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Second Meeting Geneva, 6-10 December 2004

REPORT OF THE MEETING OF STATES PARTIES

Introduction

1. The Final Document of the Fifth Review Conference of the States Parties of the Convention on the Prohibition of the Development, Production and Stockpiling of Bacteriological (Biological) and Toxin Weapons and on their Destruction (BWC/CONF.V/17), in the section dealing with Decisions and Recommendations, contained the following decision:

"The Conference decided, by consensus, as follows:

(a) To hold three annual meetings of the States Parties of one week duration each year commencing in 2003 until the Sixth Review Conference, to be held not later than the end of 2006, to discuss, and promote common understanding and effective action on:

- i. the adoption of necessary national measures to implement the prohibitions set forth in the Convention, including the enactment of penal legislation;
- ii. national mechanisms to establish and maintain the security and oversight of pathogenic microorganisms and toxins;
- iii. enhancing international capabilities for responding to, investigating and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of disease;
- iv. strengthening and broadening national and international institutional efforts and existing mechanisms for the surveillance, detection, diagnosis and combating of infectious diseases affecting humans, animals, and plants;
- v. the content, promulgation, and adoption of codes of conduct for scientists.

(b) All meetings, both of experts and of States Parties, will reach any conclusions or results by consensus.

(c) Each meeting of the States Parties will be prepared by a two week meeting

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of experts. The topics for consideration at each annual meeting of States Parties will be as follows: items i and ii will be considered in 2003; items iii and iv in 2004; item v in 2005. The first meeting will be chaired by a representative of the Eastern Group, the second by a representative of the Group of Non-Aligned and Other States, and the third by a representative of the Western Group.

(d) The meetings of experts will prepare factual reports describing their work.

(e) The Sixth Review Conference will consider the work of these meetings and decide on any further action."

2. In accordance with the decision of the Fifth Review Conference, the 2003 Meeting of States Parties was convened in Geneva from 10 to 14 November 2003, and was preceded by a Meeting of Experts held in Geneva from 18 to 29 August 2003. The 2003 Meeting of States Parties approved the nomination by the Group of Non-aligned and Other States of Mr. Peter Goosen of South Africa as Chairman of the Meeting of Experts and Meeting of States Parties in 2004. The 2003 Meeting of States Parties decided that the 2004 Meeting of Experts would be held in Geneva from 19 to 30 July 2004, and that the 2004 Meeting of States Parties would be held in Geneva from 6 to 10 December 2004.¹

3. By resolution 59/110, adopted without a vote on 3 December 2004, the General Assembly, *inter alia*, requested the United Nations Secretary-General to continue to render the necessary assistance to the depositary Governments of the Convention and to provide such services as may be required for the implementation of the decisions and recommendations of the Review Conferences, including all necessary assistance to the annual meetings of the States Parties and the meetings of experts.

4. The 2004 Meeting of Experts convened in Geneva from 19 to 30 July 2004. At its closing meeting on 30 July 2004, the Meeting of Experts adopted by consensus its Report (BWC/MSP/2004/MX/3).

Organization of the Meeting of States Parties

5. In accordance with the decisions of the Fifth Review Conference and the 2003 Meeting of States Parties, the 2004 Meeting of States Parties was convened at the Palais des Nations in Geneva from 6 to 10 December 2004, under the Chairmanship of Mr. Peter Goosen of South Africa.

6. At its first meeting, the Meeting of States Parties adopted its agenda (BWC/MSP/2004/1) and programme of work (BWC/MSP/2004/2) as proposed by the Chairman.

7. At the same meeting, following a suggestion by the Chairman, the Meeting of States Parties adopted as its rules of procedure, *mutatis mutandis*, the rules of procedure of the Fifth Review Conference, as contained in Annex II of the Final Document of the Review Conference (BWC/CONF.V/17).

8. Mr. Peter Kolarov, Political Affairs Officer, United Nations Department for Disarmament Affairs, was in charge of the BWC issues in the Department for Disarmament Affairs. Mr. Richard Lennane, Political Affairs Officer, served as Secretary of the Meeting of States

¹ See BWC/MSP/2003/4 (Vol I)

Parties. Ms. Melissa Hersh and Dr. Piers Millett, Professional Assistants, served in the Secretariat.

Participation at the Meeting of States Parties

9. Eighty-nine States Parties to the Convention participated in the Meeting of States Parties as follows: Albania, Algeria, Argentina, Australia, Austria, Azerbaijan, Bahrain, Bangladesh, Belarus, Belgium, Belize, Bolivia, Bosnia and Herzegovina, Brazil, Brunei Darussalam, Bulgaria, Canada, Chile, China, Colombia, Costa Rica, Croatia, Cuba, Cyprus, Czech Republic, Denmark, El Salvador, Estonia, Ethiopia, Finland, France, Germany, Greece, Guatemala, Holy See, Hungary, Iceland, India, Indonesia, Iran (Islamic Republic of), Iraq, Ireland, Italy, Japan, Jordan, Kuwait, Latvia, Lebanon, Libyan Arab Jamahiriya, Lithuania, Malaysia, Malta, Mauritius, Mexico, Mongolia, Morocco, Netherlands, New Zealand, Nicaragua, Nigeria, Norway, Oman, Pakistan, Peru, Philippines, Poland, Portugal, Qatar, Republic of Korea, Romania, Russian Federation, Saudi Arabia, Senegal, Serbia and Montenegro, Slovakia, Slovenia, South Africa, Spain, Sri Lanka, Sweden, Switzerland, Thailand, Turkey, Ukraine, United Kingdom of Great Britain and Northern Ireland, United States of America, Venezuela, Viet Nam, Yemen.

10. In addition, five States that had signed the Convention but had not yet ratified it participated in the Meeting of States Parties without taking part in the making of decisions, as provided for in rule 44, paragraph 1 of the rules of procedure: Egypt, Madagascar, Myanmar, Syrian Arab Republic, United Republic of Tanzania.

11. Two States, Israel and Kazakhstan, neither Parties nor Signatories to the Convention, participated in the Meeting of States Parties as observers, in accordance with rule 44, paragraph 2 (a).

12. The United Nations, including the United Nations Institute for Disarmament Research (UNIDIR), attended the Meeting of States Parties in accordance with rule 44, paragraph 3.

13. The Food and Agriculture Organization (FAO), the International Committee of the Red Cross (ICRC), the World Health Organization (WHO) and the World Organization for Animal Health (OIE) were granted observer status to participate in the Meeting of States Parties in accordance with rule 44, paragraph 4.

14. Fourteen non-governmental organizations and research institutes attended the Meeting of States Parties under rule 44, paragraph 5.

15. A list of all participants in the Meeting of States Parties is contained in document BWC/MSP/2004/INF.3.

Work of the Meeting of States Parties

16. The Meeting of States Parties held two public meetings, on 6 and 10 December respectively, and six working sessions between 6 and 10 December 2004. In accordance with the programme of work (BWC/MSP/2004/2), on 6 December the Meeting of States Parties held a general debate in which 28 States Parties made statements. On 7 December, one meeting was devoted to consideration of strengthening and broadening national and international institutional efforts and existing mechanisms for the surveillance, detection, diagnosis and combating of infectious diseases affecting humans, animals, and plants (agenda item 5), and on 8 December,

one meeting was devoted to consideration of enhancing international capabilities for responding to, investigating and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of disease (agenda item 6).

17. The Meeting of States Parties was preceded by a Meeting of Experts where measures relevant to the two agenda items were discussed in detail. States Parties noted that the Meeting of Experts was helpful in promoting common understanding and effective action on the agenda items. They stressed the need for undertaking activities at the national and international levels on these two agenda items in accordance with the decision adopted by consensus in the Final Document of the Fifth Review Conference of the States Parties to the Convention (BWC/CONF.V/17) in the section dealing with decisions and recommendations.

18. On the mandate to discuss, and promote common understanding and effective action on strengthening and broadening national and international institutional efforts and existing mechanisms for the surveillance, detection, diagnosis and combating of infectious diseases affecting humans, animals, and plants, the States Parties recognised that:

- a) infectious disease outbreaks can be contained and suppressed through early-detection, immediate response and co-operation and support at the national and international level;
- b) strengthening and broadening national and international surveillance, detection, diagnosis and combating of infectious disease may support the object and purpose of the Convention;
- c) the primary responsibility for surveillance, detection, diagnosis and combating of infectious diseases rests with States Parties, while the WHO, FAO and OIE have global responsibilities, within their mandates, in this regard. The respective structures, planning and activities of States Parties and the WHO, FAO and OIE should be co-ordinated with and complement one another;
- d) scientific and technological developments have the potential to significantly improve disease surveillance and response.
- 19. The States Parties consequently agreed on the value of:
 - a) supporting the existing networks of relevant international organisations for the surveillance, detection, diagnosis and combating of infectious diseases and acting to strengthen the WHO, FAO and OIE programmes, within their mandates, for the continued development and strengthening of, and research into, rapid, effective and reliable activities for the surveillance, detection, diagnosis and combating of infectious diseases, including in cases of emergencies of international concern;
 - b) improving, wherever possible, national and regional disease surveillance capabilities, and, if in a position to do so, assisting and encouraging, with the necessary agreement, other States Parties to do the same;
 - c) working to improve communication on disease surveillance, including with the WHO, FAO and OIE, and among States Parties.

20. On the mandate to discuss, and promote common understanding and effective action on enhancing international capabilities for responding to, investigating and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of disease, the States Parties recognised that:

- a) capabilities for responding to, investigating and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of disease promote the object and purpose of the Convention;
- b) States Parties' national preparedness and arrangements substantially contribute to international capabilities for responding to, investigating and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of disease;
- c) the Secretary-General's investigation mechanism, set out in A/44/561 and endorsed by the General Assembly in its resolution A/Res/45/57, represents an international institutional mechanism for investigating cases of alleged use of biological or toxin weapons.
- 21. The States Parties consequently agreed on the value of:
 - a) continuing to develop their own national capacities for response, investigation and mitigation, in cooperation with the relevant international and regional organisations, and, if in a position to do so, assisting and encouraging, with the necessary agreement, other States Parties to do the same;
 - b) the Sixth Review Conference considering, *inter alia*, the further development of current procedures for the provision of assistance, by those in a position to do so, to States Parties in cases of alleged use of biological weapons or suspicious outbreaks of disease.

22. The States Parties further considered that in pursuing the above understandings and actions, States Parties could, according to their respective circumstances, consider the considerations, lessons, perspectives, recommendations, conclusions and proposals drawn from the presentations, statements, working papers and interventions made by delegations on the topics under discussion at the Meeting of Experts, as contained in the Annex II of the Report of the Meeting of Experts (BWC/MSP/2004/MX/3), as well as the synthesis of these considerations, lessons, perspectives, recommendations, conclusions and proposals contained in BWC/MSP/2004/L.1, which are attached to this report as Annexes II and III. These annexes were not discussed or agreed upon and consequently have no status.

23. States Parties are encouraged to inform the Sixth Review Conference of, *inter alia*, any actions, measures or other steps that they may have taken on the basis of the discussions at the 2004 Meeting of Experts and of the outcome of the 2004 Meeting of States Parties in order to facilitate the Sixth Review Conference's consideration of the work undertaken at the meetings in 2004 and of a decision on any further action in accordance with paragraph 18 (e) of the decision adopted at the Fifth Review Conference (BWC/CONF.V/17).

Documentation

24. A complete list of official documents of the Meeting of States Parties, is contained in Annex I to this Report. All documents on this list are available on the United Nations Official Document System (ODS), accessible on the internet at www.ods.unog.ch.

Conclusion of the Meeting of States Parties

25. At its closing meeting on 10 December 2004, the Meeting of States Parties approved the nomination by the Western Group of Ambassador John Freeman of the United Kingdom of Great Britain and Northern Ireland as Chairman of the Meeting of Experts and Meeting of States Parties in 2005. The Meeting decided that the Meeting of Experts would be held in Geneva from 13 to 24 June 2005, and that the Meeting of States Parties would be held in Geneva from 5 to 9 December 2005, in accordance with the decision of the Fifth Review Conference.

26. At the same meeting, the Meeting of States Parties adopted its Report by consensus, as contained in document BWC/MSP/2004/CRP.1, as orally amended, to be issued as document BWC/MSP/2004/3.

Annex I

LIST OF DOCUMENTS OF THE MEETING OF STATES PARTIES

<u>Symbol</u>	Title
BWC/MSP/2004/1	Provisional Agenda
BWC/MSP/2004/2	Provisional Programme of Work for the Meeting of States Parties
BWC/MSP/2004/3	Report of the Meeting of States Parties
BWC/MSP/2004/L.1	Synthesis of Considerations, Lessons, Perspectives, Recommendations, Conclusions and Proposals Drawn from the Presentations, Statements, Working Papers and Interventions Made by Delegations on the Topics Under Discussion at the Meeting of Experts
	Prepared by the Chairman
BWC/MSP/2004/CRP.1 [English Only]	Draft Report of the Meeting of States Parties
BWC/MSP/2004/INF.1 [English Only]	The World Organization for Animal Health (OIE) Prepared by the Secretariat
BWC/MSP/2004/INF.2 [English Only]	List of States Parties to the Convention on the Prohibition of the Development, Production and Stockpiling of Bacteriological (Biological) Weapons and on Their Destruction
	Prepared by the Secretariat
BWC/MSP/2004/INF.3 and /Add.1 [English/French/Spanish Only]	List of Participants
BWC/MSP/2004/MISC.1 [English/French/Spanish Only]	Provisional List of Participants

BWC/MSP/2004/3 Annex I, Page 8

BWC/MSP/2004/MISC.2 [Spanish Only]	Capacidades Nacionales E Internacionales Para Responder, Investigar Y Mitigar Los Efectos de Casos de Supuesto de Armas Biologicas O Toxinicas O de Brotos Sospechosos de Enfermedades
	Submitted by Argentina
BWC/MSP/2004/MISC.3 [Spanish Only]	Esfuerzos Nacionales E Internacionales Para La Vigilancia, Deteccion, Diagnostico Y Combate De Las Enfermedades Infecciosas Que Afecten A Humanos, Animales Y Plantas
	Submitted by Argentina
BWC/MSP/2004/MISC.4	Paper on Investigation
	Submitted by Iran
BWC/MSP/2004/MISC.5	Paper on Surveillance
[English Only]	Submitted by Iran

Annex II

CONSIDERATIONS, LESSONS, PERSPECTIVES, RECOMMENDATIONS, CONCLUSIONS AND PROPOSALS DRAWN FROM THE PRESENTATIONS, STATEMENTS, WORKING PAPERS AND INTERVENTIONS MADE BY DELEGATIONS ON THE TOPICS UNDER DISCUSSION AT THE MEETINGOF EXPERTS

The following tables relating to agenda items 5 and 6 respectively were prepared by the Chairman.

Delegation	Date, Time / WP	Text
Iran	WP.54	The States Parties to the Convention with the assistance of relevant international institutions should strengthen the existing global networks for disease surveillance and build up their capabilities including national networks in order to respond to disease outbreaks in a timely manner particularly in humanitarian assistance to the States Parties affected by disease outbreaks.
South Africa	20/7, 12 47	States Parties should be encouraged to improve disease surveillance and response capabilities
South Africa	WP.11	States should be encouraged to improve their disease surveillance capabilities.
Nigeria	21/7, 16.30	Strengthen the capacity to conduct effective surveillance activities.
USA	20/7, 12.55	Improved national and co-operative international disease surveillance is consistent with the object and purpose of the Convention which is the elimination of biological weapons.
USA	20/7, 12.55	Participation in local, national or global disease surveillance systems represents one way of making progress on biological weapons non- proliferation through cooperation and transparency.
USA	20/7, 12.55	Strengthening surveillance should not be automatically associated with increasing the number of health conditions included in the system.
India	20/7, 16.30	Ensure national disease surveillance systems cover the whole of the country.
Australia	WP.28	Animal disease surveillance should rely on existing standards and recommendations wherever possible, rather than 'reinventing the wheel'.
Thailand	23/7, 11.25	(The) possibility of, and opportunity to, broaden (and improve) surveillance activities (includes): increasing appreciation and understanding by both the public and politicians of the effects of animal diseases on human health; increasing appreciation and understanding by both the public and politicians of the economic and social impacts of animal diseases based upon experiences derived from outbreaks of avian influenza, closer cooperation amongst countries E.g. Australia and the Asian regional reference laboratory for Foot-and-Mouth disease, or proficiency tests of Leptospirosis, Brucellosis and the USA and offers of

Agenda Item 5

		training and strengthening national programmes; (and) the provisional offer of assistance by International Organizations, e.g. FAO and OIF
South	WP 11	The States Parties acting nationally or collectively should actively
Africa		support the WHO, FAO and OIE.
USA	20/7.	States Parties are urged to support the WHO's efforts to strengthen the
	12.55	global system for disease surveillance.
FAO/OIE	19/7,	Effective global biosecurity can only be achieved if all OIE and FAO
	16.25	Member Countries conscientiously comply with the standards and
		guidelines of the OIE, effectively train stakeholders and ensure the
		availability of adequate human and material veterinary resources.
Russian	19/7,	It is necessary to separate clearly the spheres of competence and
Federation	11.04	responsibility of the WHO, OIE and FAO and the Convention, as well
		as clearly define the field of activities where joint efforts are possible
		according to the mandates of these organizations and the spheres
	NUE A (covered by the Convention.
Japan	WP.34	Early detection, made possible by surveillance such as the detection and
		monitoring besides other plant quarantine measures such as the port-
		of-entry inspection of imported plants, is crucial for plant protection
	21/7	Early detection of discass outbreaks is vital to minimize the magnitude
USA	21/7	and geographic scope of enidemics
South	WD 11	Efforts should be directed towards early detection diagnosis outbreak
Δ frica	VV I . I I	identification and response as well as preparedness, which include the
7 mica		training and allocation of resources
Australia	WP 26	The importance of speed cannot be over-emphasised and this is clearly
		an important aspect of the surveillance procedure.
USA	21/7,	Recommendation – we must be aware of the limitations of outbreak
	12.12	detection.
Canada	WP.36	A multidisciplinary approach is required to address all phases of
		consequence management and post-incident investigations.
Iran	WP.54	States Parties to the Convention with advanced surveillance systems as
		well as relevant international institutions should, particularly through
		providing training courses, assist other State Parties in strengthening
		their public health manpower capacity and support the use of
		information technology for the collection and analysis of data on
G d	20/7	infectious disease.
South	20/7,	States that are capable of doing so should help others not as capable, to
Africa	12.4/	improve disease surveillance and response capabilities.
South	WP.11	States in a position to do so should provide assistance to States Parties
Africa		that would require such assistance to establish and improve their disease
China	20/7	States parties in a position to do so (should) fund/resource
Ciiiia	15 40	improvements in disease surveillance and response in other States
	10.70	Parties less able to do so
China	20/7	Assistance including technology resources and information should be
	15 40	made available to States Parties in order to strengthen their disease
		surveillance and response capabilities.

China	WP.18	The international community should promote cooperation in disease
		surveillance Competent States Parties should provide assistances to
		other States Parties in the form of technology exchanges personnel
		training and financial support as well as international or regional
		cominers (all of which should be conducted) on the basis of equality
		seminars, (all of which should be conducted) on the basis of equality,
D 1 · · ·	a a / -	cooperation and mutual respect.
Pakistan	20/7,	Training, technical expertise and facilities should be provided to
	16.24	developing countries to upgrade their systems to international standards
		and to maintain the required criteria.
Germany	WP.8	Germany firmly believes the best way to come to grips with outbreaks
		of new and recurring diseases is (through) international cooperation, for
		in a world in which economic ties and tourism bring people into ever
		closer contact, infectious agents travel huge distances at great speed
		with no regard to state borders and create problems for not just one
		(State) but for a large number of countries.
Canada	WP.39	Cooperation amongst governments is something that must be
		mutually beneficial and reinforced over time.
Iran	WP 54	Relevant international institutions should within their (fields of)
		competence assists States Parties to strengthen national and local
		infectious disease surveillance programs and improve their early
		notification control protection and response canabilities
Iron	WD 54	Although notional authorities are responsible for infactious disease
Iran	WP.34	Although national authorities are responsible for infectious disease
		surveillance and response, it is incumbent upon the international health
		institutions to provide technical and financial support to States Parties,
		particularly developing countries, aimed at the exchange of experiences
		and capacity building for surveillance and response.
USA	20/7,	States Parties are urged to provide support to the OIE and FAO to
	12.55	improve surveillance of animal and plant diseases and food safety.
China	WP.18	States Parties should promote cooperation with the relevant
		international organizations.
China	WP.18	International Organizations may provide technological, financial and
		information assistance and support to those States Parties which have
		difficulty in implementing the relevant standards and best practices.
Pakistan	20/7	(Enhance) cooperation (between) States Parties and IGOs like WHO to
1 1110 1111	16 24	make better use of their resources and achievements
China	22/7	Strengthen cooperation with the related IGOs to confront animal
Ciiiia	12.27,	disease
T. die	12.20	uisease.
India	22/7,	Animal disease surveillance and control (could be strengthened with)
	15.55	help from international laboratories and vaccine banks, and (through
		the) dissemination of technology.
FAO/OIE	19/7,	An improvement in the quality and efficiency of Member Countries'
	16.25	Veterinary Services will guarantee vigilance in disease monitoring,
		surveillance and early warning, early detection, and will ensure a timely
		and rapid response to any emergency.

South	WP 11	Recent outbreaks of infectious diseases have shown that an outbreak can
Africa		be contained and suppressed with international support. In this regard, it
1 mileu		should be noted that the containment of a disease outbreak at the earliest
		opportunity and within the smallest geographic area requires the least
		resources and international efforts should be directed towards early
		detection diagnosis outbreak identification and response
South	WP 11	Disease outbreaks do not respect international boundaries and may
Africa		spread extremely rapidly via modern travel methods. These problems
1 mileu		can be ameliorated through international assistance and cooperation as
		well as at the regional level where regional groupings of countries
		could develop regional surveillance programmes possibly laving the
		foundation for regional response mechanisms.
Iran	WP.54	Regional cooperation on the prevention of illegal trans-boundary
		transport of domestic animals needs to be enhanced.
Australia	22/7,	Regional surveillance efforts must be continued, and where possible
	11.00	expanded, to the mutual benefit of the countries involved.
China	22/7,	Strengthen cooperation at a regional level to confront animal disease.
	12.20	
China	22/7,	Establish regional systems for the joint prevention and control of certain
	12.20	animal diseases.
Australia	WP.29	Assist regional countries to build their capacity to manage animal
		health, accurately and transparently report their animal health status, and
		perform risk analysis on animal diseases and pests.
Iran	WP.54	Cooperation between public and private sectors on the implementation
		of surveillance and the reporting of cases of communicable diseases
		under surveillance has important impacts and should be encouraged.
		Participation of medical institutions in the surveillance process should
	a a / -	also be improved.
USA	20/7,	Global disease surveillance and control can only be improved by
	12.55	individual States Parties taking action and (through) international
	0.0 /5	cooperation
USA	20/7,	(There is a) need to determine what improvements to surveillance
	12.55	systems are intended to accomplished, (such as the) early detection of
		outbreaks, (to) analyze trends, generate hypotheses (and) reduce (the)
LIC A	22/7	global threat posed by biological weapons.
USA	22/7,	Specific national animal disease surveillance should be prioritised
	12.00	(according to) their impact on productivity; the importance of the
		affected animal or product; the feasibility of control; the cost of control
Caral	21/7	or surveillance; and the public health implications.
Uzech Demul-1	21//,	It is clear that international cooperation in (the) field (of disease
Republic	15.48	surveillance) plays an important role, particularly in the exchange of
		unormation on measures taken and the latest events. This may prove
		by the public who look experience in this record
South	20/7	States Parties, nationally and collectively, should be encouraged to
A frice	20/7,	support the activities of NCO discuss surveillance and response and
Annea	12.4/	those State Derties in a position to do so should provide those NGOs
		with resources
		with resources.

Couth	WD 11	The States Darties should not engly and collectively sum or the offerts
South	WP.11	The States Parties should nationally and collectively support the efforts
Africa		of NGOs in the surveillance of and response to disease outbreaks. States
		Parties who are in a position to do so should provide assistance to such
		NGOs to improve their activities when required.
Canada	WP.36	The (Canadian) Biological Cluster can serve as a model for international
		cooperation to support crisis and consequence management of a
		biological terrorism event
Iran	WP.54	International health institutions are encouraged to establish stocks of
		drugs, vaccines and diagnostic kits at the WHO Regional Centers for
		(use in a) rapid response to unexpected events in affected countries as
		well as (to ensure the effective) management of emergency cases.
WHO	19/7,	Enhance WHO's surveys of military health programmes for use as
	15.15	potential public health resources.
WHO	19/7,	(Enhanced) harmonisation with other global players (including WTO,
	15.15	UNHCR, FAO, ICAO, EU, G7, OIE, MSF, IFRC, IATA, IMO, WTA,
		IFPMA, etc).
South	20/7.	States Parties, nationally and collectively, should be encouraged to
Africa	12.47	support the activities of WHO. OIE and FAO by developing a standing
		capacity for disease surveillance and response starting at the regional
		level.
South	WP 11	The States Parties should nationally and collectively support the WHO
Africa		FAO OIE and the relevant organisations to establish a standing capacity
1 111100		for epidemiological investigation of disease outbreaks and an immediate
		response canability
South	WP 11	The States Parties acting nationally or collectively should actively
Africa	**1.11	support the WHO FAO and OIE in the continued development and
7 milea		implementation of programmes for improving health and
		enidemiological services in individual countries with a specific
		allocation for disease surveillance and outbreak response activities
LISA	20/7	Improvements can best be accomplished through cooperation with the
USA	12 55	WHO OIF and FAO
China	20/7	State parties should support WHO EAO and OIE in their activities
Cinna	15.40	related to disease surveillance and response in order to maximise their
	15.40	efficiency with their existing resources
China	WP 18	Over the years intergovernmental organizations such as the WHO FAO
Cinna	**1.10	and OIE have done a great deal for disease surveillance. States Parties
		can further enhance cooperation with these international organizations
		and make full use of their resources and achievements
Australia	20/7	Infectious disease events are best investigated and verified by the WHO
Australia	16.03	incertous disease events are best investigated and verified by the wire.
Australia	WP 26	WHO is the ideal organization to undertake global surveillance because
rusualla	W1.20	of its role and responsibilities as the health arm within the United
		Nations family of international organizations, its responsibilities in
		compiling the International Health Degulations (IUD) and is
		coordinating the review process
Iron	WD 54	States Derties should strengthen the relationship and concretion
11.411	WP.34	batware health authorities in charge of human and cooperation
		between nearth authorities in charge of human and veterinary disease
		surveillance.

USA	22/7	Recent global events reinforce the need for increased partnerships
0.011	15.30	between human and animal health Integration of human and animal
		surveillance requires a multidisciplinary approach.
USA	20/7,	(There is a) need (for) better integration of (surveillance of) animal and
	12.55	plant diseases.
UK	22/7,	Animal disease control (should include a) well coordinated response
	10.25	capable of being scaled up.
Australia	WP.28	The animal industries (should) have a large role in policy formulation
		and implementation.
Iran	WP.54	(The) deployment of well-trained expert teams, for Rapid Health
		Assessments in emergency situations, and epidemiological
		investigations, for a rapid and timely response to outbreaks, should be
		supported by the relevant international institutions.
South	WP.11	Recent outbreaks of infectious diseases have shown that outbreaks can
Africa		be contained and suppressed with international support. In this regard, it
		should be noted that the containment of a disease outbreak at the earliest
		opportunity and within the smallest geographic area requires the least
		resources, and international efforts should be directed towards early
	20/7	detection, diagnosis, outbreak identification and response.
Australia	20/7,	Regional networks could be enhanced through further coordination and
	16.03	integration, which would enhance transparency and speed and could
T 1'	20/7	also be pursued through the wHO.
India	20/7,	Enhance bilateral and international collaboration for disease
Australia	10.30 WD 27	surveillance and response to address cross-border disease events.
Australia	WP.27	An integrated regionally based surveinance network, including a
		and should be encouraged
Australia	WP 29	Expand the network of collaborating agencies in the region
Netherlands	WP 42	It is essential in a space (such as the FLI) that appropriate arrangements
rectionalids	VVI.72	be put in place to ensure: action at source be undertaken to stem the
		spread of disease and environmental contamination: mutual assistance
		be provided for diagnosis and management of cases: access to special
		laboratory services and expertise for epidemiological investigations be
		secured; and public health responses be put into effect as well as good
		coordination and interoperability of preparedness and response plans.
Germany	WP.8	An appropriate response to these challenges (the spread of known and
		the appearance of new infectious diseases) must in our view include a
		coordinated national and international strategy to identify early on, and
		take effective action to control, outbreaks of disease and pandemics in
		particular.
Iran	WP.54	An appropriate organizational structure should be established and
		priority needs to be given to allocating the required funds for
		surveillance and response.
Iran	WP.54	Priority should be given to the management, availability and access to
		medicine, drugs, vaccines and rapid diagnostic kits for emergency cases
		at the national level (to facilitate a) prompt response to usual and
		unusual outbreaks of infectious diseases.

USA	21/7,	Countries should define the objectives for their integrated systems, the
	11.35	partners that need to be connected and the functions to be supported
		(i e the "requirements")
IIK	22/7	Recovery (from animal disease) requires the cooperation of all (of the)
UK	$\frac{2277}{10.25}$	involved outbonities and energianel nerging
	10.25	involved authorities and operational parties.
UK	23/7,	Plant pest and disease control key elements (include) organisation
	10.10	(with) clear responsibilities, (a) well coordinated response capable of
		being scaled up (and) review procedures after (an) outbreak.
Sweden	WP.17	If the resources at county level are insufficient or if the outbreak
		involves several counties national coordination is needed
Australia	WP 27	Virtual networks have a role to play in responding to outbreaks
rustrunu		especially those of unknown acticlogy and such an arrangement can be
		especially mose of unknown actiology, and such an arrangement can be
TTC 1		built on existing networks quickly and effectively.
USA	20/7,	Systems must be sustainable both politically and technologically over
	12.55	time (and should consider) disease-based and syndromic disease
		reporting, (be) used regularly, (and rely on) incentives and not penalties
		for reporting.
UK	21/7	Real-Time Symptom Surveillance (has) benefits (including the) early
	15 35	detection of deliberate and natural disease outbreaks (but represents a)
	15.55	large scale task involving multiple agencies
NT	01/7	
Nigeria	21/7,	increase the involvement of clinicians in surveillance systems.
	16.30	
Nigeria	21/7,	Strengthen the involvement of laboratory personnel in epidemiological
	16.30	surveillance.
Canada	WP.36	Broad departmental participation in laboratory clusters ensures that
		federal laboratory resources are available in most provinces and
		regions This facilitates access to specialised facilities and expertise
		and can minimise transportation of sample requirements
Canada	WD 26	Develop a laboratory eluster (taking into account) the problems
Callaua	WF.30	Develop a laboratory cluster (taking into account) the problems
		associated with a geographically dispersed population, transportation of
		samples, and the need for urgent access to federal expertise to support a
		local response.
Germany	WP.1	Close collaboration of institutions, public authorities and the industry
		is essential (for disease surveillance).
Canada	WP.36	Establishing proactive arrangements to sustain crisis phase operations
		will improve canability and surge canacity
Canada	WP 39	Cooperation amongst practitioners and communities in medical and
Culludu		public health matters is something that must be mutually beneficial and
		public health matters is something that must be mutually beneficial and
.	01/7	reinforced over time.
Nigeria	21/7,	Emphasise community participation to detect and respond to public
	16.30	health problems.
Canada	21/7,	Ensure that rural areas receive the same measure of protection and
	17.00	surveillance (as urban areas).
	WP.39	
UK	22/7	Animal disease control (should include) well established and rehearsed
	10.25	contingency plans
	10.23	Diant most and diagona control loss of the second d
UK	23/7,	Plant pest and disease control key elements (include a) well prepared
	10.10	and rehearsed contingency plan.

New	22/7,	Encourage industry operators to develop specific response plans for
Zealand	16.10	their businesses.
New	22/7,	Encourage industry operators to develop arrangements to maintain
Zealand	16.10	the capability to mount an effective response to outbreaks and technical
		experts, to provide expert technical advice on preparedness and response
		matters as required.
Iran	WP.54	(The) technological exchange of information amongst States Parties to
		the Convention should be urged for the peaceful use of genetic
		engineering, prevention, diagnosis and treatment of diseases caused by
		microbial and other biological agents or toxins, in particular for
		infectious diseases, and for other relevant fields of the biosciences and
		biotechnology.
Iran	WP.54	States Parties to the Convention are encouraged to share their
		experiences with each other on infectious disease surveillance.
China	WP.18	States Parties should: maintain, strengthen and improve the notification
		mechanism for disease outbreaks and disease prevention and control
		measures; (and) enhance consultation, coordination and information-
		sharing with each other. By promoting technological cooperation and
		personnel exchanges, States Parties can share experiences in disease
	0.0 /7	prevention and control and relevant research results.
USA	22/7,	What is important is the issue of transparency. Each country should
	12.00	make the mechanics of its surveillance system known to its neighbours
		and trading partners. Such transparency builds confidence, facilitates
		mutual risk analysis, and will promote investment and trade in the
China	22/7	Strangthen communication at a regional level to confront animal
China	12 20	disease
LISA	12.20	Usease. Systems must be sustainable both politically and technologically over
USA	12 55	time (and should consider) international data sharing balanced against
	12.33	country sovereignty
Germany	21/7	(The benefits of an) electronic reporting system for outbreaks of
Germany	10.55	infectious disease (include the ability to deal with and produce) large
		numbers of reports, standardised description of outbreaks, a minimal
		additional work load for health departments and (they are)
		appropriate for continuous collection of large numbers of outbreaks for
		international surveillance systems.
UK	WP.20	Due to the potentially vast amounts of information generated and
		required in these processes, the tools of bioinformatics are of increasing
		importance.
Netherlands	WP.42	It is essential in a space (such as the EU) that appropriate arrangements
		be put in place to ensure prompt and secure notification and exchange of
		information This in turn requires sharing of knowledge and good
		practice, laboratory facilities, equipment and products, experts and
		intervention personnel across the Member States of the EU.
Netherlands	WP.42	(There is a) need to identify relevant experts in the EU and list them in a
		directory to be shared by the authorities of the Member States.
Iran	WP.54	The WHO, FAO and OIE could play a facilitating role in the exchange
		of information on infectious disease surveillance amongst State Parties.

China	22/7, 12.20	Strengthen communication with the related IGOs to confront animal disease.
WHO	19/7, 15.15	Global alert and response operations (are) required
Canada	21/7, 17.00	Differing experiences may allow for a useful exchange of ideas in (relation to) the urban-rural divide.
Pakistan	20/7, 16.24	Awareness programmes on biosafety and biosecurity should be initiated at various levels.
Iran	WP.54	Some countries are still using manual systems for data collection, reporting, analyzing, feedback and dissemination. Reporting data through appropriate electronic systems would facilitate the integration of surveillance activities especially if the system is user-friendly and does not use multiple or different data sets that result in an extra workload or subsequent abandonment. Each State Party could try to establish computerized systems for information management (similar to the) Geographic Information System (GIS).
Iran	WP.54	Information sharing between domestic health departments and the relevant international institutions through national health authorities has to be encouraged (in such a way as to) minimise the administrative implications.
Iran	WP.54	The lack of systematic data exchange amongst laboratories at the national level causes many problems for countries. Therefore the establishment or promotion of national laboratory networking should be enhanced.
USA	21/7, 16.45	The laboratory response network formula for success (includes) secure communications (and) rapid response and reporting.
Germany	WP.2	Develop a system (for electronic outbreak reporting) to allow standardised, up-to-date and easily retrievable epidemiological data management of outbreaks on all administrative levels The (German) system could serve as a blue print for a multinational outbreak reporting system.
Nigeria	21/7, 16.30	Improve the flow of surveillance information between and within levels of health systems.
UK	WP.20	Essential to the achievement of these objectives (effective disease surveillance, detection and diagnosis) is the availability of a reliable data-handling tool.
UK	WP.20	Effective surveillance systems must be continuous, real-time and should generate alerts to provide the earliest indications of illness.
USA	21/7, 12.12	Recommendation - if high quality data already exists, or can be cheaply obtained, it is not expensive to implement a syndromic surveillance system.
USA	21/7, 12.12	Recommendation - use existing analysis and statistical algorithms for appropriate data sources.

Australia	21/7, 12.34	Surveillance is fundamental to the prevention and control of all communicable diseases. The process for reviewing and strengthening surveillance systems (could include): enhanced surveillance schemes that collate detailed data about risk factors; surveillance of syndromes and specific diseases by community doctors and less common diseases by specialist medical practitioners; surveillance of laboratory evidence of viral illness; detection of threats by surveillance for infections (in) sentinel animals; characterisation of specific organisms that are a public health threat; and measures of implementation such as vaccination to
USA	21/7, 11.35	Strategic decisions should be made regarding the development of specific tools or software at the national level, where it is either inefficient or technically difficult for local participants to build their own.
Nigeria	21/7, 16.30	Integrate multiple surveillance systems so that forms, personnel and resources can be used more effectively.
Nigeria	21/7, 16.30	Improve the use of information for decision-making.
USA	21/7, 17.55	Communication and coordination systems (could be enhanced by addressing) gaps identified by training exercises (as well as) training facilities systems integration.
USA	21/7, 17.55	System integration could be enhanced through training exercises.
UK	23/7, 10.10	Plant pest and disease control key elements (include) effective intelligence and surveillance to inform risk assessment and policy.
FAO/OIE	22/7, 16.25	The importance of healthy animals for food production and public health needs to be brought to the attention and prioritisation at the Ministry level so that a long term commitment to this public good is achieved.
India	22/7, 15.55	Animal disease surveillance and control (could be strengthened by a) national campaign on emergency diseases.
South Africa	WP.14	Information dissemination to farmers and communities is important for the recognition of clinical diseases and the early notification of disease outbreaks.
Iran	WP.54	Public awareness of health program and surveillance should be strengthened, in particular in local communities.
Iran	WP.54	In dealing with epidemics of emerging infectious diseases States Parties to the Convention could consider the instructions of the WHO, based on the principles of International Health Regulation (IHR).
Australia	WP.26	The revised IHR, once adopted, would provide a fundamental tool to support the WHO's disease surveillance activities. Moreover, the revised IHR would provide a mechanism for delivering greater transparency through greater disease reporting to the international community and provide a basis for developing national measures.
India	22/7, 15.55	Animal disease surveillance and control (could be strengthened by the) harmonization of test methodologies, (and the) enactment of statutes and the provision of directives.

USA	20/7,	Systems must be sustainable both politically and technologically over
	12.55	time (and should) enjoy a mandate of official authority.
China	20/7,	States parties should consider developing standards or best practices for
	15.40	disease surveillance.
USA	21/7,	(The) laboratory response network formula for success (includes a)
	16.45	unified operational plan, standardise protocols and tests and oversight,
		and quality laboratory results.
South	WP.14	Procedures should be in place for the rapid proper transport of samples
Africa		to the laboratory and the onwards dispatch of samples to national,
		regional or world-reference laboratories.
FAO/OIE	19/7,	The OIE standards designed to control disease and to prevent the
	16.25	introduction of pathogens should be used as a basis for the
		harmonisation of legislation. Comprehensive livestock sector
		development, which includes production, health and policy, are
		hallmarks of the FAO Animal Production and Health Division as
		mandated by the Ministries of the member countries.
FAO/OIE	19/7,	OIE and FAO Member Countries should comply with the OIE
	16.25	guidelines, standards and recommendations and EMPRES principles
		relating to surveillance and prompt notification of diseases, including
		zoonoses, of domestic livestock and wild animals.
FAO/OIE	19/7.	Many countries share a common concern about the natural occurrence
	16.25	or deliberate misuse of biological pathogens that could affect public
		health, food and animal production. Existing methods of disease
		prevention and containment, regulations, international guidelines and
		standards are being extended at both national and international levels to
		improve the ability of countries to prevent, manage and recover from
		natural, accidental or deliberate introduction of animal diseases. In this
		regard there are, at present, substantial differences amongst countries in
		the perception of the national threat from the deliberate use of
		pathogenic biological agents.
Australia	WP.29	National standards have been able to draw on international standards for
		conducting important risk assessments, implementing import policies
		and procedures, and for developing strategies for preparedness.
		prevention and response to endemic and exotic animal diseases.
China	WP.18	States Parties can discuss and formulate standard and best practices for
		disease surveillance in accordance with their national situation and on
		the basis of the relevant standards of the intergovernmental
		organizations.
USA	21/7.	Countries should identify the standards that will be used to support
	11.35	interoperability, ideally international standards for data and system
		architecture
USA	21/7	Funding awards should specify that standards will be used in systems
	11 35	developed or modified using the funding
USA	21/7	Implement an independent process to certify interoperability functions
	11 35	for systems developed by private sector or state partners

China	WP.18	With regard to disease surveillance mechanisms, laws and regulations
		are the foundation, personnel and institutions are the basis, finances and
		technologies are the guarantee. Taking into consideration specific
		national situations, States Parties may establish their own operational
		and effective disease surveillance mechanisms to strengthen their
		response capabilities to outbreaks of infectious disease.
UK	22/7,	The main requirements for effective animal disease control (include
	10.25	predetermined) responsibilities, a legal framework, intelligence and
		surveillance (capabilities), contingency plans, a suitable response
		including diagnostic mechanisms and recovery (planning).
UK	23/7,	Plant pest and disease control key elements (include) (a) legal
	10.10	framework.
New	22/7,	Encourage industry operators to develop specific response plans for
Zealand	16.10	their business.
Pakistan	20/7,	Biosafety and biosecurity standards should be formulated by each
	16.24	country, taking into account the best practices.
Germany	WP.7	Establishing a proper legal basis for the use of non-licensed drugs and
		vaccines in emergency situations will avoid the need for lengthy
		discussions on the legal status of drugs and vaccines offered for help
T	WD 54	during, as well as after, international relief operations Visite as a finite and other health are grantidere are important.
Iran	WP.54	vigilance of physicians and other health care providers are important
		in the best pessible pesition to charge and report yousland unusual
		In the dest possible position to observe and report usual and unusual
		training
	21/7	Training rainforces and improves (discess surveillance) conchilities
USA	21/7,	(including) alinical and vatoring an idential and public health
	17.55	(including) clinical and veterinary, epidemiology and public health,
South	WP 1/	Veterinarians (both state and private) as well as auxiliary animal health
Δ frica	VVI.14	personnel should be adequately trained in the clinical recognition of
mica		diseases and in the procedures for the collection and dispatching of
		samples
Germany	WP 1	It is necessary to train the attending physicians
Australia	WP 27	The laboratory network will need to be in a constant state of readiness
rustiunu		possibly requiring regular exercises with colleagues in other
		laboratories.
USA	21/7.	The laboratory response network formula for success (includes) trained
	16.45	laboratorians.
Iran	WP.54	Specially designated laboratories have an essential role in disease
		surveillance and most epidemiological surveillance systems require
		well-equipped laboratories for confirmation. In order to serve both the
		routine confirmation of clinical syndromes and rapid confirmation of the
		causative agent of outbreaks, upgrading laboratories and capacity
		building should be taken into consideration.
India	20/7,	Continue efforts to strengthen laboratory capabilities.
	16.30	
Nigeria	21/7,	Improve laboratory capacity to identify pathogens and monitor
	16.30	sensitivity.

USA	21/7.	The laboratory response network formula for success (includes)
	16.45	molecular diagnostics, rapid response and reporting, rapid response and
		reporting, safe secure laboratories, (and) coverage for human, animal,
		food and environmental specimens.
Pakistan	20/7,	Risk assessments should be carried out in all respects for pathogenic
	16.24	microorganisms.
UK	23/7,	Plant pest and disease control key elements (include a) diagnostic
	10.10	capability.
UK	WP.20	Before a test can be accepted for routine diagnostic use it must
		demonstrate repeatability, reproducibility, accuracy, precision,
		sensitivity and specificity. A suitable panel of samples, including a
		reference standard must be available to test these attributes.
FAO/OIE	19/7,	The OIE guidelines relating to the biosecurity of laboratories, based on
	16.25	expertise provided from researchers in human and animal health, are
		recommended for the safe management of biological agents used in
		those laboratories.
Iran	WP.54	The regional reference laboratories, with due consideration of the
		important role of national laboratories involved in surveillance of
		infectious diseases, should provide technical support for capacity
		building.
Australia	20/7,	(There is a) necessity for a good global and regional laboratory
	16.03	capability to support disease surveillance and response activities.
Australia	WP.27	Before initiating a (regional) laboratory network there are two
		prerequisites that must be satisfied. First of all it will be necessary to
		collate a list of all laboratories with the requisite levels of expertise
		Then, there must be solid regional commitment to effect ongoing
		resources for building capacity and supporting the network.
Iran	WP.54	The application of biotechnology and scientific research and
		development, for the prevention, surveillance, detection, diagnosis and
		treatment of diseases caused by microbial and other biological agents or
		toxin, in particular infectious diseases, should be available to States
I		Parties on a non-discriminatory basis.
South	WP.11	The States Parties, acting nationally or collectively, should actively
Africa		support the WHO, FAO and OIE in the continued development and
		implementation of: programmes that are aimed at regional initiatives for
		the development of, and research into, speedy, effective and reliable
		disease surveillance and outbreak response activities; and programmes
		that are aimed at international initiatives for the development of, and
		research into, speedy, effective and reliable disease surveillance and
C41-	WD 11	Outoreak response activities.
South	WP.11	Scientific knowledge and understanding of disease agents and infectious
Anica		processes are rar from complete and continual research is required to keep page with the natural big aggression of microorganisms
India	20/7	Develop additional capabilities to ansure early detection and response to
mara	16 30	enidemic emergencies
ΠK	21/7	Real-Time Symptom Surveillance (requires) further investment and
	1535	research to realise (its) notential benefits
ΠK	22/7	Animal disease control (should include) effective surveillance and
	10.25	recognition of the unusual
1	10.40	

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India	22/7,	Animal disease surveillance and control (could be strengthened through
	15.55	the) adoption of biotechnological tools.
Germany	WP.1	It is necessary to develop faster and (more) specific analytical
		methods.
India	20/7,	Develop additional national rapid response capabilities.
	16.30	

Agenda Item 6

Delegation	Date,	Text
_	Time /	
	WP	
USA	26/7,	Effective investigation of any suspected BW event, whether through
	10.13	national, international, cooperative, or other means is essential for
		promoting international peace and security.
USA	26/7,	It is important to promote a wide understanding that there are systems
	10.18	capable of detecting suspicious outbreaks of disease and of investigating
		incidents of alleged BW use.
USA	26/7,	Resorting to the UN Security Council under Article VI, convening a
	10.20	formal consultative meeting under procedures developed to implement
		Article V, and conducting international investigations authorised by the
		UN Secretary-General all three of these mechanisms remain viable
		and revisions to their scope or procedures are neither necessary nor
		appropriate.
Russian	WP.44	It is obviously necessary to use the potential of the UN Security Council
Federation		for investigating alleged use of biological weapons.
France	26/7,	Need (for) coordination (of a global plan to fight against biological risk
	16.18	which would includes) effective and common synergy between all BWC
		members and an overview of research programmes and their
		implementation.
Sweden	WP.16	Better coordination between different actors in different countries is
		needed to reach good and fast surveillance and control.
Netherlands	27/7,	Scientific research remains essential and requires sustained efforts
	15.35	because: (of) threats from unexpected or unexplored risks; the pace of
		scientific progress in clandestine laboratories cannot be objectively
		measured; the access of terrorist groups to training, expertise, source
		material and equipment is difficult to map; (and) the validity of risk
		inventories, priority ranking and risk assessment is time-limited.
Nigeria	28/7,	Pay close attention to zoonotic and emerging diseases and potential
) T	10.40	threat agents.
Norway	28/7,	Any cooperation on primary notification (or a) call for international
	11.55	assistance and response must be based on national mechanisms.
Norway	28/7,	Capacity must be developed within existing national structures.
	11.55	
USA	28/7,	Focus on prevention and control of disease outbreaks (as a) terrorist
	12.03	origin of (an) outbreak may not be clear (and the) preparations for
		naturally-occurring outbreaks is similar to preparations for bioterror
	20/7	attacks.
USA	28/7,	Include food-borne pathogens (in thinking as) there is a precedent for
	12.03	bioterrorist use of food contamination.
USA	28/7,	International cooperation is critical, in balance with (the) need to
	16.35	address national security concerns.
UK	29/7,	Sampling and analysis are potentially important tools in investigations
	10.30	into alleged use of BW.
Netherlands	WP.74	International attention (on this issue should include) food virology
		(including an) assessment of (the) real contribution (which) viral food

		pathology (could make).
Netherlands	WP.74	The delay in reporting and the underreporting of food borne
		infections and intoxications inhibits a quick rapid response.
India	WP.70	Surveillance is the key to early detection of disease outbreaks and for
		rapid and effective response.
India	WP.70	An effective and efficient disease surveillance system is crucial for
		detecting cases of alleged use of biological weapons or suspicious
		outbreaks of diseases.
Germany	29/7	It is time to go back to past decisions about investigations made by the
_		BWC prior to the protocol negotiations
Germany	29/7	Political questions relating to investigations should be dealt with at the
		Review Conference, as (the Meeting of Experts) should only look at
		technical measures.
Iran	29/7	An effective, universally accepted, mechanism for investigations should
		be achieved through negotiations
Brazil	29/7	A common understanding should be promoted on the role of experts in
		operating Article VI on a case by case basis and accordance (with) the
		Convention
Sweden	WP.16	With the increased perceived threat from (the) intentional release of
		pathogenic microogranisms, additional aspects of the management of
		these outbreaks will have to be taken into account. Among them is the
		need for broader competence which covers both the epidemiological
		side of an outbreak, as well as the need for some type of forensic
		knowledge with the main objectives of tracing the perpetrator.
Sweden	WP.16	It is important to remember that handling an allegation of use of (a)
		biological agents and the investigation that goes with it has two
		components (disease control and forensic investigation). (They) have to
		work both in parallel and (along) different tracks and at the same time
		(they should) be integrated to achieve a maximal output. It is highly
		likely that the first signs of an intentional release (will be) recognised by
		the public heath / animal health authorities. This means that disease
		control will be dealt with before a forensic investigation but it is of vital
		importance that both partners have knowledge about each others'
		missions and cooperate so that an optimal result is achieved.
Sweden	WP.16	The involvement of additional actors is needed in managing an
		intentional release.
China	WP.19	The legitimate and equitable rights of the investigated State Party (under
		the terms of the Convention) could be protected (and) the wasting of
		investigation resources and unnecessary losses to the investigated State
		Party (should be) avoided.
Russian	WP.44	It would be logical for a State Party to have powers to request an
Federation		investigation only in its own territory.
Australia	WP.32	(There is a) need for a whole-of-government effort to manage
		significant outbreaks of animal disease.

Japan	26/7,	Enhancing capabilities for responding to a natural or deliberate
-	10.30	epidemic of disease affecting humans (could include): promoting
		enactment of domestic legislation: strengthening medical and public
		health structures related to initial response enhancement of response
		canabilities and strengthening of collaboration between concerned
		organizations: countermeasures including point-of-entry inspections:
		(and) apparation with international organizations and other countries
	26/7	(and) cooperation with international organizations and other countries.
USA	20/7,	(The) essential plitars of prevention and protection (include).
	10.48	demonstrating political and financial support for non-proliferation and
		threat reduction programmes translates into proactive prevention; (and)
		assessing (the) vulnerability of and protecting critical infrastructure.
USA	26/7,	(The) essential pillars of surveillance and detection (include): early
	10.48	warning (including) detection and reporting systems to rapidly
		recognise and characterise dispersal of biological agents; (and)
		enhancing deterrence by improving attribution capabilities and
		improving capabilities to perform forensic analysis.
USA	26/7,	(The) essential pillars of response and recovery (include): plans for
	10.48	mass casualty care and risk communication; accelerated development of
		countermeasures; (and) strategies, guidelines and plans for
		decontamination of persons, equipment, and facilities.
Australia	26/7.	(The) six principles of emergency management (include): organisation:
	11 10	command and control coordination of support information
	11110	management: timely action: (and an) effective emergency (disaster)
		management, inner verien, (and an) encentre entergener (disaster)
USA	26/7	(The) essential nillars of threat awareness and assessment (include):
0.5/1	10.48	improving our ability to collect analyse and disseminate information:
	10.40	ansuring an integrated and focused effort to anticipate and response to
		ensuring an integrated and rocused error to anticipate and response to
Canada	26/7	The system (for regrange could include) provention (including)
Canada	20/7,	The system (for response could include) prevention (including)
	11.53	screening against entry of additional cases, national and international
		surveillance and travel advice, control and containment, isolation and
		quarantine; surveillance and investigation including laboratory testing,
		national emergency stockpiling system, guidelines for treatment and
		management; issue management and risk communication (for) intra /
		inter-governmental and other sector involvement; (and) international
		collaboration.
Canada	26/7,	Outbreak control (can include) human resources, evidence based
	12.06	decision making, blood safety and border issues, and
		quarantine/isolation/contact tracing.
Canada	26/7,	Infection control (can include) identifying critical control points,
	12.13	optimising efficiency, changing approaches to infection control.
		changing attitudes and behaviours, (and) strengthening nosocomial and
		syndromic surveillance systems.

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Canada	26/7,	(A) cross-governmental response to health issues (can include) federal
	12.15	(responses including workplace health, drug approval, transport,
		missions abroad, income support for individuals and businesses,
		customs and immigration and national defence); federal / provincial /
		territorial (responses including) new partnerships in disease control
		(clinical medicine and public health, public health and law
		enforcement) research and international cooperation (including
		information exchanges travel advisories and laboratory networks)
France	26/7	Addressing allegations of (the) use of CBRN agents (could include)
Tunee	12 33	building a laboratory network (both nationally and internationally) (the)
	12.55	transfer of technologies and protocols: training and accreditation (both
		internal and avternal): laboratory validation (both internal and avternal)
		(and) sample transport (including) international reference laboratorias
China	2017	(and) sample transport (including) international reference faboratories.
China	26/7,	Countries should make an effort to enhance outbreak response
	15.10	capabilities, including: the formulation of national laws and regulations;
		the improvement of supervision of law enforcement in public health; the
		setting up of effective organizations and agencies for disease
		surveillance and control and command; the development of contingency
		plans; increasing clinical personnel and input (resources) for emergency
		response; strengthening epidemiological / etiological research;
		increasing financial input and medicine stockpiles; and increasing
		awareness of biosaftey and medical issues, including within the general
		public, and encouraging public participation in response activities.
France	26/7,	A possible framework for a common partnership (for a global plan to
	16.18	fight biological risk includes) preparedness, crisis management and
		rehabilitation. Preparedness (should include) development of detection
		tools; development of prophylactic means (and) therapeutic means and
		immunotherapy: and (the) development of animal models for
		toxicological and pharmaceutical studies. Crisis management (should
		include) stockpiles of drugs and vaccines. stocks of environmental
		detection kits (and) stocks of diagnostic detection ticks. Rehabilitation
		(should include) development of detection tools for circumscription of
		contamination (and the) development of new means of decontamination
France	26/7	Strangthan the global anidemiological network
Tance	16.18	Strengthen the global epidennological network
Thailand	10.10	Propagadness for PWC response (aculd include the) study analysis
Thananu	20/7,	and undating of the situation of hieldsized and chemical washing for the
	17.10	and updating of the situation of biological and chemical weapons for the
		promotion (of a) rapid response, strengthening surveinance and
		responses for the early detection of a BCW outbreaks; development of
		standard operating procedures for surveillance and response;
		development (of) guidelines for the supply and allocation of necessary
		resources; capacity building (for) a response unit / team; development of
		risk communication and management guidelines; demonstration
		(rehearsal) and exercises of the response plans (and) national and
		international research and collaboration.

Netherlands	27/7,	(The) objectives (of outbreak response could include for) threat
	10.20	awareness and command and control arrangements: (a) mechanism for
		information exchange, consultation (and) coordination; (for)
		surveillance and detection: (a) canability for inventorying detection and
		identification: (for) response and recovery: medicine stocks and health
		sorving databases and an arrangement for the provision of modicines
		service databases and an analigement for the provision of medicines,
		specialists, other medical goods and infrastructure, (and for) prevention
		and protection: (the) interdiction of agent movement and critical
		infrastructure protection, including legislation, rules and guidance and
		coordination of the response (and) links with third countries and
		international organizations.
Netherlands	27/7,	Current priorities (for outbreak response, include the) development of a
	10.28	unified preparedness and response capability through general
		emergency plans and unified command and control centres; risk and
		crisis communication and management; incident investigation and
		environmental sampling, including protocols and detection; health
		resources and mutual assistance, including minimal requirements;
		exercises and emergency plan evaluation; and public health intelligence
		and threat monitoring and assessment in liaison with security and law
		enforcement services
USΔ	27/7	Develop critical public health infrastructure and core capabilities to
05/1	15 57	ansure communities and states can detect and control infectious
	13.37	diseases
	27/7	UISCASES.
USA	2///,	Enhance capabilities for early disease detection and control, receipt and
	15.57	delivery of antibiotics and vaccines, (and the) strengthening of
	a = /=	laboratory systems.
USA	27/7,	One way to (prepare public health responses to alleged use or suspicious
	16.00	outbreaks) includes the development of work plans (which could
		include) documentation indicating achievement of critical benchmarks;
		brief proposals for other objectives (including a) plan for approach,
		measurable milestones, (and) estimated budget; actionable, well-defined
		and achievable objectives; (and) measurable outcomes that (are
		indicative of) enhanced preparedness and a capacity to respond.
USA	27/7,	Examples of priority benchmarks (to help prepare public health
	16.03	responses to alleged use or suspicious outbreaks include): designation
		(of) senior public health official to serve as Executive Director(s) of
		bioterrorism programmes: Advisory Committee including (a) broad
		range of representatives (from both the public and private sectors): plans
		for the dissemination of health information: plans for the receipt and
		delivery of material from national pharmaceutical stockniles: the
		evaluation of disease reports on a 24/7 basis: accessing training poods:
		(and) answing (the existence of) working relationshing and
		canery ensuring (the existence of) working relationships and
Duggiou	20/7	Delevent meterials of the Ad Hos Creary of the DWC States D. C.
Kussian	28/7,	Relevant materials of the Ad Hoc Group of the BWC States Parties (for
Federation	10.58	example the Chapter on investigations of the draft BWC verification
		Protocol) could be used as a basis for the development of specific
		technical procedures for carrying out investigations.

Russian	WP.44	(The) consideration and adoption of necessary measures related to
Federation		unusual outbreaks of infectious diseases is the prerogative of national
		authorities. Besides national authorities, the investigation of unusual
		outbreaks of diseases can be carried out with the participation of
		international organizations (WHO, FAO, OIE, etc.).
USA	28/7,	Investigations should be timely and accurate; comprehensive and
	11.04	objective; epidemiologically sound; grounded in bioforensic analysis;
		support findings of fact and legal determinations; (and) closely
		coordinate efforts.
Russian	WP.44	To launch an investigation of (the) alleged use of biological weapons it
Federation		is important for the complaint to contain reliable information without
		which the investigation could not take place.
USA	28/7,	(Develop nationally): global biosafety standards; recognized attribution
	11.15	standards / benchmarks; systems to certify laboratory and laboratory
		staff expertise; establish investigation / collection protocols; strengthen
		global surveillance; build national epidemiological investigative teams;
		(and) build universal pathogen databases.
USA	28/7,	Community support (is one way of) dealing with secondary effects of
	12.03	disease and quarantine.
USA	28/7,	Enhanced public health infrastructure prepares us whether events are
	16.35	naturally occurring or intentional.
China	28/7,	If any State Party to the Convention has concerns about suspicious
	17.10	outbreaks of disease and asks the Security Council for an investigation,
		it should provide valid evidence and detailed data to prove that the
		relevant outbreak of disease is not natural but directly linked to
		activities prohibited under the Convention. In addition, before launching
		the investigation there should be adequate coordination and
		communication among (States Parties) so as to establish the facts.
Australia	WP.75	The Australian Manual on Emergency Management could serve as a
		model for other States Parties looking to incorporate biological weapons
		preparedness and response into existing emergency management
		programmes.
Netherlands	WP.74	International early warning systems such as RASFF/ INFOSAN (could)
		be scrutinized.
Netherlands	WP.74	Add accessibility as a CCP in HACCP system; and inspect and enforce
		this.
Netherlands	WP.74	Food Counter Terrorism calls for an integrated approach in which the
		following aspects are simultaneously addressed: recognition; detection;
		outbreak response; (and) prevention.
Iran	WP.68	The most effective universally acceptable investigation mechanism
		could only be established on the basis of a multilaterally negotiated
		legally binding instrument based on the Convention.
Russian	WP.44	Implementation of the provisions on investigations will be most
Federation		efficient only if the other elements of a verification mechanism for the
		Convention on the Prohibition of Biological Weapons are established.
		In this context, we reaffirm our position as to the necessity of
		comprehensively tackling this problem by establishing a control
		mechanism for the BWC.

Iran	WP.68	The (Secretary-General's) investigation mechanism is not appropriate (for use under the Convention) since it (was established) on the basis of the international political and security environment of the 1980s, when the Chemical Weapons Convention had not been finalized nor entered into force and the Ad Hoc Group negotiation for a Protocol strengthening the implementation of the Convention had not come into being. The text of these guidelines and technical procedures for an investigation has not been negotiated by States Parties to the Convention and therefore do not fully reflect their legitimate and immediate concerns.
Germany	29/7	(Questions over the) role of IGOs (include): are they qualified for investigations? Is this the job of Member States? It should be noted that IGOs rely on Member States to provide their capabilities (for investigations).
Cuba	29/7	States Parties should: create an adequate national medical system that can response efficiently to outbreaks of disease; contribute to the training of necessary human resources to fight outbreaks of disease; transfer technologies that contribute to the improvement of national capacities of diagnosis and investigation of outbreaks of disease; and support academic and scientific exchange between national experts dealing with biological security.
Cuba	29/7	The work of WHO, FAO, OIE etc., however important, should not be mixed up with work being done within the Convention
Brazil	29/7	The mechanisms in the Chemical Weapons Convention on how to deal with non-member States of the OPCW could be usefully studied for the Convention.
Brazil	29/7	WHO and other relevant IGOs should keep to their mandate of giving assistance in surveillance and response to States that ask for it, and not be given a role in investigations.
South Africa	WP.15	International organizations such as the WHO, OIE and FAO who are usually involved in coordinating the provision of aid to response to disease outbreaks would probably be involved in these actions (outbreak response) without regard to cause and they should continue to play the primary coordinating role under such circumstances.
Sweden	WP.16	An international structure, not coupled to ordinary (existing) national resources, that has the capacity to support the already existing national operational structures, preferably with expertise within the field of biological weapons, epidemiology, public health and legal matters, would therefore be of vital importance.
Sweden	WP.16	Problems that need to be solved (include): the format for the coordination between different national and international actors needs defining; the possibility of using national expertise in international teams investigating events in other countries; (and) the disposition of national experts in any international organisational structure with the authorisation to work in a requesting country.

China	WP.19	On the detection of a suspicious outbreak of disease, one State Party should: share relevant information with (the) others, determine the causes and control the disease in a timely and expeditious manner. If the outbreak of disease exceeds the State Party's control capability, it should request relevant assistances from World Health Organization or other international organizations. Moreover, according to the confidence building measures stipulated in the Convention, the occurrence of suspicious outbreaks of infectious disease should be
		reported to relevant bodies of the United Nations in a timely manner.
Australia	WP.31	A first step in establishing effective emergency or disaster management arrangements is to identify natural and human-made hazards which may affect the community or nation. Identified hazards must be evaluated in a structured way and appropriate responses developed, implemented, tested and reviewed. Hazard analysis will involved measuring or estimating the likelihood of an event taking place and the possible consequences of each event. Once hazard analysis programs have been put in place, arrangements to deal with the more likely - or high consequence threats can be designed using broad principles.
Australia	WP.31	Effective emergency (disaster) management must be supported by an organisation and organisational framework in which to operate. This is required to establish functional responsibilities for prevention, preparedness, response and recovery. Prevention and recovery will be the responsibility of many government departments, each having a small role. It is necessary to set up standing interdepartmental arrangements for co-ordination of effort. Preparedness and response activities are usually more homogeneous, although the need for interdepartmental and inter-agency arrangement is just as important. The emergency (disaster) management organisation should be established in legislation and interdepartmental plans.
Australia	WP.32	A whole-of-government approach in partnership with industry is essential for emergency disease preparedness, response and recovery measures following an outbreak. This approach must include exhaustive pre-planning, with clearly defined organisational roles and responsibilities and tasks allocated to teams with the appropriate skills.
Canada	WP.37	To develop sound biological counter-terrorism prevention, preparedness, and response mechanism, new models to systematically analyse the risk of bio-terrorism and assess the key knowledge and scientific gaps must be developed and employed. This systematic approach can be both the basis for the development of national programmes but equally importantly, given the international dimensions of the problem and the likely requirements for international cooperation to manage the consequence of many BW attacks, the basis for developing international collaborative programmes as well.
USA	26/7, 10.15	In situations where countries lack sufficient expertise or resources to conduct an effective national investigation, assistance could be sought from other countries or international organizations.

China	26/7,	International cooperation for surveillance and response is indispensable.
	15.10	(This should include) strengthen cooperation, information exchange and
		the sharing of results. Countries in a position to do so, should provide
		assistance to others SPs should strengthen cooperation with IGOs to
		make best use of (their) resources.
China	26/7,	IGOs (could) formulate guiding principles for (a) mechanism for
	15.10	cooperation (including) technical information and support especially for
		developing countries.
France	26/7,	Consolidation (of) international cooperation and criminalisation against
	16.18	trafficking and fraudulent use of pathogens and toxins (is desirable and
		represents a step) towards international traceability and cooperation in
		order to fight against the fraudulent use of pathogens.
France	26/7,	Develop and strengthen epidemiological networks and global alert
	16.18	systems under the aegis of WHO, OIE, FAO.
Iran	26/7,	(It is) essential (for) mitigating the effects of the alleged use (of
	17.57	biological weapons) or suspicious outbreaks of disease that: States
		Parties advanced in biotechnology and biosafety, to the fullest degree
		possible, transfer materials, equipment and biological information, as
		well as capabilities for the detection and protection against such agents.
		to developing States Parties; each States Party possessing the capability
		to do so, identify medical veterinary or other forms of assistance and
		provide training, national and international rapid response teams as well
		as detection capabilities to other States Parties; resources are made
		available through bilateral and multilateral assistance agreements
		conducted in advance ⁻ that the United Nations and the relevant IGOs
		(WHO FAO OIE) with due consideration to their standing mandates
		have a coordination role in the provision of assistance: and States
		Parties when requested to provide assistance, provide timely emergency
		assistance and that requests are considered and a response be provided
Norway	28/7	A virtual network for cooperation between laboratories already exists
1 tor way	11 55	but suffers problems related to the international transport of sample
	11.00	materials. This constitutes a veritable, but unnecessary obstacle against
		efficient cooperation and should be addressed as a priority topic
Norway	28/7	Intergovernmental organizations that contribute to preparedness
ittorway	11 55	(highlight) the primacy of national emergency response procedures
	11.55	(They suggest) cooperation between states and with inter-governmental
		organizations should start (by) addressing national preparedness both
		technical (diagnostic and medical) and organizational (disaster
		management)
USA	28/7	Medical surge canacity requires advance planning
0011	12 07	interiori surge capacity requires advance planning.
China	28/7	The relevant international organizations such as the WHO OIE FAO
Ciiiia	20/7,	should fulfil their obligations in strict compliance with their Charters
	17.10	and relevant Resolutions. They have no right to carry out investigation
		of the alleged use of biological weapons or suspicious outbroaks of
		disease. However, they can provide technological assistance to the
		latter when requested
Drazil	20/7	States Darties should consider international connection in accordance
DIaZII	29/1	states ratifies should consider international cooperation in accordance
1		

South	WP.15	It is proposed that a State Party should directly request other States
Africa		Parties and relevant international organizations, such as the WHO. OIE
		and FAO. to render assistance. In this regard States Parties should
		support the response capabilities of the WHO OIE and FAO
Iran	WP 58	The States Parties could coordinate procedures for assistance in order to
IIall	W1.30	ansure the provision of timely emergency assistance. A request for
		ensure the provision of timery emergency assistance. A request for
		assistance should be promptly considered and an appropriate response
		should be provided. In this context, pending consideration of a decision
		by the United Nations Security Council, timely emergency assistance
		could be provided by States Parties and/or appropriate International
		Organizations, upon request.
Iran	WP.58	In the event of a case of the alleged use of biological agents or (a
		suspicious) outbreak of diseases, the United Nations, with the help of
		appropriate intergovernmental organizations, such as World Health
		Organization (WHO), Office of International des Epizootic (OIE) and
		Food and Agriculture Organization (FAO) with due consideration for
		their statutory mandate, could play a coordinating role in providing
		humanitarian emergency assistance.
Iran	WP.58	States Parties are urged to provide assistance bilaterally and/or
		multilaterally through relevant agreements concluded in advance with
		other States Parties concerning emergency assistance in cases of
		outbreak of diseases
Iran	WP 58	States Parties, advanced in biotechnology and biosafety, should be
IIaII	W1.50	urged to facilitate the fullest possible transfer of equipment material
		and scientific and technological information concerning (both) means of
		detection and protection against bacterial original (biological) and toyin
		weapons to developing States Derties
Ince	WD 59	Each State Derty in a nonition to do so should identify nonsible types of
Iran	WP.38	Each State Party, in a position to do so, should identify possible types of
		medical, veterinary or other assistance available and to the extent
		possible, provide or contribute to the training and operation of national
		and/or international rapid response teams for emergency medical
		assistance, as well as, (the) necessary materials and equipment,
		especially for detection
South	WP.15	In order to enhance international capabilities to investigate such
Africa		incidents, a State Party should directly request other States Parties for
		support in handling the outbreak as well as conducting an investigation
		before the involvement of the United Nations Security Coucil
Sweden	WP.16	The establishment of an independent international support team would
		be desirable so that the consequences of an alleged use could be handled
		in an expedient manner an independent international team would add
		a higher degree of credibility to any result coming out of the extensive
		investigation if the results are questioned.
Sweden	WP.16	The missing part today is primarily a lack of structures to integrate the
		different areas (of) an investigation.
China	WP 19	States Parties in a position to do so may under the request of disease
Cinna	((1.1)	affected States Parties, provide financial and technological assistance to
		the latter. Relevant international organizations can also give full play of
		their menneyyer and technological (canabilities)
1		i men manpower and technological (capadinites).

Germany	26/7	Establishing a mechanism for the import, stockpiling and use of non-
		licensed drugs side-steps legal requirements for emergency or disaster
		relief and could be conducted by any country.
China	26/7,	Develop national measures for disease surveillance and response, in line
	15.10	with national requirements.
Romania	27/7,	Develop (outbreak response) cooperation between county public
	15.30	departments.
USA	27/7,	Coordinate medical and public health preparedness with other efforts at
	15.57	the community, State and Federal levels.
Canada	WP.66	Command and control are vital elements of any operation.
Canada	WP.66	To confront the worst-case scenario of a successful attack, adequate
		measures must be in place to deal with the occurrence, to investigate the
		nature of the incident, and if possible, to discover those responsible.
Sweden	WP.16	Better coordination between different actors in different countries is
		needed to reach good (effective) and fast surveillance and control
Sweden	WP 16	Once what could be defined as a suspicious event has been identified
		cooperation between the authorities responsible for human and
		veterinary enidemiology and forensic investigations is needed to verify
		if the outbreak is natural or man-made
Australia	WP 31	Prior to an emergency or disaster, the responsibility for overall control
Tubliullu		of the situation and for the command of each organisational element
		involved will need to be clearly specified in either legislation or the
		emergency (disaster) nlan
Australia	WP 31	The authority and responsibility for assembling resources to support any
¹ rustrana	VVI .51	counter-disaster operation will need to be specified in the (emergency)
		disaster plan
Australia	WP 31	If responses are to be timely activation of plans should be independent
¹ rustrana	VVI .51	of declarations of states of emergency or disaster. Authority to activate
		part or all of the plan should be vested in an appropriate authority
		preferably the designated controller
France	WP 55	The sim is to (accomplish): the setting up of an international network of
1 rance	W1.55	competent laboratories: the transfer of technologies and protocols
		helping to disseminate capacities globally: the training of persons
		competent to address allegations: the institution of laboratories'
		validation methods (and the consideration of the) transport of
		contaminated samples
Canada	26/7	A mend medical history recording procedures to incorporate questions
Callada	11 51	over whether there has been contact with others that have travelled
	11.51	recently
Canada	26/7	Risk perception (and) risk communication (can consider): vulnerability
Callada	20/7,	to travel advisories: public health recommendations: clear
	12.10	communication of enidemiological situation: and control measures
		essential to show control over situation
Canada	26/7	(There is a) critical role (for) communications in consequence
Canaua	12077,	management
Franco	26/7	Incorporate (a discussion of) the ownership of samples into any
	2077, 12.51	(consideration of) the development of a laboratory natwork to address
	12.31	abamical biological radiological or publicar agents
1	1	i chennear, biblogicar, radiologicar of nuclear agents.

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Japan	27/7,	When there is an outbreak it is most important to keep the public and
	10.50	press informed.
Romania	27/7,	Develop communication between central institutions (involved in
	15.30	outbreak response).
Netherlands	27/7,	Achieving interoperability and integrated systems for information and
	15.42	communication (is desirable).
USA	27/7,	Develop effective risk communication and an information dissemination
	15.57	strategy to address community needs.
USA	28/7,	Public information can build public trust and cooperation during
	12.03	emergencies.
USA	28/7,	Community support (is one way of) dealing with (the) secondary effects
	12.03	of disease and quarantine.
Netherlands	WP.74	Stimulate (a greater) public perception of food borne infections and
		intoxications (including through) the use of notifications
Netherlands	WP 74	Improvement of notifications and case / food analysis is an imperative
Netherlands	WP.74	Intensify risk communication.
Netherlands	WP 74	The existing systems of reporting outbreaks of food borne infections
		and intoxications is relatively insensitive (regarding) enidemics such as
		those caused by intentional (or) terrorist activities
Sweden	WP 16	Improved systems / communication could alert public health and
Sweden	W1.10	agriculture officials as to the existence of a notential bio attack earlier
		then (just) waiting for a report of a suspicious abustar of similar aligical
		than (Just) waiting for a report of a suspicious cluster of similar clinical
<u></u>	WD 10	cases from traditional surveillance systems.
China	WP.19	If any State Party to the Convention has concerns about a suspicious
		outbreak of disease and requests an investigation by the United Nations
		Security Council, it should provide valid evidence and detailed data to
		prove that the relevant outbreak of disease is directly linked to activities
		prohibited under the Convention rather than just (being) a natural
		outbreaks. In addition, States Parties to the Convention should have
		(had) adequate coordination and communication amongst themselves to
		iron out the facts before launching an investigation.
Australia	WP.31	Effective management of information is essential to deal successfully
		with emergencies and disasters. Communication networks will be
		needed between organisations and agencies to ensure that preparedness
		measures and response operations can be properly coordinated. There is
		also a requirement for community information, which covers
		prevention, preparedness, response and recovery. People must be aware
		of hazards they face and how to avoid them, or reduce their effects.
		They need to be aware of emergency/disaster management arrangements
		in their local area and when a threat emerges they must be warned of it
		and advised what to do prior to and post-impact.
France	WP.55	It is necessary to have a national and international network for the
		dissemination of knowledge, technologies and protocols, aimed at
		building the necessary national capacities whose results (can be)
		accented by all

Germany	26/7, 16.10	Publish consensus standards for building quarantine wards (including a) definition of minimal requirements for personnel, material and logistic competence (and) treatment and care of patients with highly contagious diseases (including) guidelines / recommendations for clinical
		diagnosis, therapy and the prevention of nosocomial transmissions (and) study planning (e.g. vaccines).
France	26/7, 16.18	Harmonise national, regional and international response plans, in particular for interoperability, in connection with WHO, OIE, FAO and according to (their) policies.
Nigeria	28/7, 10.40	Develop a Code of Conduct for scientists and other professionals handling biological materials.
USA	28/7, 11.16	Investigations must reflect the best scientific protocols.
USA	28/7, 11.16	Investigations must incorporate the best investigative methods.
USA	28/7, 11.16	Investigations must include the best law enforcement practices.
USA	28/7, 11.16	Investigations must exhibit objectivity and accuracy.
Iran	WP.69	Any international measure to enhancing capabilities in combating alleged use (of a biological weapon or a) suspicious outbreak of diseases has to be based on internationally recognized definitions.
Brazil	29/7	The term 'suspicious outbreaks' should be defined under the Convention.
China	WP.19	Strengthen national legislation and put in place (or implement) a strict legal system (to enforce it).
China	WP.19	Train professionals and (invest) more resources so as to provide adequate manpower and material resources.
China	WP.19	Enhance the construction of public health infrastructure and improve disease surveillance, prevention and control systems.
China	WP.19	Step up scientific research efforts to enhance capacity (including in) disease surveillance and prevention.
China	WP.19	Enhance public awareness of self-protection and prevention against disease.
Australia	WP.31	To be effective it (an effective emergency / disaster plan) must be written, simple, properly disseminated and regularly tested and revised.
France	WP.55	Devise and apply accreditation standards for network laboratories. This further requires establishing a real or virtual agency empowered to issue that accreditation.
France	WP.55	(Laboratory) accreditation will not be considered unless laboratory staff are thoroughly technically trained (from equipment use to maintenance, as well as in regulatory areas and in interpreting results).
France	WP.55	Validation techniques must be provided for, to maintain the competencies introduced. (These could include): internal validation by providing secure positive markers and regular testing of techniques and protocols; external validation through random quality control (testing) of samples by identified international laboratories.

France	WP.55	IATA standards for the transport of biological samples are currently in force. However, chemical, biological, radiological and nuclear hazards have a special risk value and refusals of transport are to be expected. It is essential to analyse what conditions (would need) to be introduced to ensure that (the) transport of such samples is accepted.
Germany	WP.4	While several technical platforms and methods are in principle available for (the detection of biological warfare agents and diagnosis of related disorders), more work is required to establish with greater certitude how to apply these procedures to biological warfare agents and disorders.
Netherlands	27/7, 15.35	Bio-security is activity-oriented (task specific), but where possible should allow extrapolation of results to other fields.
USA	27/7, 15.57	Lead a national bioscience research and development effort (for) civilian biodefence.
USA	28/7, 12.03	New technologies can improve outbreak emergency response.
UK	29/7, 10.30	(There are) techniques and methodologies available / under development for (the) analysis of biological warfare agents in complex samples (but it is necessary to) recognise (the) limitations (and) develop methodologies to minimise these (including the) development (of) full validated analytical procedures (and the) training and accreditation of staff.
USA	26/7, 15.21	Make use of basic microbiological techniques for the rapid detection of biological warfare agents (because it): determines (the) viability of (a) threat (which could prove) critical for public health decisions; (facilitates) epidemiological mapping; (facilitates) forensic analysis; (and involves) limited technological requirements and (so is) cost effective
Nigeria	28/7, 10.40	Enforcement of restrictions on access to biological materials.
USA	28/7, 12.03	Bioforensics can help distinguish terrorist attacks from other causes of outbreaks.
USA	28/7, 16.35	The assessment of laboratory capacity and the improvement of linkages amongst laboratories is needed.
Netherlands	WP.74	International collaboration on laboratory assays and the exchange of methodologies (is desirable and should be undertaken) without competition.

UK	29/7, 10.30	Considerations for investigations into (the) alleged use of biological warfare (include): that sample screening methods must provide protection for analysts handling unknown chemical, biological or radiological materials whilst maintaining the sample's forensic integrity (such as mechanisms to) maintain chemical, biological or radiological agents, maintain fingerprints, (and) maintain DNA evidence; that all analysts and screening must be carried out in the appropriate biological containment laboratories; (that such processes are suitable for use) on the battlefield and can be used in relation to bioterrorism; that biological mass spectrometry has great promise for the detection of agents; that it is necessary to differentiate between different strains of agents, as some would appear naturally and may appear through contamination; that large amounts of certain agents (can be found) in, for example, soil and would appear to indicate use; (and that) the environment (is taken into account) in the case of environmental samples, e.g. is the site near a vaccine facility?
UK	29/7, 10.30	(Consideration of) sampling and analysis (should include) sample types; handling, screening and accurate and reliable analysis; (and) appropriate and safe facilities and equipment.
Sweden	WP.16	A high level of reliability in testing complex samples has to be accomplished. One way to achieve this is through the establishment of a network of test-laboratories among which the responsibility is shared.
Australia	WP.31	Great care must be taken when using laboratory services to ensure that the problem is correctly diagnosed and not compounded. Sample collection must be done strictly in accordance with guidelines; a chain of custody must be established; labelling, (and) handling and shipment (transport) rules must be implemented rigorously. It is imperative that rules and regulations covering these matters are developed and incorporated into emergency plans.
France	WP.55	It is vital to have a national laboratory network making it possible to address the risk comprehensively.
France	WP.55	Samples should be transported rapidly to laboratories for confirmation.
France	WP.55	The need to develop a network of laboratories dedicated to chemical, biological, radiological and nuclear threats is obvious, but there is no structure to host them.
France	WP.55	There is a need to formulate the conditions for setting up a network (of laboratories dedicated to chemical, biological, radiological and nuclear threats) whose existence is necessary and which is scientifically feasible and without posing major difficulties.
Sweden	WP.16	With the increase in the perception of the level of threat posed by the intentional release of pathogenic microorganisms, additional aspects of the management of these outbreaks will have to be taken into account. Among them is the need for broader competence covering both the epidemiological as well as the forensic sides of an outbreak.
USA	27/7, 15.57	Train public health (personnel) and (establish a) workforce for bioterrorism preparedness and response.
USA	27/7, 15.57	Ensure community and regional health care systems are prepared for the medical and psychological needs of victims as well as the 'worried-well'.

Netherlands	WP.74	International exercises and ring tests for food borne infections and
		intoxications (are desirable).
Canada	WP.66	Training for a chemical, biological, radiological or nuclear incident is important.
South	WP.15	In order to enhance international capabilities to investigate such
Africa		incidents, efforts by law enforcement agencies to improve their
		capabilities to investigate incidents of terrorism with biological agents
		or toxins should be supported.
China	WP.19	Relevant international organizations and States Parties may hold
		workshops and seminars to explore how to mitigate and avoid the
		negative consequences of an outbreak of disease.
Australia	WP.31	It is important responsible authorities act on lessons learnt (from the)
		examination of chemical, biological or radiological incidents.
Iran	WP.68	The (Secretary-General's) investigation mechanism is not appropriate
		(for use under the Convention) since it (was established) on the basis of
		the international political and security environment of the 1980s, when
		the Chemical Weapons Convention had not been finalized nor entered
		into force and the Ad Hoc Group negotiation for a Protocol
		strengthening the implementation of the Convention had not come into
		being. The text of these guidelines and technical procedures for an
		investigation has not been negotiated by States Parties to the
		Convention and therefore do not fully reflect their legitimate and
		immediate concerns.
Iran	28/7,	The United Nations Secretary-General's investigative mechanism is not
	11.48	suitable as it was developed during the 1980's and was not negotiated
		by the States Parties to the Convention.
China	28/7,	(The Secretary-General investigative mechanism) only deals with the
	17.10	alleged use of biological and chemical weapons and has its legal basis
		from the 1925 Geneva Protocol. The mechanism was not created for the
		purpose investigating compliance with the Convention. Therefore, it
		will be incomprehensive to use this mechanism as the verification
		mechanism for the Convention.
China	28/7,	(The Secretary-General investigative mechanism) was drafted by 6
	17.10	experts from US, UK, France, USSR, Egypt and Bulgaria. There were
		no experts from Asia or Latin America. It is self evident whether or not
		the formation of this expert group enjoyed representiveness and
		geographical equality. Therefore, it is thus worth considering the
		necessity of discussing and agreeing upon an investigation procedure by
		all United Nations Member States.
Iran	28/7,	An investigative mechanism (should be) part of a multilateral,
	11.50	negotiated, legally binding instrument based upon the Convention.

South Africa	WP.15	In order to enhance international capabilities to investigate such incidents, the Secretary-General should be requested to review the
		existing procedures contained in the Secretary-General's report
		(A/44/561) on Chemical and Bacteriological (Biological) Weapons
		dated 4 October 1989 and endorsed by the General Assembly on 4
		December 1990 (A/Res/45/57). The report of the Secretary-General on
		such a review can then be provided to States Parties for their
		consideration, (and) expert consultants can be utilised for such a review.
USA	26/7,	States Parties could make a national contribution to the existing
	10.15	(Secretary-General investigative) mechanism by updating their
		contributions for the list of qualified experts and laboratories.
Germany	WP.10	(In respect of the Secretary-General's mechanism) it seems high time to
5		update the lists of experts and laboratories as well as to assess the
		procedures and guidelines in light of recent technological developments.
Germany	WP.10	(In respect of the Secretary-General's investigative mechanism) special
5		attention should be paid to the recommendations: that Member States
		may designate qualified experts to be placed on lists, which should be
		periodically updated; that Member States should make available to the
		designated experts any equipment necessary for the investigation; (and)
		that Member States may designate laboratories to be placed on lists,
		which should be periodically updated.
UK	WP.56	Recent experiences and technical developments (could be used) to
		update the existing alleged use investigation system under the auspices
		of the United Nations Secretary-General Appropriate changes could
		be incorporated in revised guidelines.
Germany	29/7	The changes in political environment since the adoption of the
_		Secretary-General's investigative mechanism does not mean the context
		is not valid.
China	28/7,	United Nations Member States who are also States Parties to the
	17.20	Convention (could) explore the possibility of establishing a brand new
		investigation mechanism by reviewing the Secretary-General
		investigation mechanism, taking into consideration current
		developments and relevant requirements of the Convention, and
		drawing upon the Protocol negotiated results on investigation
		procedures, as well as feasible experiences of the United Nations
		Expert Report.
China	28/7,	(The Secretary-General's) mechanism required the Member States of
	17.10	the United Nations to provide, on a voluntary basis, lists of qualified
		experts and a laboratory capable of conducting investigations. Specific
		requirements should be codified to ensure the representiveness and
		geographic equality amongst experts as well as laboratories.

Germany	WP.10	(In respect of the Secretary-General's investigative mechanism) special attention should be paid to the recommendations: that expert consultants chosen by the Secretary-General on the basis of their personal abilities should assist him in a consultative capacity where competence is required; (and) that expert consultants should assist the Secretary- General in organising the composition of teams of qualified experts, preparing programmes for calibration of equipment, evaluating the qualification of laboratories as well as periodically updating the procedures and methods for determining whether chemical, biological or toxin weapons use has occurred.
UK	WP.56	The list of designated personnel must be kept up to date to ensure not only that there is a wide range of relevant scientific and technical expertise available, but also that sufficient numbers of experts could be deployed at relatively short notice. States Parties might begin to identify the types of expertise that would be required, as a basis for a request from the United Nations Secretary General for a new round of nominations, if required. The report of the States Parties meeting should encourage Member States to up-date, or to make as appropriate, their nominations to the United Nations Secretary-General
South	WP.15	The Secretary-General should formally request States Parties to nominate Qualified Experts using the guidelines provided
South	WP 15	The list of areas of expertise of Experts should be reviewed
Africa	W1.15	The list of aleas of expertise of Experts should be reviewed
South	28/7,	Include law enforcement experts on the list of experts (in the Secretary-
Africa	15.52	General mechanism)
South Africa	WP.15	The list of laboratory specialisations in Appendix V (of the Secretary-General's investigative mechanism) and the information to be provided by States in designation of analytical laboratories should be reviewed.
South Africa	WP.15	The existing requirements for, and functions of, laboratories concentrate on analysis for chemical agents with very little reference to biological analyses. This section needs to be reviewed. The following issues should also be considered: development of a list of the types of analytical laboratories required; the Secretary-General may terminate the designation of a laboratory on the request of the nominating State Party or if such a laboratory falls below the require proficiency standards; in order to ensure the security and confidentiality of samples of being analysed, the Secretary-General should enter into specific agreements with designated laboratories as soon as possible after the designation of each laboratory.

UK	WP.56	A much wider range of laboratories would be needed to support a comprehensive biological warfare analytical capability covering bacteria, viruses, toxins and fungi that affect humans, animals and plants. It is worth considering whether criteria for the designation and certification of biological laboratories, including proficiency standards and procedures, could be developed by experts appointed by the United Nations Secretary-General. We should also consider security and confidentiality requirements for information held in such a system. All such developments could represent a significant strengthening of the existing rudimentary system.
Germany	29/7	In reference to the Secretary-General's investigative mechanism, it is necessary not just to have procedures but also to have insights into these procedures. It is necessary to see that procedures and technologies are updated: lists of experts should include the names of experts and an evaluation of their expertise; and laboratories should be listed and evaluated. This process should be similar to the Organization for the Prohibition of Chemical Weapons' system for laboratories.
UK	WP.56	There would at some stage be a need for a system of regular exercises in which designated experts and laboratories were tested in realistic training environments.
Germany	WP.10	(In respect of the Secretary-General's investigative mechanism) special attention should be paid to the recommendations: that Member States may designate relevant specialised training courses available to qualified experts; that the abilities and expertise of the qualified experts may be evaluated by the Secretary-General with the assistance of the expert consultants; (and) that designating laboratories may be called upon by the Secretary-General to participate in inter-laboratory calibration studies so as to establish their validity and accuracy.
UK	WP.56	Any (Secretary-General's investigative mechanism) list (of information to be provided in support of a request for an investigation) should be illustrative, but some standard approaches may be helpful. The types of information that appears in the Report's Appendix I could be reviewed and amplified where necessary to include a more specific reference to epidemiological information and any initial diagnoses by the Member State.
South Africa	WP.15	The members of the investigation team should, unless authorized by the Secretary-General, be prohibited at all times from communicating directly or indirectly on any matter related to the investigation with any person or institution other than the members of the investigation team or the Secretary-General.
South Africa	WP.15	The receiving State Party (under the Secretary-General's investigative mechanism) should provide or arrange for the amenities necessary for the (investigation) team such as transport, communications, interpretation, working space, lodging, meals and emergency medical care.
South Africa	WP.15	The Secretary-General supported by other States Parties should provide equipment that the receiving State Party cannot provide. The receiving State Party should communicate with the Secretary-General prior to the investigation to determine who would supply the equipment required.

South	WP 15	The requirement that equipment for use during the
Africa		response/investigations (under the Secretary-General's investigative
1 milea		mechanism) be provided by the State Party receiving an investigation
		should be emphasised
South	WP 15	The list of equipment in Annendix III (Secretary-General's investigative
Africa	W1.15	mechanism) should be undated
IIK	WP 56	(The Secretary General's investigative mechanism) itemises equipment
UK	W1.30	required for investigations the Organization for the Prohibition of
		Chamical Waanang has devialened an againment list for its inspections
		Chemical weapons has developed an equipment list for its inspections,
		some of which would be relevant to a Bw investigation. we might
		compare specifications and packing arrangements to see what could be
~ 1		transposed to the United Nations Secretary-General system.
South	WP.15	Financial issues such as indications of responsibilities for funding of an
Africa		investigation should be considered (under the Secretary-General's
		investigative mechanism).
UK	WP.56	An ability to move an investigation team at short notice to potentially
		remote and inaccessible areas is a key factor in any effective
		investigation of alleged use One option would be for the various
		organisations / systems (Organization for the Prohibition of Chemical
		Weapons and Provisional Technical Secretariat of the Comprehensive
		Test Ban Treaty) to pool efforts in a joint approach to this problem.
South	WP.15	The members of the investigation team should, unless authorized by the
Africa		Secretary-General, be prohibited at all times from communicating
		directly or indirectly on any matter related to the investigation with any
		person or institution other than the members of the investigation team or
		the Secretary-General.
UK	WP.56	Physical examination of victims, including the collection of biomedical
		samples must be a feature of any meaningful investigation. So too
		must a review of medical records, as recognised by the 1989 Report.
		Post-mortems and the collection, and analysis of pathological samples
		will be necessary.
South	WP.15	The model interview questionnaire in Appendix IX (of the Secretary-
Africa		General's investigative mechanism) concentrates on chemical incidents
		and should be undated to provide for biological and toxin incidents as
		well
UK	WP 56	Interviews are one of the most important techniques in any
ÖK	W1.50	investigation. The authors of the 1989 Report prenared a model
		questionnaire limited to every itnesses or victims of any alleged attack
		Other possible interviewees could be relevant, for example, national
		health medical veterinary or phytosopitory officials. A rayision of
		nearch, medical, veterinary of phytosamilory officials. A revision of
		re examined since many of its questions are mare supremiets to a
		it-examined since many of its questions are more appropriate to an
		anegeu chemical wariare rainer inan biological wariare attack. New
		questions might include the location of the victim at the time of the
		suspected attack and a description of the symptoms.

UK WP.56 Access to national epidemiological information would also play an important part in ensuring any investigation's effectiveness any revised procedures should explicitly state that one of the tasks for any investigation team would be to request access to relevant background documentation covering human, animal and plant discase outbreaks and any epidemiological enquires carried out by national bodies. South WP.15 Appendices VII and VIII (of the Secretary-General's investigative mechanism) describe sampling procedures (which) provide primarily for sampling after a chemical weapons incident. They should be reviewed with a view to provide for sampling after biological or toxins weapons incidents. South WP.15 Measures to ensure the safety and security of samples should be included (in the Secretary-General's investigative mechanism). South WP.15 Measures to ensure the chain of custody of samples (in the Secretary- General's investigation or the trohibition of Chemical Weapons could be utilised in this effort. UK WP.57 Sampling and analysis have been identified as potentially important tools in investigations into the alleged use of biological weapons, for example, under the auspices of the United Nations Secretary-General. Experience suggests that careful consideration needs to be given to the types of samples that may be taken, and the challenges they may pose to timely handling, screening and accurate and reliable analysis, and to the facilities and equipment in which such activities are undertaken. UK WP.56 It would also be worth considering the extent to which field analysis could be employed. Ident			
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South	WP.15	The Secretary-General should submit the report (from the Secretary-
Africa		General's investigative mechanism) to the United Nations Security
		Council for consideration.

Annex III

SYNTHESIS OF CONSIDERATIONS, LESSONS, PERSPECTIVES, RECOMMENDATIONS, CONCLUSIONS AND PROPOSALS DRAWN FROM THE PRESENTATIONS, STATEMENTS, WORKING PAPERS AND INTERVENTIONS MADE BY DELEGATIONS ON THE TOPICS UNDER DISCUSSION AT THE MEETING OF EXPERTS

CHAIRMAN'S PAPER

Agenda Item 5

1. General principles and objectives

Recognising that improved national and international surveillance, detection, diagnosis and combating of infectious disease will support the object and purpose of the Convention, States Parties should strengthen existing capabilities in these areas, including by:

- strengthening existing international networks, and in particular supporting the efforts of the WHO, FAO and OIE;
- building up their own national capabilities, to help ensure early detection of and rapid response to outbreaks of disease throughout their national territory;
- using existing standards, guidelines and recommendations wherever possible.

2. International cooperation and support

Recognising that disease outbreaks do not respect international boundaries, and that outbreaks can best be quickly contained and suppressed through international cooperation and support, States Parties should:

- help other States Parties to improve their disease surveillance and response capabilities, including by providing, if in a position to do so, information, training, technical expertise or financial support;
- support and encourage the WHO, FAO, OIE and other relevant international organisations in their efforts to assist States Parties to strengthen their national disease surveillance and response capabilities;
- establish or expand regional cooperation and surveillance efforts, especially for animal diseases;
- support and encourage cooperation between the public and private sectors, and the involvement of medical institutions and NGOs, in disease surveillance and response.

3. Organisation, structure and planning

Recognising that the WHO, FAO and OIE are the international organisations primarily responsible for global disease surveillance and response, and that national organisations, structures and planning should be coordinated with and complement those organisations, States Parties should:

- support and encourage the WHO, FAO and OIE to establish a standing capacity for epidemiological investigation of disease outbreaks and an immediate response capacity, including establishing stocks of drugs, vaccines and diagnostic kits in regional centres;
- develop their own standing capacity for disease surveillance and response by establishing an appropriate organisational structure with sufficient funding, based on a coordinated national strategy and involving all the relevant authorities, institutions, laboratories and partners;
- better integrate the respective surveillance programs for human, animal and plant diseases, and strengthen cooperation among the respective authorities;
- consider using symptom-based and syndromic surveillance and reporting where possible;
- increase involvement of clinicians and laboratory personnel in surveillance, and encourage community and industry participation in surveillance and response;
- develop and rehearse contingency plans, and encourage industry to do the same.

4. Communication and information management

Recognising that transparency, open communication, rapid notification and timely access to information are the keys to controlling infectious disease while maintaining trust and international trade and investment, States Parties should:

- share their experiences with disease surveillance and relevant research, and make the mechanics of their surveillance systems known to their neighbours and trading partners;
- maintain, strengthen and improve their notification systems for disease outbreaks, using electronic systems where possible, and ensuring that regional and rural areas are covered;
- improve communication with the WHO, OIE and FAO, and encourage these organisations to facilitate the exchange of information on infectious disease surveillance among States Parties;
- improve the flow of surveillance information between and within levels of national and local systems, for example by establishing a laboratory network, providing incentives rather than penalties for reporting, standardising forms and software, and providing appropriate training;
- raise public awareness of disease surveillance, and inform farmers and communities of the role they can play in early notification of disease outbreaks.

5. Standards and legal framework

Recognising the importance of coordinating and harmonising efforts to combat infectious disease, and of making the best use of limited resources, States Parties should:

- take into account the advice of the WHO, FAO and OIE in the case of outbreaks of infectious disease;
- use the international standards developed by the WHO, FAO and OIE and other relevant organisations as a basis for their own national standards and legislation;

- establish an appropriate legal framework to support the national disease surveillance and response effort and ensure that standards are enforced;
- standardise operational plans, protocols and test methodologies nationally and, where appropriate, internationally.

6. Laboratories, techniques and training

Recognising that the vigilance of health care providers and the effectiveness of laboratories are important factors in the surveillance and control of infectious disease, States Parties should:

- ensure that physicians, veterinarians, auxiliary personnel and others who are in the best position to observe and report diseases receive regular and continuous training;
- maintain and enhance a network of designated laboratories in accordance with international standards, ensuring that the laboratories are in a constant state of readiness, that procedures are tested, and that personnel are fully trained;

7. Research and development

Recognising that scientific and technological developments have the potential to significantly improve disease surveillance and response, States Parties should:

- support the WHO, FAO and OIE programmes for the continued development of, and research into, speedy, effective and reliable disease surveillance and response activities;
- continue, and where possible devote additional resources to, their own national research into additional early detection capabilities, faster and more specific analytical methods, biotechnological tools, and areas such as real-time symptom surveillance;
- share the results of such research and development as freely as possible with other States Parties.

Agenda Item 6

1. General principles and objectives

Recognising that an effective international capability for responding to, investigating and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of disease is essential for promoting international peace and security, States Parties should enhance the existing capability, including by:

- using and continuing to develop the respective procedures and mechanisms under Articles V, VI and VII of the Convention;
- focusing efforts on the early detection, prevention and control of all disease outbreaks, regardless of origin;
- developing their national capacities for response, investigation and mitigation, in cooperation with the relevant international and regional organisations;
- considering whether new international mechanisms may be needed in future.

2. International cooperation and support

Recognising that international cooperation is indispensable for effectively responding to, investigating and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of disease, States Parties should:

- help other States Parties to improve their relevant national capabilities, including by providing, if in a position to do so, information, training, technical expertise, tangible resources or financial support;
- ensure that they are prepared to promptly consider requests for emergency assistance from other States Parties;
- support and encourage the WHO, FAO, OIE and other relevant international organisations in their efforts to enhance States' Parties technical and organisational national preparedness;
- support and encourage the WHO, FAO and OIE to further develop and strengthen epidemiological networks, global alert systems, and response capabilities.

3. Organisation, structure and planning

Recognising that international capabilities depend to a large extent on States Parties' national preparedness and arrangements for responding to, investigating and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of disease, States Parties should:

- develop or improve a simple, properly disseminated and regularly tested and revised emergency response plan, covering command and control and clearly defining the responsibilities of all concerned actors;
- develop procedures for threat assessment, risk analysis and management, involving both public health and security and law enforcement authorities;
- ensure that sufficient resources for effective response, such as drug and vaccine stocks, diagnostic kits and detection equipment, are available and can be distributed quickly;
- strengthen public health infrastructure;
- ensure national capacity takes full advantage of available international and regional, resources and expertise.

4. Communication and information management

Recognising that clear communication and effective management of information are crucial for early detection, rapid response, and effective investigation and mitigation, as well as for maintaining public trust and cooperation and international confidence, States Parties should:

- develop communication systems, networks and strategies to ensure effective dissemination of information among States Parties, international organisations, domestic agencies, the media and the public in the case of an outbreak or incident;
- ensure that such systems and networks are integrated into their emergency response plans, are interoperable as far possible, and are tested;

- raise public awareness of the practicalities of responding to, investigating and mitigating incidents;
- in the case of an outbreak or incident, provide as much information as possible to the public, and provide all necessary information and evidence to any international investigation or assistance operation.

5. Standards and legal framework

Recognising the importance of coordinating and harmonising efforts to respond to, investigate and mitigate the effects of alleged use or suspicious outbreaks, and of using the best available methods, States Parties should:

- harmonise national, regional and international response plans in cooperation with the relevant international organisations, which have an important responsibility for coordination;
- ensure investigations reflect the best scientific protocols, incorporate the best investigative methods, include the best law enforcement practices and exhibit objectivity and accuracy;
- establish an appropriate legal framework to support national responses, investigations and efforts to mitigate incidents and to ensure that standards are enforced.

6. Laboratories, techniques, technology and training

Recognising the importance of laboratories and related technology in responding to, investigating and mitigating the effects of alleged use or suspicious outbreaks, States Parties should:

- strengthen international and national cooperation and linkages between relevant laboratories to improve information management, communication and reliability;
- develop standards for laboratories involved in responding to, investigating or mitigating incidents, including accreditation, training, forensic considerations and sample transport;
- ensure best practices are used for microbiology, sampling, analysis, chains of custody, labelling, handling and transport, etc, and are fully integrated into national emergency response plans;
- support efforts to research and develop relevant new technologies, including for the analysis of complex biological samples and the detection of biological and toxin warfare agents;
- conduct international training exercises for laboratory and other relevant personnel.

7. United Nations Secretary-General's investigation mechanism

Recognising that the Secretary-General's investigation mechanism, set out in A/44/561 and endorsed by the General Assembly in its resolution A/Res/45/57, represents the only existing international institutional mechanism for investigating cases of alleged use of biological or toxin weapons, States Parties authorise the Chairman to write on their behalf to the Secretary-General to request that he review and consider updating the investigation mechanism, taking into consideration, *inter alia*, the following suggestions:

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- re-evaluation and updating of the lists of experts;
- confidentiality agreements for all personnel which prohibit communicating any matter related to an investigation with any person or institution not involved in the investigation unless authorised to do so by the Secretary-General.
- consideration of the logistical and financial requirements for an investigation;
- revision of the information to be provided in support of a request for an investigation;
- re-evaluation of the guidelines and procedures relating to the victims of an alleged attack;
- re-evaluation of the guidelines and procedures for sampling and analysis;
- use of expert consultants whose composition should be specified to ensure a representative and geographic equality;
- a requirement for the final report to be transmitted to the Secretary-General, made available to the receiving state and any other involved state, and submitted to the Security Council.

The Chairman is requested to invite the Secretary-General to report to the Sixth Review Conference on his review, any updates which he recommends, and any action taken or required by the General Assembly. In addition, States Parties should:

- identify the types of expertise that would be required for a new round of nominations of experts, if required;
- update their contributions for the list of qualified experts and list of laboratories;
- designate relevant specialised training courses available to qualified experts.