

---

**Eighth 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**

10 October 2016

English only

---

**Geneva, 7-25 November 2016**

Item 10(b) of the provisional agenda

**Review of the operation of the Convention as  
provided for in its Article XII**

**Articles I-XV**

**Report on Implementation of Article X of the Convention**

**Submitted by India**

1. India is firmly committed to fulfilling all of its obligations under the BWC and in particular, attaches high importance to the full and effective implementation of Article X of the Convention. The promotional aspects related to cooperation and assistance are crucial elements in strengthening of the Convention and in achieving universal adherence. India has regularly shared its experiences in implementation of Article X in BWC meetings in the current inter-sessional process.

2. India supports the position of NAM and Other States Parties to the BWC that full, effective and non-discriminatory implementation of Article X is an integral and essential part of compliance with the Convention and supports the NAM proposal on Article X submitted at the Seventh Review Conference.

3. India has developed significant capabilities in biological sciences and technology for peaceful purposes and places considerable emphasis on broadest possible international cooperation in this field, in particular with developing countries. This is consistent with Article X which embodies an international commitment to partnership, assistance, sharing of information, exchanges and the development of mutually beneficial outcomes. The following provides an overview of India's engagement — both bilateral and multilateral, of relevance to the implementation of Article X.


4. India has extensive cooperation in the health sector and medicine with a large number of countries. In the period since 2014, in addition to existing mechanisms, new engagements in this sector were concluded with: Japan, Indonesia, Netherlands, countries in the ASEAN region (Vietnam, Cambodia) and Pacific Island countries (Fiji, Papua New Guinea, Micronesia). India has ongoing cooperative programmes with the United States of America, the United Kingdom of Great Britain and Northern Ireland and Canada for development of technologies for disease surveillance, diagnosis and control.

5. The SAARC Tele-medicine Network Project has also been implemented in Afghanistan and Nepal for providing Tele-medicine and Continuing Medical Education Services based from India. An Indo-Japan collaborative project "Accelerating the

GE.16-17427(E)



\* 1 6 1 7 4 2 7 \*

Please recycle 



application of stem cell technology in human diseases" was implemented in December 2015 for the management of sickle cell anaemia — a disorder widely reported in the developing countries of Asia and Africa.

6. In the field of biotechnology, India has cooperative programmes with Australia, Brazil, Canada, Denmark, Finland, France, Germany, Netherlands, Russia, Spain, Sweden, Switzerland, Tunisia, U.K. and the US. There are multilateral arrangements with the EU and the European Molecular Biology Organization (EMBO).

7. In the field of environment/bio-diversity, there are bilateral MoUs with Bangladesh, Egypt, Morocco and Brazil among others. There are bilateral projects underway on bio-diversity with Germany, Japan and the World Bank. The Indian Ministry of Environment & Forests contributes around US\$ 30,000 to the South Asia Cooperative Environment Programme (SACEP). Joint Partnership programmes in the fields of health, food and nutrition security are underway with the Bill and Melinda Gates Foundation.

8. India has supported the role of the World Health Organization, the Food and Agricultural Organization and the World Organization for Animal Health and implements various regulations including the WHO's 2005 International Health Regulations. India supports enhancing effective cooperation and coordination between relevant international and regional organizations for use of biological agents and toxins for peaceful purposes. India has been regularly reporting on outbreaks of infectious diseases, not only those that are mandatory to notify but also all the other re-emerging and newly emerging diseases. As and when required, India has sought cooperation from foreign partners for advanced technologies for surveillance, detection, and diagnosis of highly infectious and pathogenic agents which can cause diseases in humans and animals.

9. India has produced and supplied diagnostic kits for some emerging and re-emerging infectious diseases such as Japanese Encephalitis, Dengue and Chikungunya as also ELISA kits to other developing countries through the WHO SEARO. The diagnostic kits developed by India are cost-effective as compared to other available products and therefore better suited for needs of developing countries. India has also provided through the WHO and bilaterally reagents helpful for diagnosis of a number of diseases including H1N1, H5N, H7N9, MERS CoV, Measles, Rubella, etc. India has provided technical expertise in recent years to countries such as Nepal, Timor-Leste, Myanmar, Indonesia, Sri Lanka and Thailand. In training courses organized in India in recent years, participants from the following countries participated: Bangladesh, Bhutan, Myanmar, Thailand, Indonesia, Nepal, Sri Lanka and Timor-Leste. India has also contributed virological data to the Global Influenza Surveillance and Response System. A Regional workshop on quality management system (QMS), bio-safety and bio-security practices in laboratories in the WHO South-East Asia Region was held at the National Institute of Virology, Pune, India in August 2015. During 2015, Indian official health experts / specialists were deployed abroad (Nepal, Indonesia, Philippines, Sri Lanka, Bhutan, Myanmar, Bangladesh) as temporary consultants for on-site training/capacity building purposes as part of WHO-SEARO regional activities.

10. In the field of plant health and protection, a number of training programmes were organized in India, both bilaterally or through regional bodies such as SAARC, which had participants from a number of countries including: Afghanistan, Bhutan, Bangladesh, Egypt, Indonesia, the Islamic Republic of Iran, Iraq, Kenya, Myanmar, Nepal, Philippines, Sri Lanka, South Africa, Thailand, and Viet Nam. Similarly, in the field of animal Health, India has cooperated with a number of countries including Afghanistan, Bangladesh, Bhutan, Myanmar, Nepal and Sri Lanka.

11. The 5<sup>th</sup> meeting of the South Asian Association for Regional Cooperation (SAARC) Health Ministers, preceded by meetings of the SAARC Technical Committee on Health and

Population Activities, SAARC Expert Group on HIV/AIDS and SAARC Senior Officials, were held in New Delhi from 6-8 April, 2015, where the participating Health Ministers also adopted "Delhi Declaration on Public Health Challenges".

12. As announced by India's Prime Minister during the 18th SAARC Summit in Kathmandu in November 2014, India is upgrading the SAARC TB and HIV/AIDS Laboratory to a Supra-regional Reference Laboratory by making available an amount of US\$ 1.05 million.

13. After a gap of 19 years, India assumed the Presidency of the World Health Assembly in May 2015, some BWC germane outcomes of which included:

(a) Adoption of a Global Action Plan on Anti-Microbial Resistance (AMR);

(b) Adoption of a resolution on health and the environment;

(c) Adoption of a decision on the 2014 Ebola virus out-break and follow-up to the Special Session of the Executive Board on Ebola which agreed on a set of actions related to interim assessment, International Health Regulations (2005), Global Health Emergency Workforce, Contingency Fund, Research & Development, Health systems strengthening and the way forward; and

(d) India also announced a voluntary contribution to WHO of US\$ 1 million for the proposed WHO contingency fund.

14. As the current Chair of the BRICS, India also organized the 2016 BRICS Health Ministers meeting on the sidelines of the World Health Assembly in Geneva on May 24, 2016. A Joint Communiqué was released at the end of the meeting.

15. India also hosts a component (in Delhi) of the International Center for Genetic Engineering & Biotechnology (ICGEB), which has 86 signatory countries and which is part-funded by the Government of India. Its main work is carried on through 32 Research Groups with an emphasis on transfer of technology to industry. Its current international students include those from Nigeria, Cuba, Viet Nam and Bangladesh.

16. India has a well-established pharmaceutical industry and is a major exporter of high quality and affordable pharmaceutical drugs and vaccines. A case in point are generic drugs which have resulted in dramatic reduction in cost of treatment, for instance of HIV/AIDS. India has emphasized the importance of access to affordable, quality, safe medicines, vaccines and medical equipment to all, in particular those in developing countries through appropriate policies and regulations. Indian enterprises are currently assisting a number of countries in the Latin American region (Chile, Dominican Republic, Venezuela and Mexico etc) in capacity building by boosting domestic production of medicines.

17. India hosted a Regional Workshop on the Eighth Review Conference in cooperation with UNODA and the EU on 29-30 August 2016 in New Delhi, with 60 participants from 26 countries. Among other topics, the Workshop discussed the issue of implementation of Article X.

18. While international exchanges are an important pillar for implementation of Article X, and considerable progress has taken place in recent years, there is need for continuing efforts to meet various concerns expressed by developing countries with respect to facilitating exchanges under Article X, including by addressing issues such as obtaining equipment or materials, training opportunities, obtaining clinical samples or access to affordable medicines and vaccines and visits by scientists, which hinder timely and regular collaboration in areas of common interest to the scientific community.

19. The implementation of Article X should facilitate the fullest possible exchange of equipment, materials and technology related to the use of biological agents and toxins for

peaceful purposes. Strengthened implementation of Article III would ensure that the cooperation envisaged under Article X is not abused. Thus effective national export controls are important tools to prevent the misuse of biological agents and toxins for purposes prohibited by the Convention or falling into the hands of terrorists. India is committed to maintaining effective export controls on par with the highest international standards with respect to transfers of biological agents and toxins for peaceful purposes.

20. India supports the continued emphasis on Cooperation and Assistance (with particular focus on implementation of Article X) in the outcomes of the Eighth Review Conference of the BWC as well as in the subsequent inter-sessional process, and looks forward to the Eighth Review Conference building on the outcome of the Seventh Review Conference to enhance implementation of Article X.

---