2014 Meeting
Geneva, 1–5 December 2014
Item 7 of the agenda
Standing agenda item: Cooperation and assistance,
with a particular focus on strengthening cooperation
and assistance under Article X

Updated report on Germany’s implementation of Article X
(with special focus on the German Partnership Programme
for Excellence in Biological and Health Security)

Submitted by Germany

I. General remarks

1. Germany is fully committed to the implementation of the BWC in all its aspects,
including Article X. The 7th Review Conference encouraged States Parties “to provide at
least biannually appropriate information” on their implementation of Article X. Germany is
fully supportive to this initiative and has, therefore, provided in 2013 its report on
government activities related to Article X issues (BWC/MSP/2013/INF.3). This report
covered, inter alia, the Article X-relevant German Official Development Assistance (ODA)
activities of 2010 and 2011 as defined by the Organisation for Economic Co-operation and
Development (OECD). Information of the Article X-relevant activities of the European
Union Germany is also engaged in, were provided by a summary of the European Union at
the 2012 Meeting of Experts (BWC/MSP/2012/MX/INF.7). The EU document contained
information on EU Member’s, including Germany’s, individual projects. Moreover,
information on Germany’s activities regarding the implementation of Article X, covering
the period of 2005–2009 is contained in the background information document on
“Implementation of Article X of the Convention” compiled by the ISU for the 7th Review
Conference in 2011 (BWC/CONF.VII/INF.8).

2. To underline its full support for Article X, Germany provides the following
information about governmental activities related to Article X issues as an update to its last
year’s Report. Thereby, special focus is given to the German Partnership Programme for
Excellence in Biological and Health Security. This programme was launched in 2013
within the framework of the G7 Global Partnership against the Spread of Materials and
Weapons of Mass Destruction. It has an overall budget of 23 Mio. Euros and is active in
more than 20 countries.
3. Article X of the BTWC requires States Parties to facilitate the fullest possible exchange of equipment, materials and scientific and technological information for the use of bacteriological (biological) agents and toxins for peaceful purposes, as well as to cooperate in contributing to the further development and application of scientific discoveries in the field of bacteriology (biology) for the prevention of disease or for other peaceful purposes.

4. Germany understands the requirements set out in Article X not in a narrow sense, but sees cooperation and assistance under the wider perspective of Official Development Assistance (ODA) as defined by the Organisation for Economic Co-operation and Development (OECD). Germany shares the view of the OECD that assistance and cooperation does not only include activities financed abroad but also activities that are provided domestically for education and advanced training of foreign students.

5. This Report deliberately concentrates on government funded cooperation and assistance activities. The German government has no direct influence on private equity activities in the field of life sciences abroad by industry or other non-governmental stakeholders as well as on grants provided by non-governmental organizations from their own financial resources.

II. In detail

A. Specific endeavours relevant to Article X

**German Partnership Programme for Excellence in Biological and Health Security**

6. In 2013, under the aegis of the Federal Foreign Office, Germany started its Partnership Programme for Excellence in Biological and Health Security. The programme was launched within the framework of Germany’s engagement in the G7 Global Partnership against the Spread of Materials and Weapons of Mass Destruction and is offered to selected partner countries around the world. It has an overall budget of 23 Mio. Euros and is active in more than 20 countries. Individual projects within the Programme are usual run over a period of three years. In combination with biosafety and biosecurity training the programme reaches out far beyond usual ODA (Official Development Activities) projects.

7. Within the framework of the programme special focus was given in 2014 to the fight against the Ebola outbreak in West Africa.

8. The programme fosters responsible conduct in life science, strengthen health and security, and focuses on biorisk management using a comprehensive approach. The programme supports strengthening national capacities to prevent misuse of biological materials and knowledge for weapons purposes and aims to the improvement of detection, diagnosis, epidemiology, treatment, decontamination and biopreparedness.

9. The programme is coordinated by a programme office based at the German Federal Foreign office jointly managed by the Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH (GIZ) and the Robert Koch Institute (RKI). While GIZ and RKI also implement the comprehensive programme approach in focused areas, specialized German institutions including the Bernhard-Nocht-Institute for Tropical Medicine (BNI-TM), the Friedrich-Loeffler-Institute for Animal Health (FLI) and the Bundeswehr Institute of Microbiology (IMB) are commissioned to run specific projects in their respective areas of work.
### German Partnership Programme for Excellence in Biological and Health Security

<table>
<thead>
<tr>
<th>Title of measures</th>
<th>Partner Countries</th>
<th>Implementing Agency</th>
<th>Time frame</th>
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<tbody>
<tr>
<td>Partnership project with activities in the areas of Surveillance, Biosafety and</td>
<td>Morocco, Tunisia, Sudan</td>
<td>Gesellschaft für Internationale Zusammenarbeit (GIZ) &amp; Robert Koch Institut</td>
<td>2013–2016</td>
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<tr>
<td>Biosecurity, Detection and Diagnostics, Awareness Raising, Networking and Capacity Development</td>
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<td>Projects to strengthen diagnostic capacities for the fight against Ebola</td>
<td>West Africa</td>
<td>Gesellschaft für Internationale Zusammenarbeit (GIZ), Bundeswehr Institute for Microbiology, Bernhard Nocht Institute for Tropical Medicine, Robert Koch Institut</td>
<td>2014–2015</td>
</tr>
<tr>
<td>Projects with activities in the areas of Awareness-rising, Networking, Biosecurity and Biosafety</td>
<td>Central Asia</td>
<td>Gesellschaft für Internationale Zusammenarbeit (GIZ) &amp; Robert Koch Institut</td>
<td>2013–2014</td>
</tr>
<tr>
<td>Establishment of networks for biosecurity and diagnosis</td>
<td>Georgia, Kazakhstan, Tanzania</td>
<td>Bundeswehr Institute for Microbiology</td>
<td>2013–2016</td>
</tr>
<tr>
<td>Projects on the prevalence and diagnostics of Zoonosis</td>
<td>Africa &amp; South Asia</td>
<td>Friedrich Loeffler Institut</td>
<td>2013–2016</td>
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<tr>
<td>Projects on prevention and surveillance of highly dangerous diseases</td>
<td>Africa, Asia &amp; South America</td>
<td>Bernhard Nocht Institute for Tropical Medicine</td>
<td>2013–2016</td>
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### Medical Biodefence Conference 2013

10. In October the Medical Biodefence Conference 2013 organized by the German Armed Forces Institute of Microbiology took place. The Conference takes place every second year in Munich and is regularly announced in the German CBM declarations. The Biodefence Conference is open for participation by scientific and operational stakeholders from all over the world. It presents new development in science and technology in detection, diagnosis, treatment, decontamination regarding human and animal pathogens and toxins relevant for misuse as BW. In 2013 around 500 civil and military scientists and other stakeholders from 35 countries participated in the Conference which is one of the world-leading meetings for biodefence activities.

### EU Joint Action Quality Assurance Exercises and Networking on the Detection of Highly Infectious Pathogens (QUANDHIP)

11. Since 2011, the German Robert Koch-Institute has coordinated the European Joint Action QUANDHIP – Quality Assurance Exercises and Networking on the Detection of Highly Infectious Pathogens. Information on this project was provided to the 2013 Meeting of Experts and is available from the QUANDHIP website (http://www.quandhip.info). The
11. The project is linking 37 highly specialized laboratories from 22 European countries, but is not only limited to Europe. The aim of QUANDHIP is to establish a universal exchange of best diagnostic strategies able to support a common response strategy to outbreaks and intentional release of highly pathogenic infectious agents. This initiative has already contributed to an improvement of the diagnostic quality of highly pathogenic bacteria and viruses and to setting up an operational network of laboratories able to respond in cross border biological events. To make the results of our work applicable and profitable at the international level, best practices and lessons learned will be published and also made accessible on the QUANDHIP Website.

12. The Joint Action will be completed in January 2015. So far, 10 external quality assurance exercises have been conducted. The results show a very high level of preparedness of the participating diagnostic laboratories although further improvement should be achieved. A next Joint Action will be based on the activities of QUANDHIP and further develop the responsiveness of microbiological laboratories to cross border health threat events.

**Pandemic preparedness Initiative**

13. Growing mobility, international networking and the expansion of global trade and traffic increase the risk of infectious diseases spreading rapidly across country borders. The international community is well aware of the threats and challenges posed by new pandemics. In 2005, the World Health Organization (WHO) produced a revised version of the International Health Regulations. These global rules enhance national, regional and global public health security, and help partner countries improve their pandemic preparedness. Furthermore, huge resources to extend pandemic preparedness are being made available internationally. However, the capacity to absorb these resources and thus to react timely and adequately to an emergency outbreak of infectious diseases is limited in many countries.

14. Since September 2009, the Pandemic Preparedness Initiative has been supporting GIZ (Gesellschaft für Internationale Zusammenarbeit) partner countries of German bilateral cooperation in developing and implementing national pandemic preparedness plans. The aims of the Initiative are:

- Government and civil society actors are able to fulfil their roles as stipulated in national emergency plans;
- Countries reach a minimum standard of pandemic preparedness;
- Health systems in the partner countries are resilient enough to retain control even in case of severe disease outbreaks.

15. The Initiative for Pandemic Preparedness is commissioned by the German Federal Ministry for Economic Cooperation and Development (BMZ). The Initiative collaborates closely with local GIZ offices and international organizations.

**B. Education**

16. Academic education provides the basis for future scientific and technological information and material exchange. Without a broad basis of well-educated personnel sustainable development in the fields of life sciences will not be possible. German universities, which are operated by the constituent federal states, the large majority of them on tuition-free basis, provide open access for undergraduate and postgraduate students from all countries. That means that in 2013 more than 19.9 per cent of all students at German
The provision of study places for foreign students at German universities is financed by the Federal Government. Since 2007, partnerships between German universities and clinics and medical schools and clinics in developing countries have been supported as part of Germany’s development cooperation policy.

### C. Bilateral ODA 2008–2012

18. Data on German Official Development Assistance (ODA) grants and loans are collated together with respective data from other OECD Member States on the website of OECD (http://stats.oecd.org/qwids/). The data are broken down into various categories of assistance and cooperation. Data is available on an annual basis except for the last two years. For this Report the year 2012 represents the last survey year.

19. The following reflects the combined information of the categories: General Health and Basic Health. General Health covers sub-categories like health policy and administrative management, medical education/training, medical research, and medical services. Basic Health includes, inter alia, basic health care, basic health infrastructure, health education, infectious disease control, malaria control, tuberculosis control, and health personnel development.

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<tr>
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<th>2008</th>
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<tr>
<td>Health (total)</td>
<td>$298.05m</td>
<td>$340.78m</td>
<td>$233.5m</td>
<td>$224.32m</td>
<td>$338.7m</td>
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20. In 2011 and 2012, Germany provided 563.02 million US Dollars ODA grants and loans to partner countries. Donation is primarily provided by the Federal Ministry for Economic Cooperation and Development (BMZ), Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ), Kreditanstalt für Wiederaufbau (KfW).

21. Moreover, Germany would like to note its contribution of 66,345,260 million USD to the WHO budget in 2014 to 2015. In addition, voluntary contributions for special projects were provided to WHO; the figures for these special projects are included under bilateral OAD above.