TRANSCRIPT

Event
“The Department of Defense’s Newly Released Biodefense Posture Review”

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FEATURING
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Welcome and good morning to everyone assembled here in Washington at CSIS, and those watching online, and tuned into C-SPAN 1. I’m J. Stephen Morrison, senior vice president and director of the Global Health Policy Center at the Center for Strategic and International Studies, CSIS, here in Washington. We’re delighted to be able to host this one-hour session today on the release of the inaugural Department of Defense Biodefense Posture Review.

We’re doing this today under the auspices of the CSIS Bipartisan Alliance for Global Health Security, co-chaired by former CDC director Julie Gerberding and former Senator Richard Burr. Special thanks to my colleagues at CSIS, Michaela Simoneau, Maclane Speer, Sophia Hirshfield, Humzah Khan. Special thanks to the CSIS production team that’s putting this all together, Eric Ruditskiy, Alex Brunner, Qi Yu, Theo Mitchell, and Dwayne Gladden. And from DOD, special thanks especially to Jennifer Nicholson, who’s helped us over many weeks in planning this out, and many others that I can’t really begin to enumerate. There’s been a lot of support from DOD in putting this together.

The Biodefense Posture Review is a very significant step, as we’ll hear, in this post-COVID moment. And it has the potential, as we’ll hear, to bring about fundamental changes in how DOD approaches biodefense. A few minutes ago we published here at CSIS, my colleague Emily Harding, deputy director of the International Security Programs, and I published a critical questions piece on the release of the BPR.

Michaela Simoneau and I also recently published an essay entitled “The Worst is Over, Now What?” that examined this post-COVID moment. And it began by unpacking many of the factors that feed a pessimism that there will be little sustained progress in building preparedness and response capabilities against future pathogenic threats. But it makes the case beyond that there really is reason for optimism and hope based on several factors.

Survey work that shows strong American support for an active U.S. government engagement in this area at home and abroad. The appointment of new senior leadership team at the White House, at CDC, at NIH, and elsewhere. New capacities at the Department of State, at the White House, and CDC, and elsewhere. And a de facto bipartisan consensus, despite the rancor and the noise in our country, to better protect Americans through investing in new technology and better biosafety and biosecurity, among other issues.

And most importantly, in our deliberations today and in – and in the paper that Michaela and I published we make the case that the wheels of government continue to turn in generating new security strategies and
new analyses like the BPR for improving the performance of the U.S. government. These vitally important efforts laid out potentially a new hardwiring for how the U.S. departments and agencies are to perform, what the expectations and targets are, the budgetary needs, and the oversight to ensure accountability. Special congratulations to Assistant Secretary Deborah Rosenblum and her many colleagues who have worked long and hard to generate this important new work.

A certain urgency surrounds strengthening biodefense at DOD and elsewhere in our government, but it did take 21 months to complete the BPR. And these delays, I think, are a reflection of the complexity of the threats and the science, the array of DOD institutions involved, the desire to achieve consensus across these institutions, the inevitable turf conflicts and bureaucratic politics. But we’re at this point now where it’s out and the – and the moment has arrived to accelerate implementation.

The review was driven by the sense, as we’ll hear, that the world of biodefense has changed profoundly and DOD needs to change accordingly – and indeed, race to move ahead. The BPR lays down a new paradigm around biothreats coming from multiple directions, including natural, manmade, accidental; from China, Russia, Iran, and North Korea; from accelerating changes in science itself that creates new opportunities and new acute dangers; and from the massive proliferation of laboratories where biosafety and biosecurity are often weak.

We’ll hear more in this discussion around China and the question of, you know, what exactly is the threats that's posed. The BPR is careful in how it – how it couches this, and I think we'll expect greater clarification as we move into the future as to: Is it in compliance or not? Is it engaged in bioweapons programs?

There are other questions that emerge out of this that we will also have to think about, which is China's larger environment is one where there’s lots of active research partnerships between American universities, American industry, and others that are vitally important in the life sciences. What becomes of them?

And also, what about our bilateral dialogue between the U.S. and China on these critical strategic threats from future pandemics? Is that dialogue to be restored and created? Is there space for that in the midst of this – in the midst of this competition?

The BPR, as we'll hear today, creates a new Biodefense Council, its Secretariat to be headed by Assistant Secretary Rosenblum. That institution is to bring about greater accountability and unity of effort, begins its work in the coming days. It’s charged with preparing an action
plan next 12 months. The speed and quality of its performance will really be a critical test of the long-term value of the BPR, whether it becomes authoritative not just in coordinating and sharing information but in making decisions and shaping budgets.

The BPR is linked to the proposal in the – in the budget – president’s budget request for new money of 812 million (dollars). We’ll hear more about that. That’s a bit of a down payment in beginning to scale up the response, and it will require a bipartisan consensus and action from Congress. And I believe that, in fact, that is all possible. Fortunately, DOD’s biodefense activities continue to enjoy strong bipartisan support. They’ve not become overly politicized or toxic in our national debates.

It’s my honor to introduce Assistant Secretary Deborah Rosenblum to open our discussion this morning with prepared remarks. She’s a longstanding friend and colleague, a generous support of wisdom and expertise across many fields related to this broad enterprise, and has made an exceptional professional commitment to strengthening America’s defenses. She currently serves as the assistant secretary of defense for nuclear, chemical, and biological defense programs. Earlier, from November of ’21 to April of ’23 – (audio break) – performed the duties of the assistant secretary of defense for industrial base policy. Before joining the Biden administration, Deborah was the executive vice president of the Nuclear Threat Initiative, NTI.

After we hear from her in these remarks, Admiral Tom Cullison will moderate a roundtable with Deborah, with Brandi Vann, Richard Johnson, and Asha George. He will introduce them. We’ll leave time in the program to hear from the audience here.

And so let’s get moving. Please join me in welcoming Assistant Secretary Deborah Rosenblum. (Applause.)

ASD Deborah Rosenblum:

Good morning. And thank you very much, Steve, for that wonderful introduction.

I want to thank CSIS for hosting us here today. And I’m really pleased, and quite frankly relieved, that I am here today, because that means that we have successfully completed the first inaugural Bio Posture Review and have made it available for public release.

I also want to thank CSIS for your collective team’s patience as we – as Steve mentioned, 24 months – it wasn’t quite 24 months, but 24 months later we are here to discuss the results of the Bio Posture Review and how our work at the department also fits well into the work of the National Security Council and the White House under previously Dr. Beth
Cameron, Dr. Raj Panjabi, and now Dr. Paul Friedrichs, who’s with us today, in updating the National Biodefense Strategy as well as developing the implementation plan where DOD plays a significant role.

As we begin our discussion of the Bio Posture Review, I do want to share with you my vivid memory of the deputy secretary of defense asking me and my policy colleagues on day two following my confirmation to take on this daunting task. The good news was I was never alone in completing this task. I had wonderful partners throughout the Department of Defense, both within OSD, within the military departments, along with the Joint Staff where Dr. Friedrichs was with a different hat on at the time. And we also owe a tremendous debt of gratitude to the individuals who are here today who led the Bio Posture Review on a daily basis: my wonderful deputy, Dr. Brandi Vann; as well as DASD Richard Johnson, who’s also wonderful – (laughter) – along with Dr. Vipin Narang, who is not with us here this morning.

I also want to give a shout out to many of you here in the room, as well as joining us virtually. Your intellectual work that you are doing, as well as the intellectual capital that you brought to the discussions that were hosted by Johns Hopkins Center for Health Security as well as MIT Lincoln Lab, were instrumental in the beginning phases of our Bio Posture Review in helping us to shape what were the key urgent issues we needed to get after, as well as providing us insights and perspectives of how to look at these things from a different – from a different way.

When you read the following words in the BPR report – and you will hear us repeating them often, not only today but in the days to come – the Department of Defense and the nation are at a pivotal moment in biodefense as we face an unprecedented number of complex threats, as outlined in the National Defense Strategy and the National Biodefense Strategy. The secretary of defense charged the department with being prepared to operate in a biological threat environment and to support the national biodefense enterprise, both at home as well as abroad. DOD must implement the significant reforms outlined in the Bio Posture Review to enable a resilient total force that deters the use of bioweapons, responds rapidly to natural outbreaks, and maximizes biosafety and biosecurity for laboratories globally. We have no choice if we are to effectively implement the National Security Strategy and the National Defense Strategy.

The National Defense Strategy speaks of the growing risks of chemical and biological threats in the context of the strategic competition with near-peer competitors. But we are not only concerned about China and Russia. We must remain focused on the potential impact of existing and emerging biotechnologies that could be incorporated into any biological
warfare program for purposes inconsistent with obligations under the Biological Weapons Convention, as well as actions of nonstate actors.

The National Defense Strategy also highlights significant transboundary challenges associated with pandemics and naturally occurring diseases. These threats certainly impact the readiness and resilience of our military forces. Biodefense is no longer something that’s the purview of just specialized units who have traditionally been worried about these threats. Integrated deterrence requires a combat-credible force. And to be combat-credible, the whole joint force must be capable of fighting through biothreats and being resilient.

As I noted, the BPR was built on the foundation laid out in the National Defense Strategy, along with the National Biodefense Strategy. But it was also greatly informed by a number of lessons learned from COVID-19 pandemic response. The BPR outlines reform initiatives along four key lines of effort, which I expect our panel to discuss today in greater detail. The first, enhancing early warning and our understanding of emerging biothreats, what we call understand. Second, improving the preparedness of the total force, otherwise known as prepare and protect. Third, speeding the response to mitigate the impact on DOD missions and the total force, otherwise labeled as mitigate. And finally, improving strategic coordination and collaboration to enhance biodefense.

Today, I am very – I very much want to emphasize the coordination and collaboration line of effort. Even with the release of the BPR, much of our work is now just beginning. While I am relinquishing my title co-lead of the BPR, I am assuming a new one, as Steve mentioned, as the executive secretary of the Biodefense Council, chaired by my boss, the Undersecretary of Defense for Acquisition and Sustainment Dr. Bill LaPlante. The Biodefense Council is charged with implementing key BPR reforms and empowering the department to take this more collaborative approach to biodefense. We must continue to emphasize and maintain the energy of the BPR as the council takes on an authoritative strategic role, integrating numerous roles and responsibilities throughout the department, without supplanting existing authorities, to serve as much more than an implementation committee.

Even after the exhaustive 18 months, we know there are significant topics that still need – that we still need to continue to delve into, such as the medical readiness of the force. Although focused internally, I take as a key due-out that the Biodefense Council must facilitate better communication and work with all of you as advocates for biodefense, whether that's in the interagency, with our allies and partners, in academia, industry, or amongst think tanks. As I’ve noted, we are at a
pivotal point in biodefense. We must maintain our momentum to prepare for any number of complex potential biological threats.

At DOD, this means continuing our biodefense efforts to support the National Defense Strategy with its three primary focuses on integrated deterrence, campaigning, and building enduring advantages. We must maintain this focus. We owe it to our total force and to continue to advocate and defend the critical resources that the department is requesting. We also need to collaborate on improvements across the national biodefense enterprise. This work is fundamental and critical to the national defense and national security.

So with that, again, I want to thank CSIS for giving us this wonderful opportunity, not only today but in continued collaboration. And with that, I look forward to our panel discussion. (Applause.)

Dr. Thomas Cullison: Well, good morning once again, and thank you very much for your opening comments, Secretary Rosenblum. I’m Tom Cullison. I’m a senior associate here at CSIS.

It’s my pleasure to invite our panelists this morning, starting on the far end.

Dr. Asha George is the executive director of the Bipartisan Commission on Biodefense, which she founded in 2014. The current co-chairs are former Senator Joe Lieberman and former Governor Tom Ridge. And among their many distinguished commissioners are former Congresswoman Susan Brooks and Peggy Hamburg, former FDA commissioner, who is also a commissioner on our CSIS commission here. Asha used to be a senior professional staffer in the House of Representatives, where she worked for the House Committee on Homeland Security. Included in her broad background is her experience as a service member in the U.S. Army as an intelligence officer and paratrooper. And she has a Ph.D. in Public Health from the University of Hawaii.

Brandi Vann is the principal deputy assistant secretary of defense for nuclear, chemical, and biological defense programs. She has held numerous senior federal government leadership positions, including chief of advanced and emergency threats at the Defense Threat Reduction Agency, where she was awarded for her innovations in detecting contaminated battlefields.

Next is Richard Johnson, who’s the deputy assistant secretary of defense for nuclear and content countering weapons of mass destruction policy. He was previously at the Nuclear Threat Initiative and also at the State
Department, where he was a deputy lead coordinator for Iran nuclear implementation. During the Obama administration, Richard served as director of nonproliferation at the National Security Council.

So welcome to all of you. Deborah, thank you very much for your opening comments. There’s an awful lot to talk about. Let’s take the history back a little bit, and you mentioned in there that the U.S. has been involved in conflict operations in every declared pandemic in the 20th and 21st centuries. So we have experience in operating in a bio-contaminated battlefield, in one way or another. But let’s go back to 9/11. The anthrax attacks during 9/11 really brought the specter of a bioweapon to the United States. And that, I think, opened a lot of eyes. But that was sort of lost in the in the emphasis on the other things that happened there.

Between the anthrax attacks and the COVID outbreak, Asha George’s commission was started, the CSIS Commission on Strengthening America’s Health Security was started here before COVID. We were all looking at what would happen in the United States should there be an outbreak of some type of bad disease, usually using an influenza model as the model. But then COVID happened.

And relative to DOD, the USS Roosevelt, an aircraft carrier, was taken out of service. It was by – it was placed in and out-of-service in Guam for quite some time. Various exercises were canceled. Operation Warp Speed, that very successful program that brought our vaccines to the fore, were heavily supported by DOD assets not only in our science world, but also in the logistics world. The military-supported civilian activities with logistics and medical support in hospitals and the various vaccination centers around the country, large support for the civilian efforts. And our military labs were supporting other laboratories around the country in diagnosing and finding out just what was going on. A lot of work both in the military and supporting our civilian colleagues.

But the question then is, as Steve mentioned, the title of their paper, I think, is extremely prescient. The worst is over, now what? So how do we keep the momentum going? And so the big question for you is, what’s next? And in your paper, you say that you’re going to assess the biothreats to our country through 2035, take a good look at that. We’ve looked at the threats from other countries. We’ll talk about that in a minute. We want to get into the areas of what is new. And you mentioned a tipping point. And I got to believe that some of those tipping points have to do with the advances in bioengineering, the advances in artificial intelligence, how does that play into things?

So just let me throw it to you. What would you like to add from your opening comments about why now for the BPR? What caused Secretary
Austin 24 months ago to write a memo saying we need to look at what we’re doing within DOD?

ASD Rosenblum: Yeah, I mean, let me just make a few kickoff remarks for us, and then turn to my colleague. And I’d particularly like to hear from Dr. George and all the work that the Bipartisan Commission has been doing.

You know, I think when Secretary Austin put out his memo, certainly what we had just lived through from a pandemic perspective was vivid and front and center in everyone’s mind. But that, while a very important critical piece, we were actually at a point where we could have learned the wrong lessons. We could have learned the lesson that, from a DOD perspective, our force, notwithstanding some of the difficulties, was OK. It was resilient. It was – their readiness didn’t really go down.

But what was happening at the same time was the development, and ultimately the publishing, of the National Defense Strategy where, as I talked a little bit about, with the focus on the near-peer competitors. But for those of us in the biodefense enterprise, we’re very cognizant as well of the ongoing and accelerating pace of really revolutionary technologies and science, as well as convergence in bringing other disciplines into this area. And it led us to fundamentally relook, for the next 10 to 15 years, what kinds of threats might our forces be encountering? And how prepared are we against those?

And that was fundamentally the question that the secretary of defense was asking. Was, yes, you know, we know what we’ve done coming out of COVID. But what does this mean for us over the longer term, over the next 10 to 15 years? And required us to take a sober look at that as part of the Bio Posture Review.

Asha?

Dr. Cullison: So, Dr. George, you were quoted in The Washington Post recently commenting on our near-peer competitors, as she put it. What are the threats out there, as you see it, from outside of DOD, from other countries and other organizations?

Dr. Asha George: Right. Well, so we know from the State Department’s verification and compliance report, unclassified, that Russia and China – sorry – Russia and North Korea have active offensive biological weapons programs, and that China and Iran have programs of concern, I think is now how we’re talking about it. But I would say also, it would be foolish for us to think that just these four countries have decided they’re getting involved and then that’s it. There’s nobody else. Just these four. That doesn’t make sense from a proliferation standpoint, both in terms of the proliferation
of weapons, and the proliferation of science, and quite frankly the proliferation of fear.

Once people start setting up these programs and the word gets out, surrounding countries begin to pay attention. And we would hope that they would say, OK, we need to establish defensive programs. But we can’t be sure that they’re going to do that. Military strategy differs according to various countries. So I would tell you that I think we have to be concerned about other countries jumping in, and trying to develop or obtain biological weapons as well. So I think that’s one thing.

The other is we have talked about force protection and enabling our warfighters to be able to operate in a contaminated battlefield. It’s not just warfighters standing there with plagues surrounding them somehow. It’s a really complicated situation. You’re talking about PPE and people covered from head to toe with stuff, and filters that wear out after a couple of weeks but we think we need to keep them in those PPE setups for longer than that. There’s a logistical piece behind that. And the enemy is quite aware of all of this. This is just standard, regular, ordinary, military battlefield thought. Taking advantage of those perceived or real vulnerabilities is also, in and of itself, a threat that’s specific to the biological threat.

The third thing I would say is that we have multiple things going on in the world at once. We have 10-plus pandemics affecting the United States all by itself, not to mention everybody else. We have humanitarian crises occurring. We have accidents occurring with releases from facilities. And we have these biological weapons programs. All of them are occurring at the same time. They all overlap. And on top of all of that, and throughout that, we have DOD, we have the United States, its allies, its interests overseas, all trying to operate at once. It’s really incredibly, incredibly complicated, and not at all the same as other threats. It’s not the same as nuclear. It is not the same as chemical. It’s certainly not the same as the explosive threat.

Dr. Cullison: So on top of all that, we had a session here at CSIS yesterday which focused on biosafety/biosecurity, and the comment was made that if biosafety and biosecurity goals are to be reached around the world China needs to be a part of the answer. And so how do we at the same time say that China is a pacing threat, we worry about – worry about all the things that they might do to us, but yet we need to be working together with China in certain other areas? How do we manage that narrow path?

Richard Johnson: Yeah, absolutely. So, first of all, thank you again for having us here. It’s really an important moment.
I think one of the key outcomes of the BPR was a discussion that, as Dr. George just said, this is not an issue just for the United States to deal with; it’s an issue for all of us to have to deal with globally, certainly with out allies and partners, and, frankly, with those who are not our allies and partners, including the PRC. And I think this administration has been pretty clear at the outset that we are prepared to and want to cooperate with the PRC in areas where it is in our joint interest, and that is on things like pandemic preparedness. And so we have sort of put that door open, and I think the national security adviser has spoken about this in the context of things like arms control and strategic stability, and sort of putting guardrails in the relationship between the United States and the PRC. And I would put these biological issues sort of in that bucket.

And so certainly we continue to be interested in having a dialogue with Beijing on these issues and making sure that we understand where we’re coming from. Unfortunately, the response that we’ve gotten from the PRC to the release of the Bio Posture Review was, basically, an influx of disinformation and misinformation about what the United States is doing on bio issues. And I won’t repeat them because they are not true, but just to say that we’ve heard this before. And we are focused on exactly what the document, if you read it, says, which is to prevent and to protect and to mitigate against impacts around the world, and to understand what that threat is. So we want to have a discussion based upon facts and based upon reality.

And in the meantime, we’re also having really robust discussions – and need to do more of that – with our allies and partners. And I will call out just for example the Ukraine scenario has reminded us, unfortunately – we talked about COVID. We talked about anthrax. But unfortunately, countries like Russia have also reminded us globally that these threats have not gone away and, in fact, are still there and are growing. And so our support to Ukraine in making sure they have the PPE that they need, our ability to downgrade intelligence to note if there are concerns about false-flag operations, all of these things emerged at the beginning of the conflict.

And that's why we’re really pleased to see, for example, that NATO has updated its chem, bio, rad, and nuke policy, which was outdated, to reflect these threats. That’s why we’re really pleased to see that the U.K. has released a new biodefense-related document, just as we are doing this, and that we do dialogues, for example, that I lead with our allies in South Korea in countering WMD. And so this is something that we know we need to do more of here in the United States, as you said, in a bipartisan way. But we also need to do it with countries around the world, including through things like the Global Health Security Agenda.
So of course we want to talk to the PRC about this. We will also continue to talk to many other nations as well.

Dr. Brandi Vann: So something else I think that we need to remember is as technology is advancing and the barrier to entry to do some very unique bio experimentation, bio development, it also means that we are seeing an increased risk of laboratory accidents, right? With the rise of different laboratories doing high-risk life-science research, we really also need to look at biosafety/biosecurity worldwide and how the Department of Defense/the U.S. can help shape some of those conversations to protect not only from those accidents occurring, but also just broadly our global health security, right? So those are things that we also need to make sure that we are having broad conversations about: What does bio risk management look like? And how do we effectively address biosafety and biosecurity?

Dr. Cullison: Brandi, since you brought that up, let’s skip ahead to how do we do that. DTRA – Defense Threat Reduction Agency – has a Biological Threat Reduction Program, and one of their goals is to do – to do exactly that with partners around the world. How does that work? How does BTRP help countries increase their laboratory safety and at the same time perhaps add to the bio surveillance efforts that we have to figure out what’s out there?

Mr. Johnson: I could start and then – because I think there is BTRP and then there is more, so. (Laughs.)

Dr. Cullison: Yeah. OK.

Mr. Johnson: So, from my perspective in the policy part of DOD, I oversee the policy related to our Cooperative Threat Reduction Program, which many of you know here as the Nunn-Lugar program. As we sit outside of the Sam Nunn Lobby, I think it’s appropriate – (laughs) – that we’re talking about that here today. And that program really has grown over its over three decades of experience.

Many of you think of that program maybe as thinking about the former Soviet states and concerns about nuclear weapons, warheads, missiles, chemical weapons. But really, in kind of a second phase, after 9/11 that program expanded to look more globally and certainly at the bioterror. And now we have just conducted a strategic review which we’re kind of informally calling CTR 3.0 that really is focused on the return of concerns about global competitors and state actors, but also more crosscutting concerns about things like pandemics, things like cyber, and we have biodata that’s more and more of a concern that we need to think about,
and making sure that we have an even more global scope around the world to address these issues.

So I just came back from a week on the continent of Africa in a couple of places, in South Africa and Kenya and Ethiopia, where BTRP is doing this work. We are providing support for biosecurity/biosafety. And that’s not just making sure that you have the gates and the guards and the guns, but also understanding, you know: How are you doing cybersecurity? How are you making sure that your folks are trained? And this is sometimes surprising to folks. People say: I looked at your title; I don’t know why you’re going to Africa. But it’s really important because we have a lot of these labs around the world and we don’t want to have the kind of accidental releases that Dr. Vann is speaking of.

And so the last thing I’ll say on this is we are look at how do we expand our scope even more broadly, but CTR is only one piece of the puzzle. There are other programs that DOD and other countries – excuse me, and other agencies oversee in this regard. And maybe, Dr. Vann, you might want to speak to that or others that I have missed. (Laughs.)

Dr. Vann:
Yeah. So the services also have a lot of laboratory – overseas laboratories, right? And through the cooperation that we can do and partner with our allies and partners in those regions where those laboratories exist, it opens up the conversation to how do we effectively partner with those countries and how do we talk about laboratory safety, appropriate types of research, and understanding what is the potential risk of exploring certain types of very, you know, unique or high-risk life-science work.

So we recognize from the DOD standpoint that we need to enhance that conversation. We need to utilize those opportunities and those research cells that we have across the globe to help generate more of that conversation worldwide.

It also is part of our S&T programs and our R&D programs to engage with our allies and partners to talk about what is the – again, the appropriate types of research to do, and how do we ensure that safety and security both internal to the DOD but also proliferate that discussion.

Dr. George:
There is a – there is a challenge here, though, for DOD, and that even in our own country we have this perception that DOD has trillions of dollars at its disposal, and it can do everything, and it can do everything for everybody. In this arena I think in particular, it has to be that DOD comes in to help and, you know, somehow empowers these countries and these facilities to do this on their own. It can’t be that the United States is just there constantly in those – in those laboratories ensuring their biosafety and biosecurity. I think that’s a huge challenge, and it’s a lot to require of
DOD by itself. State Department, Health and Human Services, whoever else has to be part of that team to allow for that, because they have to be able to operate on their own eventually.

ASD Rosenblum: I’m glad you raised that, and it actually speaks to the broader Bio Posture Review – whether it be in – related to laboratory security, research and development, advanced development, and whatnot – was the question that the secretary of defense asked was very particular to the Department of Defense. And while we were very cognizant of the important role that the department has in supporting national efforts, it was really saying: What is it that we need to be doing for our forces, recognizing the global responsibilities that those forces have?

And I think that’s an important piece because so much of the interagency dialogue broadly and work in this area – and we certainly saw this with regards to COVID – was that, you know, Department of Defense is always relied upon to come in, you know, when civil authorities are overwhelmed and all of that in scope and scale. And that is fundamentally something that the Department of Defense will always do. You know, we may gripe and groan and say, oh, somebody else’s job, this and that, but in the end of the day the Department of Defense is there for the U.S. public and it will support the U.S. public.

But this was really an opportunity to say: Given the responsibilities from a warfighting perspective abroad and in partnership with our allies in a warfighting scenario, what is it that we need for them to be prepared for, to be able to detect early on what’s in the environment to be able to continue their mission? And that was a singular focus that we had throughout the BPR review.

Dr. Cullison: If I could bring it back just a second –

ASD Rosenblum: Yeah. Please.

Dr. Cullison: – to the formation of the – of the BPR and the council, if you could expand a little bit on how the council was put together, who’s on it, and why. The perception is – Dr. George brought it up – is that DOD has incredible skills in just about any area you want to mention in the biological world and in medical education, in epidemiology, in nuclear proliferation. You name it, DOD’s got it. As we said once in a – in a meeting here, if you want DOD to do something, they’ve got the capability, but everybody has a day job, if you want to put it in those terms.

DOD also has a lot of silos in terms of who does what. Part of that is complicated by the unclassified and classified bridge, that – the wall that’s between those. The way I take it is part of Secretary Austin’s
statement was silos are no longer tolerated. We need to get all these things that we've got working together better so we can do – as you mentioned, we can have the warfighters be more effective, and when we do assist somebody we can be better at it and not impact ourselves at the same time quite as much. Is that a fair statement?

ASD Rosenblum: Yeah, no – excuse me.

Dr. Cullison: And while I’m going on that, as I understand it you have the authorities, basically, you need to do things. You have asked for more money, and you could perhaps expand on that a little bit.

So how was the council formed? Who’s on it, and why? You asked for a lot of money; why did you do that? (Laughter.)

ASD Rosenblum: OK. Well, the two are actually interrelated.

Dr. Cullison: OK.

ASD Rosenblum: So I appreciate the question very much.

So early on in the review, we knew that we wanted to preference in the review anything that the department might need to be built into the FY ’23 budget. And so that’s why, with the existing budget that the – was passed into law, you see a significant – almost a billion-dollar increase across the five-year fiscal program for the department for the Chem-Bio Defense Program. We knew very early on without a review that there was significant pieces of work that needed to be done, particularly coming out of COVID, largely related to the medical architecture and changing the approach on that front.

But one of the things that became evident very early on in the review was that the department had a fundamental governance problem and that, as you’ve just articulated, Tom, there’s a lot of very good work being done across – and I call them stove piped centers of excellence, where the department was doing very good work but as you moved up into the senior leadership there was not an awareness nor an ability to make decisions across the enterprise of the department. And that is a fundamental problem. And it’s a fundamental problem when the first place that comes up to is the deputy secretary of defense. So very early on when we were doing our check-ins with the deputy secretary of defense as well as the vice chairman, who said how it is going, we said, you know, well, but one of things we want to flag very early on is we are going to have to come back with some recommendations on new governance.
And that was not a shock to the deputy secretary, as you can imagine, but it then really helped us to understand, as we found issues that formed the basis for the recommendations, that we could not go back to a world where – whether it was personnel and readiness, acquisition and sustainment, you know, here’s a gap; please go fix it – that we would then say, OK, hope it turns out well. No. That there needed to be the ability to govern it across the department, to actively be managing and keeping track of: Are we filling the gaps that we have? What new challenges are we encountering?

And so that was the basis for, and the reason for making a decision to establish a Biodefense Council. And it was actually an exception that was made by the deputy secretary, because when she came in and set about how she and Secretary Austin are governing the department, it was we are going to go through regular order. We are not going to establish new bodies. But rather, this is how we’re going to govern on a day-to-day basis. But the need was so compelling for the department in the area of biodefense, and the biodefense, you know, enterprise, that she said: We need to be able to establish a body that’s directly responsible to the deputy secretary to be looking at the range of reforms that are needed.

And that decision also became very important to the back part of your question, on how we came up with, financially, what kinds of investments the department needed and requested, both in the FY-’23 bill, as well as what’s up right now with Congress in the FY-’24 bill. And by having the Bio Posture Review operating as an early rendition, if you will, of the Biodefense Council, we were able to work together collaboratively on what is the full scope of those investments, whether it be for training and exercises, you know, early warning and bio surveillance.

And came up with what we believe is a very defensible request for about $800 million in FY-’24. And was something that, you know, we – I’ve spent a lot of time with Congress discussing, and have had a good amount of support. And Congress, of course, has been a very important partner to us overall in moving that forward. So that was our experience with the Bio Posture Review that will now migrate permanently and institutionally into the Biodefense Council.

Dr. Cullison:

So early on in the discussion of this, the Nuclear Posture Review was mentioned as a model. That it’s there. It’s part of the National Defense Strategy as an addendum. Do you see this having life, having legs like the Nuclear Posture Review? Steve mentioned that the worst is over, now what? So the thing that we all worry about is that everybody will shrug, as the country seems to be doing, and saying, oh, good. COVID is over. We don’t have to worry about this anymore. How do we keep the emphasis going forward on this?
ASD Rosenblum: Yeah. So, you know, I agree with you very much. We cannot just be relying on a system where every four years or every eight years the Department of Defense reviews what it’s doing, whether it be on nuclear issues or biologic issues. And your reference of nuclear made us think very early on that the Nuclear Weapons Council, which is a similar body— in that case, it’s statutorily required—and it has all the key senior decisionmakers from throughout the department that are working on nuclear issues. The undersecretary for policy, undersecretary for acquisition and sustainment, as well as the military services departments, the vice chairman.

And we thought a similar model made a lot of sense for the Biodefense Council. That the work that was done and represented throughout the Bio Posture Review by all of those organizations, the council needs to have those undersecretaries on that council to make seniormost decisions. The composition of it will be the undersecretaries at the OSD level, as well as service representatives, as well as representatives from Northern Command – because of their singular responsibility for pandemic preparedness and Department of Defense support to civil authorities – as well as Special Operations Command. They have responsibility as the coordinating authority for WMD-related activities.

So it’s not just an OSD body. It is very much one that will—we hope, we’ve not met yet—but will have active participation from the services, from the combatant commands, so that it has that element of hearing from all parts of department, where are the challenges and what is needed to get after them?

Dr. Cullison: I’m assuming, like most bodies like this, there’s lower-level working groups that will feed into this on a regular basis and meet more often. Is that correct?

ASD Rosenblum: Yeah. Why don’t I ask Richard and Brandi to talk to that?

Mr. Johnson: Sure. Just to briefly say, as somebody who also co-chaired the Nuclear Posture Review, I think my colleagues—and Dr. Vann and I served as the day-to-day co-chairs working group for the BPR. And I think she probably got sick and tired at the end of it when I kept making all the comparisons to the Nuclear Posture Review.

But as ASD Rosenblum noted, I think that there was some value there in one of the outcomes in the NPR was, as we do NPR implementation, a lot of those issues that were identified had a body to go back, to be the lead for implementation. In many cases, it was the Nuclear Weapons Council.
In other cases, it was policy or somewhere else. And I think as we were going through the process we realized, number one, just the value of getting this collective group of people and officials into the same room on really a weekly basis to have these discussions and dialogue and identify gaps and seams wherever they may be.

And so we kind of recognized, you know, we probably should sustain this in some way, to the point on sustainment. And I always laugh. I think people wince when I say this, because it did take us a while to do, but just as with a Nuclear Posture Review, I would hope that this would not be the first and the last Biodefense Posture Review. I think that there will need to be a regular review of this, which, again, is the value of the council existing to determine – you know, I’m not saying it has to be every presidential term or every administration. That may be up for the council to decide. But there should be sort of a regular relook at this.

And then, of course, in stride, if issues are identified or need to be adjusted, that’s where the council exists. One of the things that we talked about in the charter for the council was if we have a major issue, a pandemic of some sort, how do we mobilize and respond? And I know, I see Dr. Friedrichs in the – in the audience, who lived through this before I was there. But I know there was a lot of scramble at the beginning of COVID to figure out who are the right people, what was the right venue, what was the right body, how to bring all this together?

Well, guess what? We will have a council now that is basically all of those people, right? (Laughs.) And allows us, working in collaboration with my colleagues in policy that do these kinds of responses, to quickly bring folks together and not have to fight the bureaucratics, but then to worry about what is needed to do response, to get funding, et cetera. So I think that they’re – frankly, the conduct of doing the BPR in the first place just itself was useful in identifying that we needed this regular kind of battle rhythm amongst players.

Dr. Vann:

Yeah. So the one word that you left out was in a coordinated way, right? So that is going to be the key of the council whenever there is a response, is the council will have all of the OSD elements engaged. The Joint Staff, combatant commands, and the services. So all of those components that might have – or, might play a part in a global response or a targeted response will all come together in this council moving forward.

The other thing that I would like to highlight is you mentioned the working groups, right? So the council recognizes that in order to be able to address these evergreen issues that we are identifying, with the complexity of the environment that Dr. George mentioned, the policy challenges, strategy challenges, and then ultimately how do we
appropriately prioritize some of the efforts that we need to do moving forward – we can’t do that by just kind of dropping something on the council.

So there will be bodies that are either ad hoc or evergreen that will help shape that environment across the Department of Defense in the enterprise of biodefense within the department. And so that’s going to be part of this level of effort.

Dr. Cullison: Just by way of example, to take a little deeper dive on those, let’s use research, development and acquisition for example. You point out there’s many gaps and seams in there. There’s a lot of research going on in DOD for lots of reasons, and protective stuff in sensors and biologics. How does the council look at that area? How do you decide how – where the gaps are, where the overlaps are? Can you just dive a little bit into that to show us how this works?

Dr. Vann: Yeah, so, you know, first of all, what I’ll say from the BPR standpoint, we didn’t take a – we intentionally did not take a specific view on developing an S&T or an RDA pipeline or plan. We touch it from a very broad sense to say that these organizations, primarily the Chem-Bio Defense Program and Defense Health Program, needs to make sure that we are pivoting to looking at not just the current threat, but what is the threat of the future and how do we get after that ultimate resilience protection and understanding the domain of, you know, the next 10-15 years?

And we will continue to have to do that. But we also recognize that multiple of those organizations are developing their own RDA strategy, their own S&T development pipeline. So we wanted to highlight all of the amazing work that’s done within those organizations, and let them do that work. From a Biodefense Council perspective, though, the council will help to integrate and make sure that those organizations doing research and development, or doing S&T are communicating effectively and collaborating in a way that is a force-multiplier for the department. And then also, working with our interagency partners to understand what do the broader biodefense portfolios look like? So that we can be additive to the work, rather than trying to duplicate.

Dr. Collison: We’re a little – go ahead. Go ahead, go ahead.

ASD Rosenblum: Just real quickly, to foot-stomp, because I think it’s a good example, is one of the things – and Brandi spoke a little bit about this – but one of the things that the Bio Posture Review did look at was where were those seams? So yes, there is RDA, you know, research and development done in various parts of the department. But the deputy secretary asked us: Please make sure in this review that we can say discretely, the Chem-Bio
Defense Program does X, whereas, you know, the Defense Health Agency does Y.

And while no one – and while there will at times maybe be things that are relevant, that we wanted to make sure – and particularly for our discussions with Congress – they knew what was being funded where, and what the mission space was for the discrete areas. And coming out of the Bio Posture Review, I believe that the department has a much clearer picture on who's doing what, for what reason.

Dr. Collison: And that supports your budget request very well.

ASD Rosenblum: Yes, correct.

Dr. Collison: We’re running a little low on time. We have a lot of very interested and very capable people in the audience. We’d like to give you a chance to ask any questions you may have. There’s microphones in the back, if you’d like to bring something up. If you could go to the mic, identify yourself.

Q: Hi, I’m Jeff Sturchio. I’m a senior associate here at CSIS.

This has been a fascinating discussion. And obviously, the work that the Biodefense Posture Review did and the Biodefense Council will do is highly complex and involves a lot of different moving parts within the Defense Department. What I’m interested in is to what extent will the Biodefense Council be able to draw on the insights and expertise of allies and partners, and of other stakeholders within American society outside of the Defense Department? You know, there are academics who are experts in this area. There are obviously many stakeholders who have an interest in biodefense. So to what extent will you be able to draw on those kinds of perspectives as well in the ongoing work?

ASD Rosenblum: Yeah. Thank you for the question. You know, we hope that it will continue and now be even more, based on our understanding of who is doing what throughout the department. And I think this goes back to your question on: Is the Biodefense Council supported by the regular work that’s underway at the department? And the answer to that is yes. And so through all of the standing responsibilities that are there in the Department of Defense, those do not change. So work with allies, work with academia, work with industry, all of that will continue and remain the same.

What is exciting for us, from a Biodefense Council perspective, is we can then share those insights with the senior leadership within the Department of Defense. Say, coming out of this working group that was with the U.K., was with, you know, think tanks, et cetera, this is what the
Q: I’m Gigi Gronvall from the Johns Hopkins Bloomberg School of Public Health Center for Health Security. I have two quick questions.

One, I was really well, first of all, congratulations. And second, I was really heartened to hear you talk about partnerships – real partnerships with allies and working to boost biosafety and biosecurity. The problem is, traditionally that has been very hard to measure. And as a result, it is much easier to measure stuff like pieces of equipment that ended up getting piled in – that are broken and left in laboratories in under resourced parts of the world. So how are you going to be able to provide real support and partnerships internationally like that?

And the second question is: Are you going to be tapping for – there’s a lot of work to be done looking this over. Are you going to be tapping, like, the Defense Science Board and other kinds of sources for expertise? Thank you.

Mr. Johnson: Maybe I’ll start and welcome others to chime in.

You’re right; I mean, all of these things are a little bit difficult to quantify. I do think that – I’ll use as an example the CTR Program, which is not the only program, but we now have 30 years plus of experience doing this. And as was mentioned earlier, one of the things we really focus on is not just the provision of, you know, helping to build a lab, helping to enhance security, helping to do training, but the sustainment element of that. And it’s something that we talk about constantly.

For example, a lot of the programs that we do with training are not just training; they’re train the trainers. And in fact, for example, when I was in Kenya recently, the folks there talked about how they’re not just training Kenyan officials, but they’re training officials from all around different parts of the region and, in fact, all of the continent. That’s the kind of sort of force multiplier, to use that overused term, that we want to see.

I also think that we have some existing dialogues and bodies where, frankly, we can bring in some of the knowledge and expertise that we’ve learned from the BPR and apply those to some of our alliance partnerships and relationships. There is a specific body at NATO, for example, that I attend regularly, which should be the oversight body for the new NATO CBRN Defense Policy. And we worked very closely with the NATO international staff to build an implementation plan that says: OK, you have a plan now; what are you going to do with it?
The other thing that I think is important for us to do, and that we are
doing more and more, is to go through with allies and partners and
actually do what you might call tabletop exercises or scenario-based
discussions, because sometimes these things are very hard to – (laughs) –
distill into a 90-minute panel or even a paper. But when you actually go
through what would happen in various scenarios – whether it’s
accidental, whether it’s deliberate, whether it’s naturally occurring – that
helps to illuminate sometimes for allies and partners who may not have
thought as much about this what they will need to be able to do in this
regard.

So I do think that there are some things that we – and this is where I will
turn to my colleagues because they do this more than I do – that we can
maybe track more, you know, numerically, if it’s PPE or things like that.
There are other things that we’re going to have to do through these kinds
of dialogues and regular exercising, if you will. And I think training and
exercising is important not just for U.S. forces for the total force, but for
our allies and partners – and doing that in an integrated way when we do
joint exercises, whether at NATO, whether it’s with South Korea, Japan,
Australia, et cetera.

ASD Rosenblum:

I have a request, actually, that your question made me think about. And
this does not relate to the allies, but very truly in terms of partnerships.

We were greatly helped, as I mentioned – and it was certainly not a
throwaway comment – by the consultations that we had before we
started the BPR, be they here, with Johns Hopkins. And they – you know,
you all very nicely pulled together a range of experts. You know, Brandi
and I went up to Boston to talk with some of the biotech companies up
there. And you know, so my request is please don’t wait for us to reach
out and ask; help us with that. We get completely inundated in day-to-
day inboxes, to our detriment. And so if there is interesting work that you
all are doing, please don’t wait until it’s published. Please don’t want until
the volumes come out. Please just call us up, and I promise you I will
meet with you.

Having come from the, you know, NTI and the think-tank world and the
NGOs, I know the breadth, the depth, and the very, very valuable work
that is being done. And so I’m hungry for that, and I know our team is as
well. So my request back is: Help us with that to keep us current, to tell us
what’s on your mind. What are you worrying about? What are things that
are foremost on your minds? You guys are closer to the labs than we
necessarily are in OSD. So, you know, please help us with that. So that’s a
plea there.
Dr. Vann: Yeah. I think the last thing that I just – I want to say is, you know, in our chapter talking about coordination and collaboration, we, as the Biodefense Council reps that are here today, recognize – and it was discussed broadly that the DOD, as amazing as we are in logistics, in R&D, and all of the other areas of expertise, we cannot and should not do this on our own, right? We have to collaborate with our interagency partners, with our allies globally, but also with industry and academia. We don’t own the supply chains. We don’t own the manufacturing. And for the most part, you know, we are not doing the lion’s share of research and development and S&T work, right?

So we have to coordinate and collaborate, and expand the conversation beyond the walls of the department and beyond the silos that we have now broken down internally. Now it’s about coordinating and collaborating more broadly. And so I will echo that plea: We are looking and we are hungry for those engagements and opportunities where we can have those conversations.

Dr. Cullison: This has been a very broad, wide-ranging, and rich discussion, and we’ll continue this at an off-the-record lunch in a little bit. But Secretary Rosenblum, thank you very much. Do you have any closing comments you’d like to make before we – before we go here?

ASD Rosenblum: Yeah, no, again, thank you very much to CSIS. And one of the things that we have touched on a little bit in terms of investments and whatnot is that, you know, again, to reinforce how critical Congress and the professional staff have been in helping us to get to this point, both in terms of talking through where we’ve asked specifically for money but, you know, Congress has been asking the Department of Defense for years now: How are you organized around this? How is it going? How can you be more effective? And then COVID hit, of course, and then we came back, rightly, and said: Can we hold off on answering some of these questions until we can complete the Bio Posture Review? But that’s a partner in this theme of partnerships where we certainly owe a debt of gratitude not just for the support financially, but also for the perspectives from the Armed Services Committees, from the appropriators, and that whole piece. And so I just wanted to make sure we touched on that as well.

Dr. Cullison: Thank you.

Please join me in thanking Asha George, Brandi Vann, Richard Johnson, and Secretary Deborah Rosenblum for coming here today and enlightening us. Thank you very much for a great discussion. (Applause.)

(END)