>Medical Countermeasures</th>
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</thead>
<tbody>
<tr>
<td>Countries: 15</td>
<td>Countries: 8</td>
<td>Countries: 7</td>
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<tr>
<td>Population: 2.2 billion</td>
<td>Population: 469 million</td>
<td>Population: 2.1 billion</td>
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<td>Facilitated trainings for emergency management specialists and experts to support a well-functioning EOC</td>
<td>Countries using law as a tool to build public health capacities and strengthen GHSA/IHR implementation</td>
<td>Improved planning for logistics to deploy staff, medicines, and or supplies during a public health emergency</td>
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Snapshot of Countries’ Successes:

**Burkina Faso Improving Country’s Laboratory Testing Capacity**
In May 2017, Burkina Faso’s National Arbovirus/Viral Hemorrhagic Fever Reference Laboratory achieved capacity to test for Lassa fever, Crimean-Congo Hemorrhagic Fever, Rift Valley fever, dengue, chikungunya, and Zika viruses. CDC provided support through hands-on, practical training in molecular biology and serology testing, virtual technical consultations, and the provision of reagents and equipment. This broader laboratory testing capacity enables more accurate identification and faster containment of infectious disease threats.

*CDC National Center for Emerging and Zoonotic Infectious Diseases–Viral Special Pathogens Branch*

**Cameroon Conducts Full Scale Test of Country’s Emergency Response System**
In September 2017, the Government of Cameroon staged the first large-scale, international public health response exercise in Africa with support from CDC experts, the U.S. Defense Threat Reduction Agency, the World Health Organization, and other partners. The week-long exercise focused on a simulated outbreak of cholera and challenged Cameroon’s outbreak response capabilities, testing the country’s improved laboratories, ability to share information in real time, new Public Health EOC and other systems.

*CDC Office of Public Health Preparedness and Response–Division of Emergency Operations*

**Vietnam Enhances Disease Detection Efforts at Local Level**
CDC supported an event-based surveillance (EBS) pilot project from 2016–2017, actively engaging local community members, leaders, and health care staff in the detection and reporting of unusual health events and outbreaks. By December 2017, approximately 9,000 people had been trained, resulting in more than 5,900 early warning signals of potential outbreaks reported. Over 420 disease outbreaks were confirmed, including foodborne illnesses, mumps, diphtheria, chickenpox, and hand, foot, and mouth disease, with more than 400 of the confirmed outbreaks responded to in under 48 hours.

*CDC Center for Global Health—Global Tuberculosis (TB) Branch*