

Monday 24th August 2009

## The 2009 Meeting of Experts: setting the scene

The opening of the 2009 Meeting of Experts (MX) marks the third year of the second inter-  
sessional process for the 1972 Biological and Toxin Weapons Convention (BWC/BTWC).  
The MX will be followed by a one-week Meeting of States Parties (MSP) in December.

The topic for discussion at the MX and MSP this year is 'With a view to  
enhancing international cooperation, assistance and exchange in biological sciences and  
technology for peaceful purposes, promoting capacity building in the fields of disease  
surveillance, detection, diagnosis, and containment of infectious diseases: (1) for States  
Parties in need of assistance, identifying requirements and requests for capacity  
enhancement; and (2) from States Parties in a position to do so, and international  
organizations, opportunities for providing assistance related to these fields'. This topic was  
agreed at the Sixth Review Conference for the BWC which was held at the end of 2006.  
The MSP may also discuss 'universalisation and comprehensive implementation of the  
Convention', as agreed at the Sixth Review Conference.

By the weekend before the opening of the MX, 4 background papers by the BWC  
Implementation Support Unit (ISU) and 7 Working Papers by States Parties had been made  
public in electronic form as 'Advance Versions' as submitted by the States Parties prior to  
being typeset as official documents. The advance release of papers allows for their contents  
to be considered before start of the MX. All of these papers can be found via the ISU  
website <<http://www.unog.ch/bwc>>; official documents of the meeting can also be found  
via the UN documents server <<http://www.documents.un.org>>.

The MX will include sessions for plenary statements, as well as more focused  
working sessions and discussion panels. A poster session, which was an innovation at the  
2007 MX, will also be held. As with earlier meetings, there will be a number of side events.  
While the side events have traditionally been held by non-governmental organizations  
(NGOs), there has been a rising trend for others to make use of these opportunities. At this  
MX, two of the eight announced side events are being organized by the European Union.

### **Issues of disease surveillance and containment**

It may seem paradoxical at first glance that issues of disease surveillance are being  
considered at a meeting of an international treaty that is primarily concerned with arms  
control and international security. This paradox can be explained with the understanding  
that the use of biological weapons – whether in warfare or as a terrorist or criminal act – is  
nothing more than the deliberate use of disease. With this understanding, it is apparent that  
there is much common ground in responses to outbreaks of disease, whether they stem from  
natural, deliberate or accidental (such as a laboratory incident) causes.

The 2009 Meetings are convened on a similar theme to that of the Meetings five  
years previously which discussed the topic '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'. Just as the 2009 MX is starting at a time when there are fears of the global impact of the novel influenza A (H1N1) strain [commonly, although misleadingly, referred to as 'swine flu'] the 2004 Meetings had been convened, by coincidence, in the aftermath of the SARS outbreak of the year before. The nature of SARS as a typical infectious disease that showed no respect for national boundaries helped focus thinking at the time about how natural outbreaks have an impact far greater than simply the health of the individual, but have ramifications and implications for economic security and even national security.

### **Article X issues**

While much of the technical discussion at the MX is likely to be uncontroversial of itself, the subject matter impinges on one of the areas of the Convention that has been the subject of differing interpretations and some disagreement. The BWC contains a bargain, embodied in Article X of the Convention, which is the renunciation by States Parties of hostile uses of biological materials and technologies in return for freedom to gain the benefits of the peaceful uses of them. Security, economic and geographical considerations influence how individual governments see the balance between the two sides of this bargain. Most Western states have consistently put emphasis on the security aspects of the bargain, while states seeking greater economic development see access to peaceful uses as a key justification for using precious governmental resources in their engagement with the Convention. The human cost of disease is widely recognised, but it is worth noting that there are many parts of the world in which the economic costs of infectious disease have a significant impact, not only through individuals being unable to be economically active when they are unwell, but also through the efforts of others to take care of them.

Over the years, there has been a growing recognition that non-security considerations have to be taken into account in order to encourage universal membership, national implementation and on-going active engagement with the BWC, and the adoption at the Sixth Review Conference of this year's topic for the BWC Meetings is an indication of this.

### **Recent BWPP publications**

Two new BWPP publications have been released this year. The 'BWPP Biological Weapons Reader' provides a wide range of technical and contextual information on the BWC and relevant issues. The Reader is available on CD-ROM and was made possible with the support of the Swedish Foreign Ministry. 'Building a Global Ban: Why States Have Not Joined the BWC' has built upon the work of the BWPP during the first EU Joint Action in support of the BWC and identifies activities to encourage universalization of the Convention. This report is available in hard copy and was made possible with the support of the UK Foreign and Commonwealth Office.

Both of these publications as well as the BWPP daily reports from earlier Meetings and the 2006 Review Conference are available via the BWPP website at <<http://www.bwpp.org>>.

*This is the first report from the Meeting of Experts for the Biological and Toxin Weapons Convention which is being held from 24 to 28 August 2009 in Geneva. The reports are designed to help people who are not in Geneva to follow the proceedings.*

*The reports are prepared by Richard Guthrie on behalf of the BioWeapons Prevention Project (BWPP) in co-operation with the Verification Research, Training and Information Centre (VERTIC). Copies are available via <<http://www.bwpp.org/reports.html>>.*

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Tuesday 25th August 2009

## The 2009 Meeting of Experts: the opening day

The 2009 Meeting of Experts (MX) opened on Monday morning with Ambassador Marius Grinius of Canada in the Chair. The meeting started with the routine administrative decisions such as the adoption of the agenda, the programme of work and participation in the meeting. In his opening statement, the Chair noted that, given the subject matter of the Meeting, it would benefit from greater use of open sessions. He also informed the Meeting that 20 experts from 9 countries who would otherwise have been unable to attend had been sponsored by Canada, the UK and the US and referred to this as a ‘concrete contribution’ to broadening the work of this year’s MX.

As an experiment, the ISU has placed some parts of the Meeting on a free web video streaming site – <http://www.ustream.tv/channel/bwc-meeting-of-experts-2009>.

Where copies of statements or presentations have been provided by those who delivered them, the ISU will place these on its website <http://www.unog.ch/bwc>.

### Plenary statements

After the completion of formalities, the Meeting heard plenary statements from States Parties in the following order: Cuba (on behalf of the non-aligned [NAM] states), Sweden (on behalf of the EU), Turkey, Russia, China, Indonesia, the United States, Saudi Arabia, Algeria, Senegal, the Philippines, Nigeria, Peru, Pakistan, Republic of Korea, India, Morocco, Norway, Ukraine, Chile, Iran, Kenya, Bangladesh, Yemen and Mexico.

Many statements covered common ground, such as the need for capacity building and the requirement for effective coordination between agencies, not only on the global scale, but also between relevant authorities on global, regional, national and local levels. A number of events were directly referred to, such as an Indonesian-Norwegian-ISU workshop on the BWC and global health held in Oslo in June and a workshop on BWC Article X and the World Health Organization International Health Regulations held the Friday before the MX. A number of Working Papers were summarized and some countries referred to improvements to national legislative measures. Some statements made direct reference to the positive work of NGOs in subject areas relevant to the BWC.

A number of states raised questions about transfer controls – the balance between the obligations under the BWC for each State Party to ensure it does not assist others in the acquisition of biological weapons [Article III] while at the same time to ensure ‘the fullest possible exchange of equipment, materials and scientific and technological information for the use of bacteriological (biological) agents and toxins for peaceful purposes’ [Article X.1] has long been the subject of discussion. India noted that ‘strengthened implementation of the provisions of Article III would ensure that the cooperation envisaged under Article X is not abused’. Iran suggested that a ‘standing committee’ should be established under the Convention to consider cases of transfer denials. Most, if not all, statements from NAM countries made direct reference to Article X.

Cuba noted a NAM summit statement from July that ‘stressed the importance’ of the 2009 BWC meetings and noted that the Convention ‘forms a whole’ and that ‘although it is possible to consider certain aspects separately, it is critical to deal with all of the issues interrelated to this Convention in a balanced and comprehensive manner’. The US statement was delivered by the delegation’s senior expert rather than by the Head of Delegation, as is that country’s tradition at these meetings. This gave the statement a more pragmatic tone than had sometimes been conveyed in recent years. The statement by Senegal would seem to be the first by that country at a BWC meeting and is a sign of the increasing breadth of active participation in the Convention.

### **Working presentations**

As there was some time remaining between the completion of the plenary statements and the scheduled start of the NGO statements, four presentations scheduled for Tuesday morning were brought forward. The US described the Global Disease Protection Program of the Centers for Disease Control and Prevention (CDC); Sweden (on behalf of the EU) outlined the two relevant EU Joint Actions; Turkey provided details of its new disease surveillance arrangements; and a representative from the European Centre for Disease Prevention and Control (ECDC) based in Stockholm described its work.

### **NGO statements**

As in previous BWC meetings, time was set aside during the afternoon to provide an opportunity for NGOs to address the Meeting in an informal session. Statements were given in the following order: University of Bradford; Verification Research, Training and Information Centre (VERTIC); Pax Christi International; Center for Biosecurity of the University of Pittsburgh Medical Center (UPMC); Center for Arms Control and Non Proliferation/Scientists Working Group on Biological Weapons; BioWeapons Prevention Project (BWPP); National Defence Medical College of Japan & University of Bradford; Stockholm International Peace Research Institute (SIPRI); and Center for Defense, Law & Public Policy of the Texas Tech University School of Law.

### **Side events**

There were two side events on Monday. The first was the official launch of the EU’s second Joint Action in support of the BWC. The Joint Action (officially referred to as 2008/858/CFSP) consists of four projects: ‘Promotion of the universalisation of the BTWC’; ‘Assistance to States Parties for the national implementation of the BTWC’; ‘Promotion of the submission of CBM declarations on a regular basis by States Parties to the BTWC’; and ‘Support for the BTWC Inter-Sessional Process’. Presentations were given by Dr Andreas Strub, Deputy to the Personal Representative of the High-Representative on non-proliferation of WMD, General Secretariat of the Council of the EU, Richard Lennane, Head, ISU, and Ambassador Marius Grinius of Canada. The launch was chaired by Ambassador Magnus Hellgren of Sweden. Countries wishing to be involved in the Joint Action projects were encouraged from the platform to approach the ISU.

The second side event (held shortly after the EU presentations) was dubbed ‘speed networking’ – an activity novel to the BWC that has previously had success in human rights meetings. After each minute, participants were rotated around the room to face a different person. Forty-two individuals took part and got to know new people.

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Wednesday 26th August 2009

## The Second Day: Disease surveillance arrangements

The second day of the 2009 BWC Meeting of Experts (MX) started on Tuesday morning with Ambassador Marius Grinius of Canada in the Chair. The working sessions followed two themes during the day – disease surveillance on national and international levels. It is worth noting that in the day-to-day work of the Meeting, the term ‘disease surveillance’ has been used as a shorthand way of referring to the full description in this year’s topic which reads: ‘disease surveillance, detection, diagnosis, and containment of infectious diseases’. A third theme, which had been orally agreed at the opening of the Meeting on Monday to be added to the draft Programme of Work for Tuesday – ‘Opportunities for international cooperation’ – was deferred through lack of time to Wednesday.

Where copies of statements or presentations have been provided by those who delivered them, the BWC Implementation Support Unit (ISU) will place these on its website <<http://www.unog.ch/bwc>> in due course.

### **National arrangements**

The morning’s working session started on the theme of ‘National disease surveillance arrangements’. Presentations were made in the following order: Bulgaria, India, Senegal, Chile, China, the United States, Pakistan, Italy, Algeria, Kenya, Australia, Russia, Nigeria, France and the UK. Some of these presentations related to specific Working Papers submitted by States Parties.

Many of the presentations had common threads, such as organizational architecture of surveillance arrangements, the defining of groups of diseases to deal with in a similar manner and the benefits that can exist through integration of surveillance of infectious diseases (or analogous outbreaks caused by releases of toxins) in humans, animals and plants. However, some States Parties indicated such integration needed further efforts [integration will have a themed session of its own later in the week]. A number of Some States Parties illustrated how their disease surveillance arrangements have handled the influenza A (H1N1) pandemic.

The presentations, taken as a whole, indicated that the nature of any particular national surveillance arrangement depends significantly on the context, including which diseases exist naturally in the local environment, and which diseases are considered to have the greatest potential impact. Early identification of a disease is critical in being able to limit any spread. A well defined disease arrangement will also consider what treatment and containment capabilities exist. Resource allocation issues play a considerable role in defining the scope of national disease surveillance arrangements. [In a corridor discussion, one delegate described this limitation of scope in blunt terms – minimal resources to allocate to the task means no coordinated surveillance arrangements in that country.] Some States Parties noted particular challenges they face where external assistance would lead to significant enhancements in national arrangements.

It was noted that a surveillance system can be undermined if there is no surveillance system (or an incompatible system) in a neighbouring jurisdiction. For example, Chile indicated that there was a recognition in its region that the disease surveillance arrangements should be made through UNASUR – the Union of South American Nations – to avoid such a situation. This has also led to common use of terminology and disease classifications in the region.

The United States illustrated possible uses of satellite data that can indicate climate conditions that might be conducive to the spread of diseases. Italy provided a case study of anthrax in that country. Australia highlighted that their delegation had a reduced attendance of experts as they had important roles to fulfil at home owing to the influenza A (H1N1) pandemic. Anecdotal evidence around the conference room suggests that a number of other delegations have been affected in a similar way – especially in relation to their public health experts and virologists. France described its system for disease surveillance in deployed military forces. The UK focused on disease reporting under the BWC system of Confidence-Building Measures (CBMs).

### **International arrangements**

The second theme of Tuesday's working sessions was 'International disease surveillance arrangements'. Three presentations were delivered by the World Health Organization: 'Biological Weapons Convention Supporting Health: Reducing Biological Risk by Building Capacity in Health Security' which focused on the International Health Regulations (IHR); 'From global to local - WHO Global Alert and Response Mechanisms'; and the 'Laboratory Twinning Initiative' which aims to promote laboratory capacity building under the IHR. A two-part presentation was delivered by the World Organisation for Animal Health (OIE) on 'Good Governance for Early Detection and Rapid Response' and 'Laboratory Twinning'. The Food and Agriculture Organization concluded this theme with a presentation on 'International disease surveillance arrangements: plant health'.

### **Side events**

There were two side events on Tuesday. The first, held in the morning before the formal sessions (with breakfast included) was the official launch of the EU's Joint Action in support of the World Health Organization – the second Joint Action launch of the MX. The Joint Action (officially referred to as 2008/307/CFSP) consists of two projects: 'Promotion of bio-risk reduction management through regional and national outreach'; and 'Strengthening the security and laboratory management practices against biological risks (a demonstration model for countries)'. Presentations were given by Dr Andreas Strub, (EU Council General Secretariat); Dr May Chu (WHO); and Ambassador Marius Grinius (Canada). The launch was chaired by Ambassador Magnus Hellgren (Sweden). Delegates from countries wishing to be considered for involvement in the Joint Action projects were encouraged from the platform to approach the WHO or the EU.

The second side event was a seminar held at lunchtime. Tim Trevan of the International Council for the Life Sciences (ICLS) <<http://www.iclscharter.org>> spoke on 'Confronting Biosafety and Biosecurity Challenges Nationally and Regionally' and Brooke Courtney of the Center for Biosecurity of the University of Pittsburgh Medical Center (UPMC) <<http://www.upmc-biosecurity.org/>> spoke on public health preparedness issues in the USA.

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Thursday 27th August 2009

## The Third Day: cooperation and capacity building

The third day of the 2009 Meeting of Experts (MX) of the Biological and Toxin Weapons Convention (BWC/BTWC) opened on Wednesday morning with Ambassador Marius Grinius of Canada in the Chair. The day's conference room proceedings consisted of working sessions on selected themes, however these themes ended up somewhat intermingled. As in Tuesday's working sessions, each presentation was followed by a chance for delegates to ask questions. Many of the presentations were delivered by experts. This arrangement led to some slightly surreal moments, such as when a member of the German delegation giving a presentation was asked a question from the floor by another member of the German delegation!

Wednesday also saw the first presentation by a 'Guest of the Meeting' at the end of the morning's working session. Prof. Barry Kellman of the newly-formed International Security & Biopolicy Institute spoke on 'Surveillance and Detection for Promoting Compliance with the Prohibition Against BW'. An additional activity was a private meeting convened by the EU for experts on EU delegations to draft materials to be used as part of the BWC Joint Action efforts to promote submission of returns under the BWC's Confidence-Building Measures (CBMs) arrangements.

### **Scheduling the thematic working sessions**

The morning's working session had been scheduled to start on the theme of 'Opportunities for international cooperation' which had been held over from Tuesday afternoon. As there was likely to be significant overlap with the following scheduled session on the theme of 'Specific capabilities and experiences in providing assistance for capacity-building; sources of assistance and mechanisms for promoting capacity building' it was decided to combine them into one session. Indeed, the selection of which of the two sessions to deliver any particular presentation within would have been relatively arbitrary in many cases as a number of presentations contained elements of both. The afternoon had been meant to be on the theme of 'Specific needs for capacity-building and challenges in dealing with disease' but there was a sufficient number of requests to make presentations on the morning themes that these continued into the afternoon. There was some further mixing of the scheduling of themes as some experts had to depart Geneva according to their original schedules and so certain presentations were brought forward to allow these experts to leave on time. The decision was taken to drop the discussion panel on Thursday morning on integrating responses as this subject had received substantial coverage in presentations with the hope that the time freed would enable the MX to return to its scheduled running order.

Presentations were made in the following order: Canada & Mexico, Argentina, Georgia & United States, Canada, Japan, Germany, Republic of Korea (x2), China, United Kingdom, the United States, [lunch break], Canada (x2), Georgia & United Kingdom, India, France, Japan, Germany, Kyrgyzstan & Canada, Iran, Indonesia and France.

As can be seen from the list, a number of joint presentations were made by partners cooperating on particular activities and some States Parties made more than one presentation. Owing to space limitations, the specific needs and challenges theme will be covered in tomorrow's report.

### **Cooperation opportunities and specific experiences**

The diversity of activities described in the presentations indicates there are a variety of cooperation opportunities and experiences, from the state-to-state trilateral arrangements between Canada, Mexico and the United States to lab-to-lab cooperation. There was also a perceptible difference in emphasis on particular diseases with many donor states making specific reference to illnesses such as influenza while recipients stressed the impacts of diseases such as HIV/AIDS, malaria and tuberculosis – this difference in emphasis was more striking in corridor discussions.

The human factor was considered important. Equipment is useless without adequate training for personnel to use it and turnover of staff means training has to be on-going. This is a key factor in making assistance efforts sustainable. For effective capacity building, training has to go far beyond simply technical aspects of donated equipment. For example, the collaboration between the Bernhard Nocht Institute for Tropical Medicine in Germany and the Kwame Nkrumah University of Science and Technology in Ghana to form the Kumasi Centre of Collaborative Research in Tropical Medicine includes access to Hamburg University postgraduate programmes including sponsorship for two PhD students. Gender issues were also raised, not only in relation to access to higher education, but also as the capacity of a society as a whole to contain the spread of infectious disease is reliant on the levels of education and understanding of the causes of disease by the primary providers of care within families.

Within some donor countries capacity building falls within general development aid while for others there are specific programmes in this area. Japan, for example, has a Program of Funding Research Centers for Emerging and Reemerging Infectious Diseases (PFRC). A number of assistance activities are funded from counter-terrorism budgets of donors. Some recipients are also donors. For example, India both receives and provides capacity building assistance and now has a pan-African assistance project of its own.

Limitations to capacity go beyond the financial. The Director of the Pasteur Institute of Iran stated that transfer controls meant his researchers were unable to receive routine pathogens for research, such as those that cause tetanus, mumps or diphtheria.

### **Side events**

There were two side events on Wednesday. The first was the provision of breakfast outside the main conference room by the Verification Research, Training and Information Centre (VERTIC) <<http://www.vertic.org>> an hour before the start of the working session. This provided an opportunity for informal discussions with delegates regarding VERTIC's 'National Implementing Measures' project.

The second side event was a lunchtime panel discussion, hosted by the United States on the subject of 'National Experiences and Response to H1N1'. Presentations were given by Dr Lalit Kant, Senior Deputy Director-General, Indian Council of Medical Research; Dr Ethel Palacios Zavala, Ministry of Health, Mexico; and Dr Andrea Olea, Head of the Surveillance Unit, Department of Epidemiology, Ministry of Health, Chile. The panel was chaired by José Fernández, US Department of Health and Human Services.

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Friday 28th August 2009

## The Fourth Day: needs, challenges, guests and posters

The fourth day of the 2009 Meeting of Experts (MX) opened on Thursday morning with Ambassador Marius Grinius of Canada in the Chair and started with the continuation of the Wednesday afternoon working session. In addition to the decision on Wednesday afternoon to drop the discussion panel scheduled for Thursday morning on integrating responses, a further decision was taken to drop the proposed discussion panel on public-private partnerships in order to bring the MX back to its original schedule by the end of the day. This meant moving the working session of invited speakers to later in the day; however, it was possible to complete this in time for the poster session to start as scheduled.

During the afternoon, the draft report of the Meeting was circulated as well as an initial draft of the compendium of ideas raised.

### **Specific needs and challenges**

The working session on the theme of 'Specific needs for capacity-building and challenges in dealing with disease' was completed on Thursday morning with presentations from: China, Senegal, United Kingdom, Germany, Pakistan, Philippines, and Nigeria.

Senegal called for greater resources to be provided by donors but also called for greater South-South co-operation, a call repeated by the Chair. Cuba, asking a question of Senegal, reminded the MX that it had circulated a working paper on behalf of the non-aligned states which advocated that there was a need for a formal mechanism for international co-operation under the Convention.

Pakistan noted that while it had assessed it had the basic healthcare infrastructure required to tackle the challenges associated with emerging and re-emerging diseases there remained certain needs. Some examples were provided which included guidelines and standard operating procedures for complex emergencies, availability of mobile labs for field investigations and consumables used in testing processes such as reagents.

While much of this MX has been focused on infectious disease, the Philippines, gave an example of the impact of toxins [toxins are defined as poisonous substances produced by living things] and described the challenges posed by 'Red Tide' algal blooms during which shellfish become poisonous to humans because of saxitoxin production.

Nigeria recognized that there was a lack of infrastructure, skills and capacity in the country, but that substantial progress had been made in recent years. A recently launched Field Epidemiology and Laboratory Training Program should enhance capabilities further, but without additional efforts in this area it will be difficult for the Nigerian public health system 'to meet up with the obligations of managing the current global threats of disease outbreaks and potential bioterrorism'.

### **Guest presentations**

The nature of the topic of the 2009 MX is such that the Chairman of the Meeting had decided to allow a limited number of organizations and individuals to address a special

working session set aside for the purpose on Thursday morning (which ran into the afternoon). These presenters came from a variety of academic, business or international governance backgrounds. Those who were not registered to attend the MX in any other capacity, such as being included as a member of a national delegation, attended as 'Guests of the Meeting' – a category which was used previously in 2005 and 2008.

Presentations were given by, or on behalf of: ProMED [the Programme for Monitoring Emerging Diseases], Health Map, the Global Health Security Initiative, Amyris Biotechnologies, the European Biosafety Association, the International Council of the Life Sciences, Biosafety & Biosecurity International Conferences, the International Vaccine Institute, the International Science and Technology Center, Anupa Gupte and the Robert Koch Institute, Berlin

### **Poster session**

Around 25 posters were mounted on stands outside the main conference room prepared by a number of States Parties, agencies, associations and NGOs on subjects relevant to this year's topic. For those not familiar with poster sessions at scientific conferences, the authors of each poster stand next to it and so can engage with delegates who are interested in the subject matter. This creates an opportunity for focused, yet informal, interaction which many delegates found very useful when it was tried for the first time during the 2008 MX. The poster session this year seems to have been similarly appreciated.

### **Side events**

There were three side events on Thursday. The first was held in the morning before the start of the working session by Anupa Gupte, an independent researcher, on 'Biorisks and Ecohealth Implications for BWC Implementation: Tools for Governance'.

The second was a lunchtime seminar on the subject of medical counter-measures (MCM) and was the inaugural international seminar of the International Security & Biopolicy Institute (ISBI) <<http://biopolicy.org>>. Presentations were given by: Al Shofe, Senior Vice-President of Emergent BioSolutions, Inc. (ISBI Chairman) on stockpiling issues associated with anthrax preparedness; Leslie Platt of Daylight Forensic, Inc. (ISBI Vice-President) on a proposal for global biopharmaceutical preparedness in the event of a pandemic catastrophe; and Prof. Barry Kellman, (ISBI President), outlining an '8-Step Strategy for Global MCM Stockpiling and Delivery'.

The third event, held at the end of the poster session, saw the official launch of two new BWPP publications – 'Building a Global Ban: Why States Have Not Joined the BWC' (made possible with the support of the UK Foreign and Commonwealth Office) and the 'BWPP Biological Weapons Reader' (made possible with the support of the Swedish Foreign Ministry). Prof. Marie Chevrier of the Center for Arms Control and Non Proliferation/Scientists Working Group on Biological Weapons (Chair of the BWPP Board) introduced the publications and brief comments were given by Jo Adamson of the UK delegation and Kathryn McLaughlin (former BWPP Acting Director).

***Please note:*** *there will be an additional MX report covering the final day of the Meeting.*

*This will be published early next week and will be available via:*

**<<http://www.bwpp.org/reports.html>>.**

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Monday 31st August 2009

## The Final Day: closure and reflections

The final day of the 2009 Meeting of Experts (MX) for the 1972 Biological and Toxin Weapons Convention (BWC/BTWC) opened on Friday morning with Ambassador Marius Grinius of Canada in the Chair for a short formal session to wrap up the week's proceedings. A report of the Meeting was adopted (with the same text that had been circulated as a draft on Thursday afternoon) which is essentially procedural – noting the decision of the Review Conference to hold the MX, how the Meeting was organized, which States Parties and observers attended, and a brief outline of the work of the Meeting. Appended to this report is a compilation of 'Considerations, Lessons, Perspectives, Recommendations, Conclusions and Proposals Drawn From the Presentations, Statements, Working Papers and Interventions on the Topics Under Discussion at the Meeting'. The format of the report and of the compilation follow the pattern of earlier MXs. The intention of the compilation is to summarize the ideas raised at the Meeting in order to help officials from States Parties consider which might be relevant in their own circumstances. It took roughly 40 minutes to complete the formal proceedings of the day.

### **Universalization**

Just before the adoption of the report from the MX, the Chairman gave a verbal report on progress towards universalization of the Convention. The Chairman regretted he was unable to report that any state had joined the BWC since the 2008 Meeting of States Parties (MSP). The accession of the Cook Islands announced on the last day of the MSP had brought the total of States Parties to 163. [*Note:* at the time of the 2006 Review Conference decision on 'Promotion of Universalization' the BWC had 155 States Parties.] However, Amb. Grinius noted that there had been considerable efforts, particularly in relation to African and Pacific states and that it 'seems reasonable to expect these efforts will result in further accessions'. The Chairman also noted the BWPP universalization report launched the evening before [available via <http://www.bwpp.org/publications.html>]. The Chairman's formal report on universalization will be given at the MSP in December.

### **Closing statements and remarks**

Following adoption of the report, Iran made its usual statement noting that consensus on the report should not imply that Iran recognised the state of Israel (mentioned as an observer). Six further States Parties gave brief closing statements – Sweden (for the European Union), Ukraine, Cuba (for the Non-Aligned), China, Australia (for the Western group), and Slovakia (for the Eastern group). Each of these followed the traditional format of expressing the thanks for the efforts of the Chairman and of the other States Parties. Cuba took the opportunity to emphasise the earlier non-aligned call for a formal mechanism for Article X implementation. The Chairman gave his own closing remarks, describing the Meeting as 'focused, positive and constructive' and noting 'impressively broad' participation by 95 States Parties. An estimated 190 experts (out of a total of around 500 delegates) had flown

in. He also commented that there had been an increase in ‘comfort level’ for delegates dealing with BWC Meetings and noted in particular that some countries had been forthright about specific needs and requirements to improve their systems of disease surveillance.

### **Side events**

There was one side event on Friday, a breakfast seminar on the subject of smallpox held by the International Security & Biopolicy Institute (ISBI) <<http://biopolicy.org>>. Presentations were given by Robert Drillen, Director of Research, INSERM, Strasbourg on ‘Could chemical synthesis and genetic engineering of the smallpox virus enable recreation?’ and Prof. Barry Kellman, (ISBI President), on ‘Chemical synthesis of smallpox’.

### **Reflections**

A conscious effort is taken in writing these daily summaries to report what has taken place and not give opinion. However, there are many times that the question is raised – ‘so what do you think about what happened?’ The following are some personal reflections that do not necessarily represent anyone’s views other than the author’s own.

As the Chairman noted, the comfort level of delegates has certainly increased, leading to more relaxed working sessions and honest discussion. One of the oddities of diplomacy is that everything is normally phrased in particular terms – there aren’t ‘problems’ but ‘challenges’, for example. This MX used much more practical language as befits the topic under discussion.

This was the second MX to have been completely open, following the precedent of 2008, with none of the sessions held behind closed doors. This openness is appropriate for the exchange of ideas that are needed to deal with new problems (or problems not previously identified) which require new solutions and new approaches.

While there have been no additional ratifications or accessions to the BWC so far in 2009, signs remain positive. For example, just in front of where the NGOs sat in the back of the conference room was the allocated seat for Tanzania which had sent two senior figures from their capital. That a country in the process of preparing its ratification should assign personnel in this fashion shows a commitment to the Convention

A concern raised over many years has been that the threat from deliberate disease should be discussed in careful terms, lest the impression is given to potential abusers of biological materials that the possibilities are easier than had been imagined. It is notable that the discussion amongst experts has been framed much more carefully in recent years, although, on occasion, some quantitative data is used outside of its original context. The presentation by Emergent BioSolutions Inc. (an anthrax vaccine manufacturer) at a side event stated that the casualty effects of a one megaton nuclear weapon can be reproduced with only 6.5 kg of anthrax, without citing a specific source. However, this figure derives from a 1995 paper that regarded this number as a *minimum* requirement in near perfect conditions with high levels of technical expertise to achieve 100% aerosolization in use against a totally unprotected population, noting that urban populations would gain some protection from the buildings they were in, thus requiring more material to be used. Indeed, the paper – Karl Lowe, Graham Pearson and Victor Utgoff, ‘Potential Values of a Simple BW Protective Mask’, Institute for Defense Analyses Paper P-3077, September 1995 – illustrated that with basic protective measures the quantity of anthrax required to have the same casualty effects as a one megaton nuclear weapon would be raised to some 65,000 kg. The irony of the use of the minimum estimate from the 1995 paper is that these basic protective measures do not include vaccination.

*This is the sixth and final report from the Meeting of Experts for the Biological and Toxin Weapons Convention which was held from 24 to 28 August 2009 in Geneva. The reports are designed to help people who were not in Geneva to follow the proceedings.*

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