

THE STATE AND THE BODY: A CHEMICAL-WEAPONS TEST

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✘ Michael Crowley, [Open Democracy](#), 26 October 2009

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*Michael Crowley is project coordinator of the Bradford Non-Lethal Weapons Research Project (BNLWRP). He is the author of the project's report, **Dangerous Ambiguities: Regulation of Riot Control Agents and Incapacitants under the Chemical Weapons Convention** (University of Bradford, October 2009)*

It is seven years since, at 6am on 26 October 2002, Russian security forces deployed an incapacitating chemical weapon in an attempt to free over 800 people who had been held hostage by armed Chechen fighters for fifty-seven hours in a Moscow theatre. Most of the hostages were saved, but more than 120 died as a result of the incapacitant (and all the forty-one attackers were killed in the operation). The damage was compounded by the secrecy surrounding its deployment, which delayed and compromised the treatment of the surviving hostages, in turn contributing to further deaths and long-term health problems.

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It was only on 30 October that Russian health minister Yuri Shevchenko partially identified the incapacitating agent as "a mixture of derivative substances of the fast-action opiate fentanyl." The minister refused to be more precise about the chemicals used; he even replied to a parliamentary

question on 11 December 2002 by saying this was a "state secret." To this day, the Russian authorities have still not explained what chemical or chemicals were employed, nor provided any details of the levels of production or stockpiling of such agents. Moreover, there are reports of the later use of incapacitants by Russia, as well as of continuing research by a number of states and interest shown by certain international organisations.

Since the Moscow siege, however, the international community has refused to address the dangers of the development and proliferation of such weapons. This makes timely a new report by the Bradford Non-Lethal Weapons Research Project (BNLWRP) - Dangerous Ambiguities: Regulation of Riot Control Agents and Incapacitants under the Chemical Weapons Convention - which highlights the inability of the international-control regime established under the The international-control regime established under the Chemical Weapons Convention of 1992 effectively to regulate incapacitants.

There is no agreed definition of incapacitants (which are also referred to as advanced riot-control agents; biochemical agents; biotechnical agents; calmatives; incapacitating biochemical weapons; and immobilising agents). They can be described as a disparate range of agents - including pharmaceutical chemicals, bioregulators and toxins - which act on the body's biochemical and physiological systems (such as the central nervous system) to disable the victim. This can happen by causing disorientation, hallucination, or loss of consciousness; in higher doses, their action can result in death.

It is true that incapacitants are covered by the 1992 convention; but it is flawed by dangerous ambiguities in the text and limitations in its current implementation. These weaknesses have been reinforced by a collective failure of CWC states-parties and policy-making organs to confront the problem.

Research, risk and regulation

This situation carries four risks.

First, it allows state practice to determine the scope and nature of incapacitant regulation. The potential consequences of this are outlined by the Weapons of Mass Destruction Commission:

"There is an increasing interest among some governments to adopt a more flexible interpretation of the CWC rules on the use of incapacitating chemical weapons, even as a method of warfare, in order to use them in diverse situations. Such an interpretation, in the view of the Commission, would constitute a dangerous erosion on the fundamental ban on chemical weapons that the authors of the Convention intended."

Second, a number of countries appear to have initiated or continued work on incapacitants. China, the Czech Republic, the United States and Russia have undertaken research activities of concern; France and Britain, and Nato and the European Defence Agency have shown an interest in these agents.

Third, the likely consequence of this work and interest is that the dangers of law-enforcement officials using incapacitants - for repression, or by military personnel in armed conflict - will grow; in turn the risk of their acquisition by terrorists, paramilitary organisations and criminal gangs will also increase.

Fourth, incapacitant research, if allowed to continue unchecked and in secret, may lead to even more perilous developments. In particular, if weapons designers put to use some of the current revolutionary advances in genomics, biotechnology, synthetic biology, neuroscience and medical pharmacology, the resulting violations could be profound. The British Medical Association (BMA) summarised the danger in a 2007 report:

"Using existing drugs as weapons means knowingly moving towards the top of a 'slippery slope' at the bottom of which is the spectre of 'militarization' of biology; this could include intentional manipulation of peoples' emotions, memories, immune responses or even fertility" (see "The use of drugs as weapons", British Medical Association, May 2007).

Such concerns are reinforced by a report published in 2008 by the National Research Council in the United States. Emerging Cognitive Neuroscience and Related Technologies discusses several areas of contemporary and possible future research and development that could be applied to the weaponisation of incapacitants.

The potential misuse of medical pharmacology is only part of the story. The report also warns of the threats resulting from developments in nanotechnologies or gas-phase techniques that allow dispersal of highly potent chemicals over wide areas: "technologies that could be available in the next 20 years would allow dispersal of agents in delivery vehicles that would be analogous to a pharmacological cluster bomb or a land mine."

The 188 states parties to the CWC will gather in The Hague on 30 November 2009 to assess its implementation. These governments have previously considered the regulation of incapacitants a problem too difficult to deal with, but it is one they must now face. If they do not then the events in Moscow in October 2002 may well become the prelude to greater horrors.

