

**Meeting 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**

2 December 2014

English only

2014 Meeting

Geneva, 1–5 December 2014

Item 10 of the agenda

**Biennial item: How to strengthen implementation of Article VII,
including consideration of detailed procedures and mechanisms
for the provision of assistance and cooperation by States Parties**

Perspectives on article VII

Submitted by South Africa

Introduction

1. A number of important issues were raised in the debate on the strengthening of the implementation of Article VII during the Meeting of Experts (MX) in August.
2. The purpose of this paper is to provide South Africa's views on some of these issues.

Discussion

3. **Objective.** The primary objective of Article VII is to provide assistance to a State Party that has been exposed as a result of a violation of the Convention. Therefore, the sole purpose of the assistance provided in terms of this article should be humanitarian in nature.
4. **Application for assistance.** Due to the humanitarian objective of this article the provision of assistance should not be subjected to an investigation of alleged use, while it is accepted that an investigation of alleged use should follow the provision of assistance. Time will be of essence in the provision of assistance and since it will already be subjected to United Nations Security Council (UNSC) approval, there is no need for an investigation to confirm the need for assistance. Furthermore, an investigation of alleged use may take so long that the assistance will be too late when finally approved. The information provided to the UNSC with the request for assistance will play a crucial role in helping the UNSC to come to a speedy decision. The guidelines on information proposed by South Africa at the Meeting of Experts is therefore, quite important. The list of guidelines proposed in August has been amended in response to proposals by delegations:
5. **Information to be supplied with the Application:**
 - (a) Name of the State Party;

GE.14-23258 (E)



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- (b) National Point of Contact of State Party;
- (c) Date and place of first reported case. If there was a related event, a description of the event. To the extent possible, the date and time, when the alleged event(s) took place and/or became apparent to the requesting State Party and, if possible, the duration of the alleged event(s);
- (d) Severity of the event. Number of cases and the number of fatalities, if any;
- (e) Symptoms and signs – diagnosis if possible. Information on the initial treatment and the preliminary results of the treatment of the disease;
- (f) A description of the area involved;
- (g) All available epidemiological information;
- (h) Actions taken to manage the outbreak;
- (i) International organizations already involved in providing assistance.
- (j) States already involved in providing assistance;
- (k) Indications of why the outbreak is considered to be the result of a biological attack;
- (l) Characteristics of the agent involved, if available;
- (m) Types and scope of assistance required;
- (n) Indication of any investigations conducted or being conducted;
- (o) Contact details for coordination of assistance if different from National Point of Contact.

6. **Disease Outbreak.** South Africa also believes in the vast majority of cases (90 per cent+) the use of biological weapons (BW) will present in the form of a disease outbreak and therefore, more attention should be paid to assistance in the management of disease outbreaks. Furthermore, the potential of a mixed human and animal disease outbreak is quite high because of the fact that many biological agents that have potential to be used as weapons are zoonotic in nature.

7. **Levels of Response.** At the MX a number of questions were raised about the levels of response to the alleged use of BW. Based on responses to naturally occurring outbreaks of disease, the level of response will depend on the nature of the disease, the geographical area where the outbreak occurred, the status of the public health system of the State and the potential of international effects. Generally it can be accepted that the health systems (human, veterinary and plant) of the State will always be the first line of response. Responses from neighbouring states, regional and international actors will be determined by the factors listed above. International organizations particularly the WHO and OIE will become involved at an early stage due to their presence and their involvement with States. In most cases assistance in accordance with Article VII will be additional to and following the assistance provided by international organizations.

8. **Protective Equipment.** The Ebola pandemic has shown that basic personal protective equipment for the health care workers treating patients and those handling bodies (face masks, gloves and over coats) is the highest priority and the greatest need. Obviously other more specialised equipment is also necessary, but should not overshadow the need for the standard equipment.

9. **Licensing of Medical Personnel.** The WHO and NGOs such as Médecins Sans Frontières, already deploy medical personnel in various States and therefore, should have

procedures to address licensing of such personnel. Such procedures could also be used for assistance in accordance with Article VII.

10. **Laboratory Samples.** Similar to licensing, the existing procedures for sample handling could be utilised during Article VII assistance.
