

**MEETING OF THE STATES PARTIES TO
THE CONVENTION ON THE PROHIBITION
OF THE DEVELOPMENT, PRODUCTION
AND STOCKPIILING OF BACTERIOLOGICAL
(BIOLOGICAL) AND TOXIN WEAPONS AND
ON THEIR DESTRUCTION**

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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

**UNITED STATES GOVERNMENT EFFORTS TO SUPPORT GLOBAL
IMPLEMENTATION OF THE
INTERNATIONAL HEALTH REGULATIONS (2005)**

Submitted by the United States of America

I. Overview

1. The United States Government believes that it is essential for the health of populations and the security of nations for all countries to have the capacity to detect, report, and respond to public health emergencies, regardless of whether the cause is naturally-occurring, accidental, or deliberate. Accordingly, we are engaged in a multitude of efforts to promote global health security, and specifically, the development and sustainability of the core capacities for disease surveillance, reporting, and response as defined by the World Health Organization's revised International Health Regulations (IHR (2005)), which entered into force on 15 June 2007. Selected activities in these areas were highlighted through our statements, national papers, and presentations during the 2009 Biological and Toxin Weapons Convention (BWC) Meeting of Experts this past August.

2. We support these efforts because they contribute to the health and wellbeing of all people, because a weakness in disease surveillance and response capacity in one part of the world is a potential risk to all countries, and because we are committed to assisting nations with limited resources to build and strengthen their public health systems. These efforts help to meet the obligations of the United States to assist other nations as outlined in both Article 44 of IHR (2005) and Article X of the BWC, including additional understandings and agreements reached by review conferences.

II. United States Government Assistance for Implementation of IHR (2005)

3. The United States Government's efforts to assist the global community in implementing IHR (2005) span multiple agencies, and are coordinated at very senior levels. The implementing U.S. Government agencies include: the Department of State, the Department of Defense, the Department of Health and Human Services (including the Centers for Disease Control and Prevention), the Department of Agriculture, and the U.S. Agency for International Development. The support provided by these agencies touches on all core capacities required under Annex 1 of IHR (2005) and includes building, improving and sustaining surveillance capacities, laboratory infrastructure, preparedness planning, risk communication, and response capabilities.

4. Below, we outline some highlights of our coordinated IHR (2005) implementation efforts:

- (i) Support for IHR (2005) implementation is being provided by the United States Government to more than 60 individual nations, spanning all six WHO regions.
- (ii) We are ensuring that our efforts are complementary and not duplicative and support the efforts of the WHO. To that end, many of our assistance programs are coordinated with the WHO, and some of our efforts are partnered with other provider nations, including Canada, the United Kingdom, Germany, Japan, and Australia.
- (iii) The programs and projects we are supporting for global IHR (2005) implementation are dedicated to sustainability, working to ensure that recipient countries can improve and maintain their infrastructure and strengthen their health systems without long term reliance on donor nations.
- (iv) The United States Government has made a substantial financial commitment to assisting in global implementation of the IHR (2005). In this past year alone, more than **\$317 million** has been allocated to projects that directly support IHR (2005) implementation efforts around the world. These funds have been used to support governments, as well as non-governmental laboratories, academia and private industry, all working to strengthen the health infrastructure to build core capacities for surveillance, reporting, and response.
- (v) In addition to the \$317 million in direct support, the United States has provided an additional **\$260 million** in indirect support for IHR (2005) implementation. These are funds that support disease specific projects, such as HIV/AIDS detection and prevention, but that also strengthen overall global surveillance and laboratory capacity.
- (vi) The United States is committed to funding these IHR (2005) implementation efforts for multiple years to ensure the programs being developed and strengthened become operational and to get them to a point where they can begin

to function without external support. Some of the programs are scheduled to be funded continuously for at least the next seven years.

5. U.S. activities around the world in support of IHR (2005) implementation demonstrate our deep commitment to this endeavor, and we are not alone in these efforts. We will continue to work in partnership with other governments, inter-governmental and non-governmental organizations, and the private sector to assist the international community in building and strengthening surveillance and response capacities, working toward our shared goal of strengthening health systems around the world.

<p>IHR (2005) Article 44 - Collaboration and assistance</p> <ol style="list-style-type: none"> 1. States Parties shall undertake to collaborate with each other, to the extent possible, in: <ol style="list-style-type: none"> (a) the detection and assessment of, and response to, events as provided under these Regulations; (b) the provision or facilitation of technical cooperation and logistical support, particularly in the development, strengthening and maintenance of the public health capacities required under these Regulations; (c) the mobilization of financial resources to facilitate implementation of their obligations under these Regulations; and (d) the formulation of proposed laws and other legal and administrative provisions for the implementation of these Regulations. 2. WHO shall collaborate with States Parties, upon request, to the extent possible, in: <ol style="list-style-type: none"> (a) the evaluation and assessment of their public health capacities in order to facilitate the effective implementation of these Regulations; (b) the provision or facilitation of technical cooperation and logistical support to States Parties; and (c) the mobilization of financial resources to support developing countries in building, strengthening and maintaining the capacities provided for in Annex 1. 3. Collaboration under this Article may be implemented through multiple channels, including bilaterally, through regional networks and the WHO regional offices, and through intergovernmental organizations and international bodies. 	<p>BWC Article X - Convention text</p> <ol style="list-style-type: none"> (1) The States Parties to this Convention undertake 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. Parties to the Convention in a position to do so shall also cooperate in contributing individually or together with other States or international organizations to the further development and application of scientific discoveries in the field of bacteriology (biology) for prevention of disease, or for other peaceful purposes. (2) This Convention shall be implemented in a manner designed to avoid hampering the economic or technological development of States Parties to the Convention or international cooperation in the field of peaceful bacteriological (biological) activities, including the international exchange of bacteriological (biological) and toxins and equipment for the processing, use or production of bacteriological (biological) agents and toxins for peaceful purposes in accordance with the provisions of the Convention.
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