Rapid response units under the BWC: benefits and challenges

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Historical background

- Initial concept papers on mobile biomedical units were introduced by the Russian Federation in 2016 in the preparatory process for the Eighth Review Conference;

- The concept was elaborated on the lessons learned by the international community in responding to the devastating Ebola outbreak in West Africa.
Mobile laboratory and rapid reaction personnel of Rospotrebnadzor in Guinea
Implementation of the BWC
Article VII

- even where national capacity is strong, further international assistance may be required by the affected State Party;

- there is value in having such rapid response capability with the agreed mechanism for its deployment;

- mobile biomedical units may become a useful tool for the implementation of Article VII in terms of ensuring preparedness, assistance and response.
Specialized anti-epidemic teams (SAET) operated by Russia's Health Protection Agency/Rospotrebnadzor

- such units have taken part in mitigating over 120 public health emergencies both nationally and abroad.
Main areas of SAET activities:

- laboratory diagnosis of infectious agents from human biomedical samples and analysis of environmental samples;

- determining cause-effect connection of outbreaks of infectious diseases of various etiology;

- development and implementation of emergency anti-epidemic measures;

- temporary substitution of depleted local public health personnel in emergencies.
The cost

- the purchasing cost of the full set of vehicles and equipment is around 3 million USD;

- annual maintenance cost is around 70,000 USD.
Implementation

establishing of mobile units by States Parties centrally as part of a future BWC implementing body

creation of nationally operated and funded rapid response biomedical teams which would be delegated to the BWC-maintained roster or database