REPORT OF THE MEETING OF STATES PARTIES

Introduction

1. The Final Document of the Sixth Review Conference of the States Parties to the Convention on the Prohibition of the Development, Production and Stockpiling of Bacteriological (Biological) and Toxin Weapons and on their Destruction (BWC/CONF.VI/6), in the Decisions and Recommendations section, contained the following decision:

“The Conference decides:

(a) To hold four annual meetings of the States Parties of one week duration each year commencing in 2007, prior to the Seventh Review Conference, to be held not later than the end of 2011, to discuss, and promote common understanding and effective action on:

(i) Ways and means to enhance national implementation, including enforcement of national legislation, strengthening of national institutions and coordination among national law enforcement institutions;

(ii) Regional and sub-regional cooperation on implementation of the Convention;

(iii) National, regional and international measures to improve biosafety and biosecurity, including laboratory safety and security of pathogens and toxins;

(iv) Oversight, education, awareness raising and adoption and/or development of codes of conduct with the aim of preventing misuse in the context of advances in bio-science and bio-technology research with the potential of use for purposes prohibited by the Convention;

(v) 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;

(vi) Provision of assistance and coordination with relevant organizations upon request by any State Party in the case of alleged use of biological or toxin weapons, including improving national capabilities for disease surveillance, detection and diagnosis and public health systems.

(b) Each meeting of the States Parties will be prepared by a one week meeting 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 2007; items (iii) and (iv) in 2008; item (v) in 2009; and item (vi) in 2010. The first meeting will be chaired by a representative of the Group of the Non-Aligned Movement and Other States, the second by a representative of the Eastern European Group, the third by a representative of the Western Group, and the fourth by a representative of the Group of the Non-Aligned Movement and Other States.

(c) The meetings of experts will prepare factual reports describing their work;

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

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

2. The 2008 Meeting of States Parties decided that the 2009 Meeting of Experts would be held in Geneva from 24 to 28 August 2009, and that the 2009 Meeting of States Parties would be held in Geneva from 7 to 11 December 2009, in accordance with the decision of the Sixth Review Conference.

3. By resolution 63/88, adopted without a vote on 2 December 2008, the General Assembly, inter alia, requested the 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 assistance to the annual meetings of the States parties and the meetings of experts.

Organization of the Meeting of States Parties

5. In accordance with the decision of the 2008 Meeting of States Parties, the 2009 Meeting of States Parties was convened at the Palais des Nations in Geneva from 7 to 11 December 2009, under the Chairmanship of Ambassador Marius Grinius of Canada.

6. At its first meeting, on 7 December 2009, the Meeting of States Parties adopted its agenda (BWC/MSP/2009/1) and programme of work (BWC/MSP/2009/3) as proposed by the Chairman. The Chairman also drew the attention of delegations to two reports: the report of the Implementation Support Unit (BWC/MSP/2009/2) and a report on universalization activities prepared by the Chairman (BWC/MSP/2009/4).

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 Sixth Review Conference, as contained in Annex II of the Final Document of the Review Conference (BWC/CONF.VI/6).

8. At the same meeting, the Meeting of States Parties approved the nomination by the Group of the Non-aligned Movement and Other States of Ambassador Carlos Portales of Chile to be Chairman of the Meeting of Experts and Meeting of States Parties in 2010.

9. Mr. Richard Lennane, Head of the Implementation Support Unit, served as Secretary of the Meeting of States Parties. Mr. Piers Millett, Political Affairs Officer, Implementation Support Unit, served as Deputy Secretary. Ms. Ngoc Phuong Huynh, Associate Political Affairs Officer, Implementation Support Unit, served in the Secretariat.

Participation at the Meeting of States Parties

10. One hundred States Parties to the Convention participated in the Meeting of States Parties as follows: Algeria, Argentina, Armenia, Australia, Austria, Azerbaijan, Bahrain, Bangladesh, Belarus, Belgium, Benin, Bosnia and Herzegovina, Brazil, Bulgaria, Burkina Faso, Canada, Chile, China, Croatia, Cuba, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Georgia, Germany, Ghana, Greece, Guatemala, Holy See, Hungary, India, Indonesia, Iran (Islamic Republic of), Iraq, Ireland, Italy, Japan, Jordan, Kenya, Kuwait, Kyrgyzstan, Latvia, Lebanon, Libyan Arab Jamahiriya, Liechtenstein, Lithuania, Luxembourg, Madagascar, Malaysia, Malta, Mauritius, Mexico, Monaco, Mongolia, Montenegro, Morocco, Netherlands, New Zealand, Niger, Nigeria, Norway, Pakistan, Panama, Peru, Philippines, Poland, Portugal, Qatar, Republic of Korea, Republic of Moldova, Romania, Russian Federation, Rwanda, Saudi Arabia, Senegal, Serbia, Singapore, Slovakia, Slovenia, South Africa, Spain, Sri Lanka, Sweden, Switzerland, Thailand, The former Yugoslav Republic of Macedonia, Tunisia, Turkey, Uganda, Ukraine, United Arab Emirates, United Kingdom of Great Britain and Northern Ireland, United States of America, Uruguay, Venezuela (Bolivarian Republic of), Viet Nam, Yemen.

11. In addition, six 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: Côte d’Ivoire, Egypt, Haiti, Myanmar, Syrian Arab Republic, and United Republic of Tanzania.

12. Two states, Israel and Angola, neither parties nor signatories to the Convention, participated in the Meeting of States Parties as observers, in accordance with rule 44, paragraph 2 (a).

13. The United Nations, including the Office for Disarmament Affairs, the United Nations Institute for Disarmament Research (UNIDIR) and the United Nations Interregional Crime and Justice Research Institute (UNICRI), attended the Meeting of States Parties in accordance with rule 44, paragraph 3.

14. The European Union, the International Committee of the Red Cross, the Organisation for the Prohibition of Chemical Weapons and the World Health Organization were granted observer status to participate in the Meeting of States Parties in accordance with rule 44, paragraph 4.

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


Work of the Meeting of States Parties

17. In accordance with the programme of work (BWC/MSP/2009/3), the Meeting of States Parties held a general debate in which the following 29 States Parties made statements: Algeria, Argentina, Australia (on behalf of JACKSNZ1), Australia (in national capacity), Bangladesh, Chile, China, Cuba (on behalf of the Group of the Non-aligned Movement and Other States), Germany, India, Iran (Islamic Republic of), Japan, Kenya, Madagascar, Malaysia, Mexico, Morocco, Nigeria, Norway, Pakistan, Republic of Korea, Russian Federation, Saudi Arabia, Senegal, South Africa, Sweden (on behalf of the European Union), Switzerland, Turkey, and the United States of America.

18. Between 8 and 10 December, the Meeting of States Parties held a number of working sessions devoted to consideration of, 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 (agenda item 6). On 10 December, one working session was devoted to reports from the Chairman and States Parties on universalization activities (agenda item 7) and the report of the Implementation Support Unit (agenda item 8).

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1 An informal grouping comprising Japan, Australia, Canada, Republic of Korea, Switzerland, Norway and New Zealand.
19. In the course of its work, the Meeting of States Parties was able to draw on a number of working papers submitted by States Parties, as well as on statements and presentations made by States Parties, international organizations and the Implementation Support Unit, which were circulated in the Meeting.

20. Recognizing the fundamental importance of enhancing international cooperation, assistance and exchange in biological sciences and technology for peaceful purposes, in the interests of achieving comprehensive implementation of the Convention, States Parties agreed on the value of working together to promote capacity building in the fields of disease surveillance, detection, diagnosis, and containment of infectious diseases. States Parties affirmed that building such capacity would directly support the objectives of the Convention.

21. In this connection, States Parties recalled that the Sixth Review Conference stressed the importance of implementation of Article X and recalled that the States Parties have a legal obligation to facilitate and have the right to participate in the fullest possible exchange of equipment, materials and scientific and technological information for the use of bacteriological (biological) agents and toxins for peaceful purposes and not to hamper the economic and technological development of States Parties. States Parties recognized that the Convention is a useful and appropriate platform for collaboration and that through the full implementation of the Convention, including Article X, States Parties can complement the activities of other forums and promote maximum cooperation and assistance in areas concerning disease surveillance, detection, diagnosis, and containment of infectious diseases.

22. States Parties agreed that although disease surveillance, mitigation and response are primarily national responsibilities, infectious diseases know no geographic boundaries and neither should efforts to combat them. States Parties noted that international organizations, such as the FAO, IPPC, OIE and WHO, within their respective mandates, have a fundamental role to play in addressing disease and recognized the importance of these intergovernmental organizations in supporting and financing relevant national activities. States Parties recognized the value of enhancing the capabilities and coordinating role of these organizations.

23. States Parties recognized the importance of developing effective infrastructure for disease surveillance, detection, diagnosis and containment.

(i) Such infrastructure could include:

(a) Surveillance systems which are sensitive, specific, representative, timely, simple, flexible and acceptable, and which have capabilities for continuously collecting and analyzing data from various sources;

(b) Capacity for rapid detection and identification of pathogens, including improved access to high quality diagnostics and expertise;

(c) Primary health care services and veterinary and phytosanitary services, such as laboratory systems and disease management and treatment capacity;
(d) Emergency and epidemiological response capabilities;

(e) Communication capabilities, including for public information and professional collaboration;

(f) An appropriate national regulatory framework, including available resources for its implementation and surveillance activities;

(g) Facilitation of treatment of diseases, including availability of diagnostic equipment, vaccines and medicines.

(ii) States Parties noted that developing such infrastructure could also contribute to the fulfilment of their other respective international obligations and agreements, such as the revised International Health Regulations (2005).

24. Recognizing that infrastructure, equipment and technology is of little use if there are not appropriately trained individuals to use it, States Parties agreed on the value of developing human resources for disease surveillance, detection, diagnosis and containment, including by:

(i) Making use of workshops, training courses and conferences at the national, regional and international levels;

(ii) Ensuring that training materials are available in native languages;

(iii) Taking advantage of both computer-based and hands-on training;

(iv) Fostering an interdisciplinary approach to infectious disease problems, incorporating traditional biomedical science with economics, social sciences, demographics and agricultural science;

(v) Engaging with all relevant human resources, including technicians, managers, policy makers, health professionals and academia;

(vi) Identifying ways to reduce "brain-drain";

(vii) Providing the political leadership needed to ensure training and personnel issues are given adequate attention at the national level; and

(viii) If in a position to do so, providing sponsorship for training, exchange visits, and travel to expert meetings.

25. Recognizing the opportunities for building capacity through sharing practices and procedures, States Parties agreed on the value of implementing standard operating procedures, taking into account their national needs and circumstances, including through:
(i) Using standard operating procedures to enhance sustainability, improve trust, build confidence, contribute to quality control, and foster the highest standards of professional performance;

(ii) Working at the national level with ministries of health and agriculture and other relevant agencies to develop relevant legislation, standards and guidelines;

(iii) Developing and using best practices for surveillance, management, laboratory practice, manufacturing, safety, security, diagnostics, trade in animals and products, as well as associated procedures;

(iv) Strengthening international protocols for the rapid sharing of information; and

(v) Using case studies of biosecurity considerations, risk assessment and the transportation of dangerous goods and disease management to improve existing practices and procedures.

26. States Parties agreed on the value of ensuring the sustainability of capacity building in the fields of disease surveillance, detection, diagnosis and containment, including through: pooling resources; making funding processes longer-term and more predictable (including through the use of mutually-agreed exit strategies); ensuring ownership by the receiving country and the involvement of all relevant stakeholders; addressing needs for day-to-day maintenance of core health capacity; tailoring activities to meet the differing circumstances of each recipient state; taking full advantage of existing resources, networks and institutional arrangements; utilising twinning programmes to strengthen networks of reference laboratories; and using collaborative projects to develop biosafety, biosecurity, basic science, tools and core technologies thereby increasing motivation and support.

27. States Parties agreed on the value of improving integration of capacity-building activities so that scarce resources are used effectively to combat disease irrespective of its cause, including through: ensuring effective communication and coordination among human, animal and plant health sectors; using an inter-disciplinary, all-hazards approach drawing on all relevant disciplines; and improving how government departments and agencies work with the private sector, academia and non-governmental experts. States Parties also noted the utility of public-private partnerships in dealing with disease.

28. States Parties recognized the importance of ensuring that there is effective coordination among relevant activities to minimise duplication and ensure a more comprehensive approach to building capacity, including through: improved coordination and information sharing among assistance providers both internationally and among national departments; enhanced communication among States Parties and with international efforts to tackle infectious disease, such as those undertaken by the FAO, IPPC, OIE and WHO, within their respective mandates; taking advantage of all appropriate routes for assistance – bilateral, regional, international and multilateral, including the Convention – to forge North-South, South-South and North-North partnerships; and improving cooperation, communication and networking among national institutions, departments, agencies and other stakeholders.
29. States Parties recognized the range of bilateral, regional and multilateral assistance, cooperation and partnerships already in place to support States Parties in meeting their national obligations under the Convention and in enhancing their disease surveillance, detection, diagnosis and containment capabilities. States Parties also recognized, however, that there remain challenges to be overcome in developing international cooperation, assistance and exchange in biological sciences and technology for peaceful purposes to their full potential, and that addressing such problems, challenges, needs and restrictions will help States Parties to build sufficient capacity for disease surveillance, detection, diagnosis and containment. Keeping in mind Article X, States Parties agreed on the value of mobilizing resources, including financial resources, to facilitate the widest possible exchange of equipment, material and scientific and technological information to help overcome challenges to disease surveillance, detection, diagnosis and containment. Recognizing that all States Parties have a role to play, States Parties stressed that those States Parties seeking to build their capacity should identify their specific needs and requirements and seek partnerships with others, and that those States Parties in a position to do so should provide assistance and support.

30. Recalling the agreements on Article X and Article III reached at the Sixth Review Conference, States Parties recalled that the Conference had emphasized that in the interest of facilitating the fullest possible exchange of equipment, materials and scientific and technological information for the use of bacteriological (biological) agents and toxin agents for peaceful purposes, States Parties should not use the provisions of the Convention to impose restrictions and/or limitations on transfers for purposes consistent with the objectives and provisions of the Convention of scientific knowledge, technology, equipment and materials. States Parties noted in this respect that full implementation of Article III of the Convention would help to facilitate the exchange of equipment, materials and scientific and technological information in accordance with Article X.

31. States Parties affirmed the role of the Implementation Support Unit, consistent with its mandate, in supporting the capacity-building activities of the States Parties by facilitating communication and partnerships, and acting as a clearing-house for information on needs for and sources of assistance and cooperation. In this context, the States Parties recalled that the Sixth Review Conference had encouraged States Parties to provide appropriate information to the Implementation Support Unit on their implementation of Article X, and welcomed the reports on cooperation activities that were submitted by States Parties during this meeting.

32. Recognizing the need to sustain progress on capacity-building in the fields of disease surveillance, detection, diagnosis and containment, with a view to enhancing international cooperation, assistance and exchange in biological sciences and technology for peaceful purposes, States Parties noted that the Seventh Review Conference could consider current and future proposals on means of better identifying needs, overcoming challenges to capacity-building, mobilizing financial resources, facilitating the development of human resources, supporting the participation of developing States Parties in the meetings and other activities of the Convention, and coordinating cooperation with other relevant international and regional organizations.
33. The States Parties further considered that in pursuing the above understandings and actions, States Parties could, according to their respective circumstances and constitutional and legal processes, take into account the considerations, lessons, perspectives, recommendations, conclusions and proposals drawn from the presentations, statements, working papers and interventions made by delegations on the topic under discussion at the Meeting of Experts, as contained in Annex I of the Report of the Meeting of Experts (BWC/MSP/2009/MX/3), as well as the synthesis of these considerations, lessons, perspectives, recommendations, conclusions and proposals contained in BWC/MSP/2009/L.1, which is attached to this report as Annex I. This annex was not proposed for adoption as an outcome of the Meeting, and therefore was not discussed with that aim. Thus, the annex was not agreed upon and consequently has no status.

34. States Parties are encouraged to inform the Seventh Review Conference of, inter alia, any actions, measures or other steps that they may have taken on the basis of the discussions at the 2009 Meeting of Experts and the outcome of the 2009 Meeting of States Parties, in order to facilitate the Seventh Review Conference’s consideration of the work and outcome of these meetings and its decision on any further action, in accordance with the decision of the Sixth Review Conference (BWC/CONF.VI/6, Part III, paragraph 7(e)).

35. The Meeting of States Parties reviewed progress towards obtaining universality for the Convention and considered the Report from the Chairman on Universalization Activities (BWC/MSP/2009/4), as well as reports from States Parties on their activities to promote universalization. The States Parties reaffirmed the particular importance of the ratification of the Convention by signatory states and accession to the Convention without delay by those which have not signed the Convention, contributing to the achievement of universal adherence to the Convention. In this context, the Meeting took note of the reports, and called on all States Parties to continue to promote universalization, and to support the universalization activities of the Chairman and the Implementation Support Unit, in accordance with the decision of the Sixth Review Conference.

36. The Meeting of States Parties also considered the Report of the Implementation Support Unit (BWC/MSP/2009/2), including the report on participation in the confidence-building measures (CBMs). The Meeting took note of the Report, and expressed its satisfaction with the work of the Implementation Support Unit. The Meeting noted with concern that participation in the confidence-building measures had levelled off over the past two years, and encouraged all States Parties to make an annual CBM submission in accordance with the decisions of the respective Review Conferences, seeking assistance through the Implementation Support Unit where required. The Meeting called on States Parties to continue working closely with the Implementation Support Unit in fulfilling its mandate, in accordance with the decision of the Sixth Review Conference. Recalling the decision of the Sixth Review Conference that the Implementation Support Unit would be funded by States Parties for the period from 2007-2011, the Meeting requested the United Nations Office for Disarmament Affairs to ensure, in accordance with the terms of General Assembly resolution 63/88, that the administrative arrangements for the Unit, including employment contracts for the staff of the Unit, appropriately reflect the full duration of the Unit’s mandate.

Conclusion of the Meeting of States Parties

38. At its closing meeting on 11 December 2009, the Meeting of States Parties decided that the 2010 Meeting of Experts would be held in Geneva from 23 to 27 August 2010, and that the 2010 Meeting of States Parties would be held in Geneva from 6 to 10 December 2010, in accordance with the decision of the Sixth Review Conference.

39. At the same meeting, the Meeting of States Parties adopted its Report by consensus, as contained in document BWC/MSP/2009/CRP.1, as orally amended, to be issued as document BWC/MSP/2009/5.
Annex I

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

I. Aims

1. Recognizing the fundamental importance of enhancing international cooperation, assistance and exchange in biological sciences and technology for peaceful purposes, in the interests of achieving comprehensive implementation of the Convention, States Parties should work together to promote capacity building in the fields of disease surveillance, detection, diagnosis, and containment of infectious diseases, including by:

   (i) Bridging financial and technological gaps between countries by sharing resources, enhancing capabilities and assisting each other;

   (ii) Ensuring the adoption of an all-hazards approach and providing capacity so that scarce resources are used effectively to combat disease irrespective of its cause;

   (iii) Supporting safe, secure, sustainable, cost-effective and systematic cooperation;

   (iv) Supporting the implementation of relevant international efforts to tackle infectious disease, such as the disease reporting mechanisms under the FAO, OIE and WHO;

   (v) Reviewing how they implement Article X of the Convention in line with the decision taken by the Sixth Review Conference.

II. Problems, challenges and needs

2. Recognizing that there remain challenges in developing international cooperation, assistance and exchange in biological sciences and technology for peaceful purposes to their full potential, and that many States Parties face considerable obstacles in building sufficient capacity for disease surveillance, detection, diagnosis and containment, States Parties should consider how they can contribute to overcoming the following problems:

   (i) The lack of resources at the international level to deal with plant diseases;

   (ii) The short-term and unpredictable nature of funding and available resources;
(iii) The shortfall of assistance to implement the requirements of the revised International Health Regulations (2005);

(iv) Insufficient focus on diseases that are prevalent in developing countries but are rarely present in developed countries;

(v) Insufficient integration of the private sector and traditional medicine;

(vi) Weaknesses in infrastructure, human resources and the implementation of standard operating procedures in developing countries;

(vii) Difficulties in retaining skilled human resources and with day-to-day maintenance of core health capacity;

(viii) Lack of coordination among assistance providers both internationally and between different national departments;

(ix) Difficulties in sharing diagnostic samples and materials due to safety, security and transport regulations;

(x) Difficulties in acquiring the necessary materials, equipment and technology;

(xi) The potential for non-proliferation provisions to hamper access to equipment, materials and scientific and technological knowledge for disease surveillance, mitigation and response.

III. Developing mechanisms for building capacity

3. Recognising that although disease surveillance, mitigation and response are primarily national responsibilities, infectious diseases know no geographic boundaries and neither should efforts to combat them, States Parties should:

(i) Support relevant activities undertaken by international organizations, such as the FAO, WHO and OIE;

(ii) Work at the regional level with relevant partners, such as regional offices of the WHO, regional political and scientific bodies and other donors;

(iii) Work together bilaterally, including by forging new, and improving existing, North-South, South-South and North-North partnerships;

(iv) Consider establishing a mechanism under the Convention to promote, facilitate and improve the coordination and effectiveness of relevant capacity-building activities.
4. In working together internationally, regionally and bilaterally, States Parties should, according to their individual circumstances and requirements:

   (i) Develop mechanisms to assist States Parties in identifying their needs in terms of equipment, materials and scientific and technological information;

   (ii) Take full advantage of existing resources, and identify additional resources and innovative financing mechanisms, to facilitate the widest possible exchange of relevant equipment, materials and scientific and technological information;

   (iii) Improve cooperation and information sharing of advances in the life sciences relevant to the control and eradication of infectious diseases;

   (iv) Improve coordination of capacity building activities to minimise duplication and ensure a more comprehensive approach;

   (v) Tailor solutions to the specific needs and priorities of countries in a results-based manner so that they maximise the potential for improving health;

   (vi) Ensure effective communication and coordination among human, animal and plant health sectors;

   (vii) Foster an inter-disciplinary approach by ensuring effective inter-agency cooperation and by incorporating traditional biomedical science with economic, social sciences, demographics and agricultural sciences;

   (viii) Take advantage, wherever possible, of existing networks and institutional arrangements, such as disease-specific surveillance networks or by improving the integration of epidemiologists and scientists into the international public health community;

   (ix) Work with the private sector, academia and non-governmental experts, including through the use of public-private partnerships, direct investment and incentive mechanisms;

   (x) Further strengthen networks of reference laboratories, in particular through twinning programmes;

   (xi) Use collaborative projects to increase motivation and support, including in detection technologies, vaccine research and development, developing new disinfectant regimes and therapeutics;

   (xii) Continue to develop basic science, tools and core technologies, such as new detection, identification, monitoring and information exchange systems.
IV. Developing the necessary infrastructure

5. Recognising the existing requirements in other settings to establish core national public health capacities, such as those under the revised International Health Regulations (2005), States Parties should work to develop:

   (i) Surveillance systems which are sensitive, specific, representative, timely, simple, flexible and acceptable, and which have capabilities for continuously collecting and analyzing data from various sources;

   (ii) Capacity for rapid detection and identification of pathogens, including improved access to high quality diagnostics and expertise;

   (iii) Primary health care services, such as laboratory systems and capacity;

   (iv) Emergency response capabilities;

   (v) Communication capabilities, including for public information and professional collaboration.

6. In working to develop this infrastructure, States Parties should, according to their individual circumstances and requirements:

   (i) Consider developing a national strategic plan and a mechanism for monitoring and evaluation, using standard risk management tools;

   (ii) Make use of the many forms of disease surveillance, including active surveillance, passive surveillance, generic surveillance, syndromic surveillance and disease-specific surveillance;

   (iii) Strengthen immigration and border control to help manage the international spread of infectious disease;

   (iv) Establish mechanisms for real-time information sharing and data management;

   (v) Take advantage of opportunities offered by advances in science and technology to improve the way diseases are detected and monitored, for example, through the analysis of environmental and climate data collected by satellite;

   (vi) Make better use of disease data in decision-making processes;

   (vii) Provide resources and opportunities for improved cooperation, communication and networking between institutions, departments, agencies and other stakeholders;
(viii) Use feedback loops to ensure lessons learned from one disease event are used to strengthen the system and integrated into future disease surveillance, mitigation and response efforts.

V. Developing human resources

7. Recognising that infrastructure is of little use if there are not appropriately trained individuals to use it, States Parties should:

   (i) Make use of workshops, training courses and conferences at the national, regional and international levels;

   (ii) Ensure that tools and courses and education materials are available in the native languages of practitioners;

   (iii) Provide opportunities for promoting contact and sharing of experience between professional institutions and relevant personnel;

   (iv) Expand concepts of relevant human resources to include all those associated with disease surveillance, detection, diagnosis and containment, including technicians, managers and policy makers;

   (v) Expand the competencies of relevant individuals to include the use of modern information and informatics tools, data management and analysis as well as the use of feedback loops;

   (vi) Make use of the full range of modern educational tools, including modular approaches, supporting materials, documents and online resources; a focus on practical training, video-assisted training, re-training and professional education;

   (vii) Revise educational curricula and training to facilitate a more inter-disciplinary approach to disease surveillance, mitigation and response;

   (viii) Conduct hands-on training exercises for biosafety, biosecurity, the use of personal protective equipment, and measures for the transport of dangerous goods;

   (ix) Identify ways to reduce "brain-drain", where individuals leave the public sector and enter the private sector after they have been trained and certified;

   (x) Provide the political leadership needed to ensure training and personnel issues are given adequate attention at national level;

   (xi) If in a position to do so, provide sponsorship for training, exchange visits, and travel to expert meetings of the Convention.
VI. Developing standard operating procedures

8. Recognising the value of opportunities offered for building capacity through shared practices and procedures, States Parties should:

(i) Use standard operating procedures to enhance sustainability, improve trust, build confidence, contribute to quality control, and foster the highest standards of professional performance;

(ii) Work at the national level with ministries of health and agriculture and other relevant agencies to develop relevant legislation, standards and guidelines;

(iii) Develop and use best practices for surveillance, management, laboratory practice, manufacturing, safety, security, diagnostics, trade in animals and products, as well as associated procedures;

(iv) Strengthen international protocols for the rapid sharing of information;

(v) Use case studies of biosecurity considerations, risk assessment and the transportation of dangerous goods to improve existing practices and procedures.
### Annex II

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<td>Technical assistance, exchange and cooperation undertaken by the Islamic Republic of Iran under article X of the BWC – Submitted by the Islamic Republic of Iran</td>
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<td>BWC/MSP/2009/WP.8</td>
<td>Article X: India’s experience in international cooperation and capacity building in disease surveillance, detection, diagnosis, and containment of disease – Submitted by India</td>
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<td>BWC/MSP/2009/WP.9</td>
<td>Consideration of, 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: needs, challenges and hurdles – Submitted by Pakistan</td>
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