Overview of Federal Programs to Enhance State and Local Preparedness for Terrorism with Weapons of Mass Destruction

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Over the past five years, the United States has launched an unprecedented series of initiatives to prepare for the possibility of a terrorist attack employing a weapon of mass destruction (WMD) within the United States. These initiatives, originating in Congress, the White House, and Cabinet departments, have resulted in a complex web of programs to improve the preparedness and response capabilities of local, state, and federal agencies by providing specialized equipment, training, and planning assistance. While a debate has raged over the risk posed by terrorist groups seeking to cause mass casualties with chemical, biological, nuclear, or radiological weapons, federal spending on domestic preparedness has climbed steadily despite the lack of consensus on the severity of the threat. From 1997 to 2000, federal spending to prepare for WMD terrorism swelled from roughly $130 million to $1.4 billion, a tenfold increase. Almost one-quarter of the entire domestic preparedness budget, and roughly one-half of federal spending on preparedness and response for WMD terrorism, has been in the form of federal assistance to state and local governments.

Given budget constraints at the state and local levels, the need to allocate available resources to more mundane and immediate problems, the low probability of any single jurisdiction becoming a target of WMD terrorism, and the lack of requisite expertise to address this threat, state and local agencies rely on the federal government for funding, equipment, training, and planning assistance to enhance their preparedness.

1 Although the term “weapon of mass destruction” has traditionally encompassed only chemical, biological, radiological, and nuclear (CBRN) weapons, federal criminal law (18 U.S.C. Section 2332a) includes conventional explosives and incendiary devices in this category as well. Since the characteristics and effects of CBRN weapons are significantly different from those of explosives and incendiary devices and thus require special preparedness measures on the part of public health and safety agencies, this report uses the term “weapon of mass destruction” in its traditional meaning.

2 For assessments of the threat posed by WMD terrorism, see Brad Roberts, ed., Terrorism with Chemical and Biological Weapons: Calibrating Risks and Responses (Alexandria, VA: Chemical and Biological Arms Control Institute, 1997); Richard Falkenrath, Robert Newman, and Bradley Thayer, America’s Achilles’ Heel: Nuclear, Biological and Chemical Terrorism and Covert Attack (Cambridge, MA: MIT Press, 1998); Jessica Stern, The Ultimate Terrorists (Cambridge, MA: Harvard University Press, 1999); General Accounting Office, Combating Terrorism: Need for Comprehensive Threat and Risk Assessments of Chemical and Biological Attacks, GAO/NSIAD-99-163, September 1999; Jonathan Tucker, ed., Toxic Terror: Assessing Terrorist Use of Chemical and Biological Weapons (Cambridge, MA: MIT Press, 2000); Brad Roberts, ed., Hype or Reality? The “New Terrorism” and Mass Casualty Attacks, (Alexandria, VA: Chemical and Biological Arms Control Institute, 2000).

3 The Office of Management and Budget (OMB) did not begin tracking federal spending on counterterrorism and domestic preparedness until 1998. Thus the figure for fiscal year 1997 is an estimate based on funding for the Department of Defense, Department of Health and Human Services, and U.S. Customs Service under the Nunn-Lugar-Domenici bill as well as funding for the Department of Justice and Federal Emergency Management Agency under the Omnibus Consolidated Appropriations Act of 1997. The fiscal year 2000 figure is from Office of Management of Budget, Annual Report to Congress on Combating Terrorism: Including Defense Against Weapons of Mass Destruction/Domestic Preparedness and Critical Infrastructure Protection, May 18, 2000, p. 45.
preparedness for a WMD terrorist incident. The proliferation of new assistance programs, offices, and special response units at the federal level, driven in large part by bureaucratic politics and congressional earmarks, and the lack of a comprehensive national domestic preparedness strategy have caused considerable confusion at the state and local levels. The purpose of this report is to provide an overview of the current federal programs to enhance state and local preparedness for terrorism with weapons of mass destruction. The report describes the origin, purpose, and current status of the major federal domestic preparedness assistance programs.

More than 40 federal agencies have some role in combating domestic or international terrorism. Only five, however, have significant programs to assist state and local agencies in preparing for WMD terrorism: the Department of Defense (DOD), the Department of Justice (DOJ), the Federal Bureau of Investigation (FBI), the Department of Health and Human Services (HHS), and the Federal Emergency Management Agency (FEMA). In addition to developing programs to build capacity at the state and local level, DOD, DOJ, the FBI, HHS, and FEMA plus the Department of Energy (DOE), Environmental Protection Agency (EPA), and U.S. Coast Guard (USCG) control specialized assets that could be called upon to respond to a WMD terrorism incident. (Lists of the key response and support assets available to the federal government to assist state and local jurisdictions in responding to such an incident are located in the appendices.)

BACKGROUND
In the aftermath of the Oklahoma City bombing on April 19, 1995, and the nerve gas attack in the Tokyo subway system on March 20, 1995, the United States initiated a new effort to combat domestic and international terrorism. In June 1995, President William Clinton issued Presidential Decision Directive (PDD)-39, “U.S. Policy on Combating Terrorism.” PDD-39 established a framework for domestic preparedness activities and clarified the roles and responsibilities of federal agencies in the event of a WMD incident. Recognizing that terrorists may strike without warning and that federal assets would take

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5 The plans, policies, and procedures for state and local officials to request federal assistance in response to the threat or use of a weapon of mass destruction are beyond the scope of this report.
6 Response assets are those units with specially trained and equipped personnel that could be deployed to the scene of a WMD incident. Support assets are those which could provide expert assistance, laboratory analysis or other specialized services in the event of a WMD incident. Support assets tend to be reliant on fixed, permanent facilities to provide these capabilities even if they deploy small teams to the incident. These appendices are illustrative and are not meant to be a definitive survey of all available federal assets or indicate which assets would be actually be needed to respond to a WMD incident.
several hours to arrive at the scene of an attack, Congress in 1996 passed the Defense Against Weapons of Mass Destruction Act (also known as the Nunn-Lugar-Domenici program) to train and equip state and local emergency services personnel who would be the first responders to a domestic terrorist incident.7

In May 1998, President Clinton issued an additional directive to strengthen the role of the federal government in preparing for unconventional terrorism, including the use of weapons of mass destruction, cyberterrorism, and attacks on the nation’s critical infrastructure. PDD-62, “Protection Against Unconventional Threats to the Homeland and Americans Overseas,” established the Office of the National Coordinator for Security, Infrastructure Protection, and Counter-Terrorism within the National Security Council (NSC). This office oversees federal programs and policies for counterterrorism, protection of critical infrastructure, and preparedness and consequence management for catastrophic terrorism. The Clinton administration also initiated a number of other programs, particularly in the field of countering biological terrorism, to improve federal capabilities and prepare state and local governments for WMD terrorism.8

In conjunction with the heightened attention to terrorism at the national level, overall federal spending to combat terrorism has increased significantly. By 2000, funding in this field had increased 30 percent over the past three years to $8.4 billion.9 President Clinton requested $9.6 billion for 2001, for a total increase of almost 50 percent (see Figure 1).10 The rise in spending to counter WMD terrorism, specifically, has been even more dramatic. From 1997 to 2000, funding to prepare for WMD terrorism increased from roughly $130 million to $1.5 billion, a tenfold increase, and is expected to climb to $1.6 billion in 2001

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7 The Nunn-Lugar-Domenici program, named after its three co-sponsors in the Senate, was motivated by a series of hearings held between October 1995 and March 1996 by the Permanent Subcommittee on Investigations of the Senate Committee on Governmental Reform. See Senate Committee on Governmental Reform, Global Proliferation of Weapons of Mass Destruction, Parts 1-3 (Washington, D.C.: Government Printing Office, 1996).
8 In May, 1998 President Clinton announced the creation of a civilian stockpile of pharmaceuticals. In June, 1998 the White House requested an additional $294 million for domestic preparedness programs, including the pharmaceutical stockpile, increased research and development of drugs and diagnostic tools, and improvements for the public health surveillance system. White House Press Release, “Remarks by the President at the United State Naval Academy Commencement,” May 22, 1998; White House Press Release, “President Requests Additional Funding for Protection Against Biological and Chemical Terrorism,” June 9, 1998.
10 This figure includes the $9.3 billion in the original budget request plus an additional $300 million supplemental request sent to Congress in May. The additional funds are primarily for boosting law
Thus domestic preparedness was one of the fastest growing federal programs in the 1990s. Federal assistance to state and local governments to prepare for acts of terrorism involving WMD accounts for almost one-quarter of the domestic preparedness budget. Federal assistance to state and local governments to prepare for acts of terrorism involving WMD now totals more than $300 million annually, encompassing roughly one half of federal spending on the preparedness and response component of domestic preparedness (see Figures 3 and 4). Overall, assistance to state and local government consumes almost one quarter of federal spending on domestic preparedness (see Figure 5). Spending by specific agencies to combat WMD terrorism between 1998 and 2001 is detailed in Appendix A.

In addition to increasing expenditures to combat terrorism, the federal government has strengthened oversight of these programs. In 1998, Richard Clarke, the National Coordinator for Security, Infrastructure Protection and Counterterrorism, established interagency working groups to address different facets of the federal government’s domestic preparedness initiative, including a group on assistance to state and local authorities. In cooperation with Clarke’s office, the Office of Management and Budget (OMB) began tracking the spending of federal agencies on five types of programs to combat terrorism. (see Box 1) Finally, the legislative branch, through hearings and studies by the General Accounting Office (GAO), has engaged in an active oversight role over the federal domestic preparedness initiatives.

11 See footnote 2 for the source of the fiscal year 1997 figure. Figures for fiscal years 2000 and 2001 are from OMB, Annual Report to Congress on Combating Terrorism, May 18, 2000, p. 45.
12 These tables include the funding for programs to enhance state and local preparedness as well as other initiatives to combat WMD terrorism. It should be noted that the funds allocated to improving state and local preparedness listed in these tables reflect the agency’s level of expenditure, not the amount of money received by state or local agencies.
Box 1. Combating Terrorism Program Areas

- **Law Enforcement and Investigative**: Activities includes intelligence collection, programs to detect and prevent the smuggling of WMD into the United States, efforts to reduce the capabilities of groups and individuals to conduct terrorism, and the investigation and prosecution of those accused of committing terrorism.
- **Physical Security of Government Facilities and Employees**: Includes the protection of federal property and personnel, including officials and embassies overseas, as well as foreign embassies and dignitaries in the United States.
- **Physical Protection of the National Infrastructure**: Encompasses efforts to defend transportation, communication, energy, banking, financial, water, and emergency services against disruption or destruction.
- **Preparing for and Responding to Terrorism**: Includes the planning, training, equipment, and personnel involved in responding to a terrorist incident.
- **Research and Development**: Covers activities to develop technology to deter, prevent, detect or mitigate a terrorist attack.


Against this backdrop of heightened awareness of the threat of weapons of mass destruction, dramatically increased spending to counter this threat, and a stronger federal role in preparing the United States for terrorism, the following sections examine the current domestic preparedness assistance programs managed by DOD, DOJ, FBI, FEMA, and HHS.

**DEPARTMENT OF DEFENSE**

The mission of the Department of Defense is to protect the security of the United States by providing military forces to deter aggression and, if necessary, fight wars. Given its large and sometimes controversial presence in foreign countries, the U.S. military has devoted considerable resources to develop antiterrorist measures to protect its troops and facilities abroad and to create specialized counterterrorist units. In addition, the military has most of the nation’s expertise regarding chemical and biological weapons and has committed substantial resources to defending its troops and bases against these weapons.

Former Secretary of Defense William Cohen, speaking about the post–Cold War threats to America’s security, has said, “Most ominous among these threats is the movement of the front line of the chemical and biological battlefield from foreign soil to the American homeland.”

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13 For the text of these hearings and GAO reports, see the website of the Executive Session on Domestic Preparedness, http://www.esdp.org.
two major programs to assist state and local governments in preparing for WMD terrorism: the Domestic Preparedness Program and the WMD Civil Support Teams. Both programs have their roots in the Nunn-Lugar-Domenici program.15

**Domestic Preparedness Program**

The Nunn-Lugar-Domenici legislation directed the Department of Defense to provide training, expert advice, and equipment to state and local emergency response personnel. DOD, in conjunction with the DOE, EPA, FBI, FEMA, and Public Health Service (PHS), established the Domestic Preparedness Program to provide training and equipment to the 120 largest cities in the United States. The U.S. Army Soldier and Biological Chemical Command (SBCCOM), formerly the Chemical Biological Defense Command (CBDCOM), manages the program. Denver, Colorado was the first city to receive the training and equipment, in May 1997. As of May 2000, 22,900 first responders in 82 cities had received the training and 33 cities had completed the entire program.16

The Domestic Preparedness Program provides a week of training to city employees and officials, first responders, emergency managers, and medical personnel on recognizing and responding to a WMD terrorist incident. In addition, each city’s training program includes two tabletop exercises and a field exercise involving simulated chemical and biological terrorist incidents. DOD supplies $300,000 worth of protective gear, detection and decontamination equipment, and training aids to each city. The equipment is intended to give each city a limited response capability and to enable it to continue training its first responders following completion of the program. Technical advice is provided via a hotline to report actual or suspected WMD terrorism events. A helpline is also available via telephone or internet to provide information about weapons of mass destruction or DOD’s Domestic Preparedness Program. In addition, SBCCOM works with first responders to develop improved plans, procedures, and policies for responding to a chemical or biological terrorist attack. SBCCOM also sponsors an annual field exercise to improve the integration of federal, state, and local response assets during a WMD incident. These exercises have been held in Denver, Colorado (June 1997), Philadelphia, Pennsylvania (September 1998), and Portsmouth, New Hampshire (May 2000).17

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15 See Figure 6 for details on DOD spending on domestic preparedness.
16 Email communication with James Duhala, Product Manager, Domestic Preparedness Program, SBCCOM, Department of Defense, May 18, 2000.
On April 6, 2000, President Clinton issued a memorandum transferring responsibility for the Domestic Preparedness Program from DOD to DOJ, effective October 1, 2000. By this time, DOD will have completed all of the training and exercising for 68 cities and supplied these cities with training equipment. It will also have completed the basic training for another 37 communities. DOJ will be responsible for completing the training, equipping, and exercising of the rest of the cities in the program. DOD will continue to sponsor the annual federal-state-local exercises after October 2000.

**WMD Civil Support Teams**

In March 1998, Secretary of Defense Cohen unveiled a program to integrate the National Guard and Reserve components into DOD programs for responding to WMD attacks. According to Cohen, “This new initiative is going to be the cornerstone of our strategy for preparing America's defense against a possible use of weapons of mass destruction.” To manage the new program, the Consequence Management Program Integration Office (COMPIO) was established under the Director of Military Support (DOMS), which coordinates military assistance to civil authorities during emergencies such as riots and natural disasters. COMPIO will coordinate the identification, training, equipping, and exercising of Reserve and National Guard WMD assets and manage their integration into national WMD response plans.

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19 Prepared Statement of Curtis Straub, Director, Office for State and Local Domestic Preparedness Support, Department of Justice, Before the Senate Judiciary Committee, Youth Violence Subcommittee, Hearing on Training First Responders Into the 21st Century, June 11, 1999. However, in its 2000 appropriations for Justice, Congress requested that DOJ submit to Congress “a comprehensive plan for the transition and integration of Department of Defense programs into ongoing Department of Justice and other Federal agency programs in the most efficient and cost-effective manner” before proceeding with the transition. Conference Report H.R. 106-479 accompanying H.R. 3194, Consolidated Appropriations Act for 2000, November 17, 1999.


22 Prepared statement of Charles Cragin, Acting Assistant Secretary for Reserve Affairs, Department of Defense, before the House Committee on Government Reform, National Security, Veterans Affairs, and International Relations Subcommittee, Hearing on Combating Terrorism: The National Guard Rapid Assessment and Initial Detection (RAID) Teams, June 23, 1999.
The centerpiece of Cohen’s program is the WMD Civil Support Team (CST), formerly known as Rapid Assessment and Initial Detection (RAID) team. The purpose of the teams is to rapidly assess a suspected WMD incident, provide advice to the local incident commander and first responders, and facilitate requests for assistance from federal agencies. Besides standard military-issue and commercially available equipment, each team will be given sophisticated detection and communication capabilities not normally available to state and local agencies. The Unified Command Suite (UCS) enables the CST to serve as a bridge between the different radio frequencies of multiple first-responder agencies as well as to serve as a conduit for communications with federal agencies and experts. In addition, the Mobile Analytical Laboratory (MAL) will be able to perform field analysis of chemical and biological materials.

The Civil Support Teams, composed of 22 full-time Army and Air National Guard soldiers, are on call 24 hours a day and are able to deploy within four hours. Currently one CST is located in each of the ten FEMA regions. Each team is expected to act as a resource for all of the states within its region. In January 2000, Secretary Cohen announced the establishment of 17 additional teams. Both the original ten as well as the new teams are expected to become operational by the spring of 2001. For FY 2000, the CSTs received $75 million, including $58 million to establish the 17 new teams.

These teams are described here instead of in the appendix on federal response assets because these units are under the direct control of the governor of the state where they are stationed via the state’s adjutant general. If these teams are federalized during a crisis, they would fall under the command of the Joint Task Force-Civil Support (JTF-CS). JTF-CS was established in October 1999 as a headquarters unit within Joint Force Command (JFCOM) to develop plans for how active and Reserve military forces would provide support to state and local authorities in the event of a domestic WMD terrorist attack. Prepared statement of Admiral Harold Gehman, Commander in Chief, U.S. Joint Forces Command, before the Senate Committee on Armed Services, Subcommittee on Emerging Threats, Department of Defense Policies and Programs to Combat Terrorism, March 24, 2000.


These ten teams are located in the following states: California (southern), Colorado, Georgia, Illinois, Massachusetts, New York, Pennsylvania, Texas, Missouri, and Washington.


Table 1. Department of Defense and Intelligence Community Funding for Combating WMD Terrorism, FY 1998–2001 (millions)

<table>
<thead>
<tr>
<th>Function</th>
<th>FY98 Actual</th>
<th>FY99 Actual</th>
<th>FY00 Enacted</th>
<th>FY01 Requested</th>
</tr>
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<tr>
<td>Law Enforcement and Investigative</td>
<td>7.1</td>
<td>20.96</td>
<td>20.41</td>
<td>19.47</td>
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<tr>
<td>Preparing for and Responding to Terror</td>
<td>2.71</td>
<td>156.39</td>
<td>161.5</td>
<td>100.74</td>
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<td>First Responder Training and Exercises</td>
<td>0.05</td>
<td>49.9</td>
<td>32.1</td>
<td>10.2</td>
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<td>Other Planning and Assistance to State/Locals</td>
<td>0.0</td>
<td>15.6</td>
<td>8.5</td>
<td>10.3</td>
</tr>
<tr>
<td>Special Response Units</td>
<td>2.66</td>
<td>90.89</td>
<td>120.9</td>
<td>80.24</td>
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<tr>
<td>Research and Development</td>
<td>170.75</td>
<td>230.8</td>
<td>293.9</td>
<td>347</td>
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<tr>
<td>TOTAL</td>
<td>180.56</td>
<td>408.15</td>
<td>475.82</td>
<td>467.21</td>
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</table>


DEPARTMENT OF JUSTICE

The Department of Justice is the primary law enforcement agency in the United States. It is charged with both investigating and litigating cases in which a federal crime has been implicated. As a law enforcement agency, it includes the Federal Bureau of Investigation, Immigration and Naturalization Service (INS), the Border Patrol and the Bureau of Prisons. DOJ also provides federal leadership in preventing and controlling crime. DOJ’s efforts to enhance state and local preparedness through grant assistance and training are handled principally by the Office for State and Local Domestic Preparedness Support (OSLDPS). The domestic preparedness activities of the FBI, including the National Domestic Preparedness Office (NDPO) and the Bomb Data Center (BDC), are discussed in the following section.29

Office for State and Local Domestic Preparedness Support

OSLDPS, which is part of the Office of Justice Programs (OJP), was created in May 1998 in response to the growth in the number and size of DOJ programs designed to enhance the preparedness of local emergency responders. OSLDPS received $114 million in 2000 to provide equipment, training and exercise support, and technical assistance to state and local jurisdictions.30

29 See Figure 7 for a breakdown of DOJ spending on domestic preparedness.
OSLDPS currently provides grant assistance to states as well as county and municipal governments to purchase equipment for emergency response agencies. However, the office is shifting from this method of providing assistance to the provision of block grants to states (see below). In 1999, OSLDPS provided the 157 largest jurisdictions in the United States, including cities and counties, with grants of up to $300,000 to procure personal protective equipment; chemical, biological, and radiological detection and decontamination systems; and communications equipment. Roughly $30.7 million was dispersed as part of this program in FY 1999. OSLDPS also provided grants totaling $44 million to all 50 states to acquire equipment for state agencies as well as any jurisdiction not included in the 157 largest cities or counties. OSLDPS received a $75 million appropriation for equipment acquisition in FY 2000.

OSLDPS provides training to state and local first responders through several mechanisms. The largest programs are the Metropolitan Fire and Emergency Medical Services Training Program and the National Domestic Preparedness Consortium (NDPC). The Metropolitan Fire and EMS program provides operations-level training directly to fire, hazardous materials (HAZMAT) and emergency medical services personnel and can also train local fire and EMS trainers to become instructors. As of mid-November 1999, the program had reached an audience of more than 48,000 participants in more than 95 cities and counties.

The NDPC was formed by OSLDPS in June 1998 in response to congressional guidance. NDPC is a partnership between DOJ, DOE, and three public universities that provides training and runs exercises on operational and technical aspects of responding to WMD terrorism at its complex of consortium facilities, through regional courses, and via distance-learning technology. The consortium members received $27 million in 2000.

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35 See House Conference Report 105-405 to Public Law 105-119, p. 93.
The consortium comprises the following centers:

- The Center for Domestic Preparedness, Fort McClellan, Alabama, offers a venue to conduct training in a live chemical agent environment and to conduct field exercises. The center is operated by OJP and opened on June 1, 1998. It trained nearly 1,000 first responders within its first year of operation and will be able to handle 10,000 students annually by 2000.37

- The National Energetic Materials Research and Testing Center, New Mexico Institute of Mining and Technology, provides field exercises and training with live explosives.

- The National Center for Bio-Medical Research and Training, Louisiana State University, supplies expertise and training in biological agents and in law enforcement.

- The National Emergency and Response and Rescue Training Center, Texas A&M University, offers the expertise and facilities to conduct training and field exercises on urban search-and-rescue techniques.

- The National Exercise, Test, and Training Center, Nevada Test Site, conducts large-scale field exercises using live-agent simulations and explosives.

In addition to its core equipment and training programs, OSLDPS provides a wide range of technical assistance to jurisdictions to enhance their preparedness for terrorism. This assistance is available upon request and can be utilized to support training as well as planning needs. In addition, help is provided for capabilities assessments, equipment acquisition, equipment maintenance, along with exercise planning, execution, and evaluation.38

37 Prepared statement of Andy Mitchell, April 20, 1999. DOJ is also working with HHS to renovate and modernize the Noble Army Hospital at Fort McClellan to create a training center for paramedics, hospital administrators, and healthcare professionals in the triage and emergency care skills needed to effectively respond to a WMD terrorist incident. Prepared Statement of Dr. Robert Knouss, Director, Office of Emergency Preparedness, Department of Health and Human Services, before the Senate Judiciary Committee, Youth Violence Subcommittee, Hearing on Training First Responders Into the 21st Century, June 11, 1999.
Beginning in FY 2000, the allocation of DOJ funding for domestic preparedness support for training, equipment, and technical assistance will be linked to three-year statewide domestic preparedness plans being prepared by all 50 states under the supervision of DOJ. These plans will be based on the results of comprehensive needs and risk assessments being undertaken by the states with support from DOJ. The statewide approach to training, exercising and equipping first responders is expected to replace the city-oriented programs of DOD, which will be completed in 2001.

**Federal Bureau of Investigation**

The Federal Bureau of Investigation is the principal investigative arm of the Department of Justice and has the authority and responsibility to investigate violations of more than 200 categories of federal crimes. The bureau is authorized to provide other law enforcement agencies with cooperative services, such as fingerprint identification, laboratory examinations, training, and intelligence. The FBI has approximately 11,400 special agents and more than 16,400 support personnel.

In the event of a domestic terrorist attack, the FBI is designated by PDD-39 as the lead federal agency for crisis management, which includes “measures to identify, acquire, and plan the use of resources needed to anticipate, prevent, and/or resolve a threat or act of terrorism.” The FBI employs almost 1,400 agents in counterterrorism activities, including WMD coordinators in the FBI’s 56 field offices nationwide. Within the FBI, the two primary offices for supporting state and local domestic preparedness are the National Domestic Preparedness Office (NDPO) and the Bomb Data Center (BDC).

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40 For more information, see the Office for State and Local Domestic Preparedness Support website, http://www.ojp.usdoj.gov/osldps/assessments.htm.
42 FBI website http://www.fbi.gov/yourfbi/facts/fbimission.htm#structure.
National Domestic Preparedness Office

Attorney General Janet Reno announced the establishment of NDPO in October 1998 to provide “one-stop shopping” for state and local agencies on domestic preparedness issues. This initiative was the result of a conference sponsored by the Department of Justice in August 1998 to solicit feedback from state and local first responders and other stakeholders on the effectiveness of federal domestic preparedness programs. The stakeholders identified the lack of a central point of contact on domestic preparedness within the federal government as the most important shortcoming.

The mission of NDPO is twofold: to serve as an information clearinghouse for state and local agencies on all aspect of domestic preparedness and to coordinate federal policy regarding domestic preparedness assistance to state and local jurisdictions. NDPO does not provide direct assistance to state and local jurisdictions or have a role in the operational response to a WMD incident. As an information clearinghouse, NDPO will serve as both the designated point of contact for state and local agencies seeking information on domestic preparedness programs and as a conduit for disseminating relevant information to these agencies. As a coordinating office, NDPO seeks to enhance the quality of federal domestic preparedness assistance offered to state and local jurisdictions by setting national standards for equipment and training and reducing duplication among federal programs.

Although NDPO is housed in FBI headquarters and funded by the bureau, it is an interagency office that is comprised of representatives from DOD, DOE, EPA, FEMA, FBI, HHS, the National Guard Bureau (NGB), the Nuclear Regulatory Commission (NRC), OJP, and USCG. Approximately one-third of the staff consists of state and local experts from various response disciplines. In addition, a State and Local Advisory Group (SLAG) made up of state and local emergency response personnel has been formed to provide input to NDPO regarding strategy and implementation.

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49 ibid.
Congress approved the establishment of NDPO in November 1999 with $1.4 million in funding but did not appropriate the money for the organization’s operations. As of July 2000, the FBI had not yet reprogrammed the money authorized by Congress for NDPO.

**Bomb Data Center**

The Bomb Data Center, part of the FBI Laboratory, develops techniques, technology, and equipment to minimize the hazards associated with bomb disposal operations. In addition, the unit administers the Hazardous Devices School (HDS), located at Redstone Arsenal, Alabama, which trains public safety personnel in explosive device render-safe technology. HDS offers the only national certification program for state and local bomb technicians. In 1998, the school developed a one-week WMD emergency action course and integrated this training into its standard course in 1999. As of July 2000, more than 2,000 bomb technicians, virtually all of the certified bomb technicians in the United States, had received the training.

The BDC also manages the State and Local Bomb Technician Equipment Program initiated in 1999 to provide protective, diagnostic, and detection equipment to the roughly 435 state and local bomb squads that have received, or are in the process of receiving, accreditation from the FBI. This program received $25 million in 1999 and another $10 million in 2000.

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51 Telephone interview with Gary Rohen, Acting Director of NDPO, July 14, 2000.
Table 2. Department of Justice and Federal Bureau of Investigation Funding for Combating WMD Terrorism, FY 1998–2001 (millions)

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<tr>
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<td>Preparing for and Responding to Terrorism</td>
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<td>100.8</td>
<td>201.22</td>
<td>217.18</td>
<td>254.66</td>
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**FEDERAL EMERGENCY MANAGEMENT AGENCY**

The mission of FEMA is to reduce the loss of life and property and to protect the nation's critical infrastructure from natural and man-made hazards. FEMA’s staff of 2,500 personnel can be supplemented by more than 5,000 stand-by disaster reservists. In the event of a natural disaster or terrorist incident, FEMA is responsible for coordinating the emergency response activities of 29 federal departments and agencies in support of state and local governments. The concept of operations for this interagency coordination is described in the Federal Response Plan (FRP). PDD-39 reaffirmed FEMA’s role as the lead federal agency responsible for consequence management of domestic terrorist incidents involving weapons of mass destruction. Consequence management is defined as “measures to protect public health and safety, restore essential government services, and provide emergency relief to governments, businesses, and individuals affected by the consequences of terrorism.” FEMA subsequently developed an annex on terrorist incidents for the FRP, which was updated in April 1999.

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FEMA’s planning, exercises, and response activities relating to domestic preparedness are coordinated by the Senior Advisor for Terrorism Preparedness who reports to the director of the agency. FEMA assists states with planning, training, and exercising for consequence management through several mechanisms. FEMA provides formula grants to state emergency management agencies to fund terrorism consequence management and preparedness planning, training, and exercising. This program distributed $16 million in 2000. FEMA’s National Emergency Training Center (NETC) in Emmitsburg, Maryland, which includes the National Fire Academy (NFA) and the Emergency Management Institute (EMI), develops courses, offers on-site training, and distributes training material to state and local jurisdictions. NETC has distributed a general awareness training module for responding to terrorist incidents to some 35,000 fire and rescue departments, 16,000 law enforcement agencies, and more than 3,000 state and local emergency managers. FEMA also supports training activities by the 50 state fire training centers. These centers received $4 million from FEMA in 2000 to support delivery of NFA-developed training curriculum. FEMA also maintains the Rapid Response Information System (RRIS), an on-line database of training and planning resources related to WMD terrorism.

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63 FEMA Internet site, http://www.fema.gov/rris/. See Figure 8 for details on FEMA’s spending on preparedness.
Table 3. Federal Emergency Management Agency Funding for Combating WMD Terrorism, FY 1998–2001 (millions)

<table>
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<td>17.61</td>
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

The Department of Health and Human Services has the dual missions of enhancing the health and well-being of Americans and supporting scientific research in medicine, public health, and social services. As concern over biological terrorism has grown, HHS has emerged over the past several years as a major sponsor of domestic preparedness projects at the state and local level. In January 1999, at the unveiling of President Clinton’s FY 2000 budget to combat terrorism, Secretary of Health and Human Services Donna Shalala said, “This is the first time in American history in which the public health system has been integrated directly into the national security system.” HHS is responsible for two key domestic preparedness programs: the Metropolitan Medical Response System (MMRS) and the Bioterrorism Preparedness and Response Program (BPRP).

Metropolitan Medical Response System

The Office of Emergency Preparedness (OEP) has the responsibility within HHS for managing and coordinating federal health, medical, and health-related social services to major emergencies and federally declared disasters. OEP began developing the first prototype MMRS in 1995 in partnership with the

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Metropolitan Washington Council of Governments and its 18 local member jurisdictions.\textsuperscript{66} This system became the prototype for the response capabilities that were developed in Atlanta in 1996 in preparation for the Centennial Olympic Games and for the 25 local systems that HHS began developing in 1997.\textsuperscript{67}

The MMRS program provides grant assistance to cities to create an integrated response to WMD incidents within the framework of its current emergency response structure. To receive the $550,000 grant, each city must prepare a detailed response plan including pre-hospital, hospital, and public health response components. The grant assistance can be utilized for training or for the purchase of equipment or pharmaceuticals. While the initial focus of the MMRS program was on enhancing preparedness for an act of chemical terrorism, in 1999 OEP required MMRS cities to develop response plans for a bioterrorism incident including plans for early recognition, mass prophylaxis, mass patient care, mass fatalities, and environmental remediation.\textsuperscript{68} The goal of the program is to enable each city to treat 1,000 casualties.

In 1999, OEP received a total of $14 million to add 20 cities to the MMRS program and to supplement the initial 27 systems in order to respond to biological terrorism.\textsuperscript{69} OEP plans on expanding MMRS to 25 additional cities in 2000 and another 25 in 2001, bringing the total to 97.\textsuperscript{70}

**Bioterrorism Preparedness and Response Program**

In December 1998, the Centers for Disease Control and Prevention (CDC) established the Bioterrorism Preparedness and Response Program (BPRP) to lead an agency-wide effort to prepare for and respond to acts of terrorism that involve the actual, threatened, or suspected use of biological or chemical agents. In 2000, CDC received $155 million to carry out this mission, most of which was dedicated to countering

\textsuperscript{66} The MMRS program was originally called the Metropolitan Medical Strike Team (MMST). In some jurisdictions, MMRS is referred to as the Metropolitan Medical Task Force (MMTF).

\textsuperscript{67} Prepared statement of Dr. Robert Knouss, June 11, 1999.

\textsuperscript{68} While the original OEP grants were for $350,000, OEP added $200,000 in 1999 to enable cities to add a biological component to their plans and capabilities. Telephone interview with OEP official, April 25, 2000.

\textsuperscript{69} “President Clinton Unveils New Efforts to Combat Terrorism in an Address to the International Association of Firefighters,” *White House Fact Sheet*, March 15, 1999; Prepared Statement of Dr. Robert Knouss, Director, Office of Emergency Preparedness, Department of Health and Human Services, Before the House Committee on Government Reform, National Security, Veterans Affairs, and International Relations Subcommittee, Hearing on *Terrorism Preparedness: Medical First Response*, September 22, 1999.

\textsuperscript{70} “Keeping America Secure for the 21\textsuperscript{st} Century: President Clinton’s Initiative on Biological and Chemical Weapons Preparedness,” *White House Fact Sheet*, January 22, 1999; Office of Management and Budget, *Annual Report to Congress on Combating Terrorism*, p. 28.
biological terrorism. In addition to upgrading the CDC’s capabilities, BPRP initiated a grant program in 1999 to improve the capacities of municipal and state health departments to detect and respond to a terrorist attack involving a biological or chemical agent. CDC has awarded $55 million worth of grants under this program to the health departments of 50 states well as New York City, Chicago, and Los Angeles.  

The funding is targeted at five focus areas:

- **Preparedness Planning and Readiness:** This focus area will assist health departments in developing a public-health response plan for terrorist incidents and integrating these plans into states’ overall preparations for terrorism.

- **Epidemiology and Surveillance Capacity:** This program will improve the ability of health departments to detect unusual outbreaks of disease by expanding epidemiological capacity and improving surveillance systems.

- **Biological Laboratory Capacity:** This grant will provide public health laboratories with the capability to conduct rapid and accurate diagnostic tests for the biological agents of greatest concern.

- **Chemical Laboratory Capacity:** This assistance will establish the capacity in four state laboratories to accurately measure the level of exposure to toxic chemicals in people. These laboratories will serve as regional assets.

- **Health Alert Network:** The Health Alert Network will assist health departments in establishing an electronic communication network at the state and local level to facilitate communication, coordination, and training.

In addition to providing grants specifically designed to enhance public health laboratories, the CDC has established a Laboratory Response Network (LRN) that links public health departments at all levels to advanced diagnostic capabilities. The program is designed to increase the number of laboratories that are capable of detecting critical biological agents, reduce the time needed to confirm the presence of a critical agent in a clinical or environmental sample, and improve communication of testing results within the


73 Ibid.
public health community.\textsuperscript{74} As part of this program, CDC trained 700 laboratory and public health personnel in 1999 on protocols for detecting, handling, and shipping critical biological agents.\textsuperscript{75} A smaller network has also been established to build capacity at the regional level to measure human exposure to toxic chemicals that could be used by terrorists.\textsuperscript{76}

### Table 4. Department of Health and Human Services Funding for WMD Terrorism, FY 1998–2001 (millions)

<table>
<thead>
<tr>
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<td>1</td>
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<td>Other Planning and Assistance to State/Locals</td>
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<td>16.25</td>
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<td>Public Health Infrastructure and Surveillance</td>
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<td>62</td>
<td>88</td>
<td>85.5</td>
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<tr>
<td>Special Response Units</td>
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<td>52</td>
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<td>173.12</td>
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\textsuperscript{74} CDC, “Biological and Chemical Terrorism: Strategic Plan for Preparedness and Response,” \textit{Morbidity and Mortality Weekly Report}, April 21, 2000, p. 10.

\textsuperscript{75} CDC, National Bioterrorism Preparedness and Response Initiative Briefing Packet, April 17, 2000.

Appendix A: Figures on Federal Spending on Domestic Preparedness

Figure 1. Federal Funding for Combating Terrorism, FY 98-01

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<tr>
<td>Combating non-WMD Terrorism</td>
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Figure 2. Federal Funding for WMD Terrorism Preparedness, FY 98-01

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<td>1238</td>
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<td>1555</td>
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<td>Law Enforcement and Investigative</td>
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<td>143</td>
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<td>203</td>
<td>205</td>
<td>189</td>
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<td>Preparing for and Responding to Terrorism</td>
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<td>564</td>
<td>619</td>
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Figure 3. Federal Domestic Preparedness Assistance for State and Local Jurisdictions, FY 98-01

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<td>Total</td>
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<td>326</td>
<td>364</td>
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<td>Public Health Infrastructure and Surveillance</td>
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<td>91</td>
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<td>2</td>
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<td>Planning/Other Assistance to States and Locals</td>
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<td>Equipment for First Responders</td>
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<td>98</td>
<td>95</td>
<td>102</td>
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Figure 4. Federal Domestic Preparedness Assistance as Percent of Federal Spending on Preparing for and Responding to WMD Terrorism, FY 98-01

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<td>619</td>
<td>633</td>
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<td>Federal Domestic Preparedness Assistance as Percentage of Spending on Preparing and Responding to WMD Terrorism</td>
<td>30%</td>
<td>54.70%</td>
<td>52.70%</td>
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Overview of Federal Programs

Figure 5. Federal Domestic Preparedness Assistance as Percent of Total Federal Spending on WMD Terrorism Preparedness, FY 98-01

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<td>Federal Domestic Preparedness Assistance to States and Locals</td>
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<td>Total Federal Spending on Domestic Preparedness</td>
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<td>1238</td>
<td>1454</td>
<td>1555</td>
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<td>Federal Domestic Preparedness Assistance as Percentage of Spending on Domestic Preparedness</td>
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Figure 6. Department of Defense and Intelligence Community Spending on Combating WMD Terrorism, FY98-01

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Figure 7. Department of Justice and Federal Bureau of Investigation Spending on Combating WMD Terrorism, FY98-01

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Figure 8. Federal Emergency Management Agency Spending on Combating WMD Terrorism, FY98-01

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Figure 9. Department of Health and Human Services Spending on Combating WMD Terrorism, FY98-01

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<th>FY01 Requested</th>
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<tbody>
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<td>85.5</td>
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Appendix B. Federal Response Assets

Response assets are those units with specially trained and equipped personnel that could be deployed to the scene of a WMD incident. This appendix is illustrative. It is not meant to be a definitive survey of all available federal assets or to indicate which assets would be actually be needed to respond to a WMD incident.

DEPARTMENT OF DEFENSE (DOD)

52d Ordnance Group
Description: This Army unit provides explosive ordnance disposal (EOD) expertise to the military and other federal agencies. Four of the unit’s 37 EOD companies specialize in the identification, render safe, and disposal of improvised explosive devices that could be built by terrorists. These 22-member units can deploy within four hours of notification.77
Locations:
Andrews AFB, Maryland
Cape Canaveral AFS, Florida
Ft. Sam Houston, Texas
Naval Submarine Base, San Diego, California

Aeromedical Isolation Team (AIT)
Description: The purpose of the AIT “is to safely transport patients with potentially lethal communicable diseases for which no effective vaccines, chemoprophylaxis, or specific therapies exist.” The U.S. Army Medical Research Institute of Infectious Disease (USAMRIID) can simultaneously deploy two six to eight member teams, each capable of transporting one patient. The teams can deploy within six to twelve hours of notification.78
Location: Fort Detrick, Maryland

Chemical Biological Incident Response Force (CBIRF)

Description: CBIRF is a Marine Corps unit activated in April 1996 to provide the Department of Defense with a consequence management capability for domestic and international WMD incidents. The unit, composed of 375 members, can detect and identify chemical, biological, and radiological agents; extract patients from contaminated areas; decontaminate and treat patients, and provide security for these operations. CBIRF can sustain operations for up to 14 days without outside assistance. The unit has access to an Electronic Reachback Advisory Group to provide expert advice and assistance to the on-scene commander. In addition, CBIRF acts as a testbed for new tactics, technologies, and equipment related to WMD terrorism response. CBIRF can deploy within four hours if the unit receives prior notification.

Location: Indian Head Naval Surface Warfare Center, Maryland

Chemical Biological-Rapid Response Team (CB-RRT)

Description: The CB-RRT, organized by the Army’s Soldier and Biological Chemical Command (SBCCOM), is a joint unit built upon the existing WMD response assets of the Department of Defense. CB-RRT is designed to provide a graduated response depending on the scale and type of incident. Members of the team include the Technical Escort Unit (TEU), Army’s 52d Ordnance Group, USAMRIID, U.S. Army Medical Research Institute for Chemical Defense (USAMRICD), Edgewood CB Forensic Analytical Center, Navy Medical Research Institute, Navy Environmental and Preventive Medicine Unit, and Navy Research Laboratory. The Army’s TEU is the military’s premier organization for the disarming and disposing of chemical and biological devices and provides the lead element of the CB-RRT. This element can deploy within four hours of notification. The primary mission of this advance team is to assess a situation and provide advice and assistance to the incident commander. The main element of the CB-RRT can be ready to deploy in 18 hours and can be augmented by Explosive Ordnance Disposal (EOD) experts, laboratory support, and medical advisory personnel as needed.

Locations:
Aberdeen Proving Ground, Maryland
Dugway Proving Ground, Utah
Pine Bluff Arsenal, Arizona

Chemical Casualty Site Team (CCST)
Description: The CCST is maintained by the United States Army Medical Research Institute for Chemical Defense (USAMRICD). The team can be deployed by commercial aircraft at short notice to collect clinical information and conduct on-site testing for exposure to nerve agents.82
Location: Aberdeen Proving Ground, Maryland

Critical Response Task Force (CRTF)
Description: The CRTF is a joint unit formed by DOD in the event of a nuclear incident to provide consequence management support to domestic authorities. Members are drawn from a number of standing units such as the Air Force Radiation Assessment Team (AFRAT), Armed Forces Radiobiological Research Institute (AFRRI), Defense Nuclear Advisory Team (DNAT), Defense Technical Response Group (DTRG), Radiological Advisory Medical Team (RAMT), Army and Navy Radiological Control (RADCON) teams, and the Army’s 52d Ordnance Group. These assets can provide advice and assistance relating to health and safety concerns stemming from a nuclear or radiological incident.83

Naval Medical Research Center (NMRC)
Description: NMRC, formerly the Naval Medical Research Institute (NMRI), maintains a transportable field laboratory for the identification of biological warfare agents that can be deployed within four hours of notification.84
Location: Silver Spring, Maryland

82 Department of Defense and Department of Energy, Joint Report to Congress: Preparedness and Response to a Nuclear, Radiological, Biological or Chemical Terrorist Attack, April 1996, p. 21.
83 Department of Defense and Department of Energy, Preparedness and Response to a Nuclear, Radiological, Biological or Chemical Terrorist Attack, Joint Report to Congress, April 1996, pp. 10-14.
FEDERAL BUREAU OF INVESTIGATION (FBI)

Hazardous Materials Response Unit (HMRU)
Description: The HMRU was established in 1996 as part of the FBI’s Laboratory Division to collect and analyze evidence from the scene of a WMD incident. To accomplish this mission, HMRU has developed a containerized field-deployable laboratory to provide confirmatory analytical capabilities for a wide range of WMD materials.85
Location: Quantico, Virginia

Hostage Rescue Team (HRT)
Description: HRT is a specially trained and equipped Special Weapons and Tactics (SWAT) team capable of operating in a contaminated environment. It is part of the FBI’s Critical Incident Response Group (CIRG).86
Location: Quantico, Virginia

DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS)

Epidemiological Intelligence Service (EIS)
Description: The EIS is a cadre of CDC epidemiologists who support state and local epidemiological investigations into the causes and consequences of infectious disease outbreaks. Members of EIS are stationed at the CDC’s headquarters in Atlanta or at state and local health departments around the nation.
Location: Atlanta, Georgia

National Medical Response Team (NMRT)
Description: OEP has upgraded four of the 27 Disaster Medical Assistance Teams (DMATs) that are part of the National Disaster Medical System (NDMS) to be able to provide medical treatment to the victims of a chemical or biological weapon.87 These teams are comprised of volunteer medical personnel who are federalized for deployment to the scene of a disaster or terrorist incident.88 Each NMRT has access to a cache of pharmaceuticals to treat up to 5,000 people exposed to a chemical weapon and hundreds of

86 White House, op cit., p. 8.
87 The NDMS is a joint effort of HHS, FEMA, DOD, VA and private hospitals throughout the nation to provide medical treatment to casualties of a war or major disaster.
88 The NMRT in Washington, DC is based permanently in the city and does not deploy.
people exposed to a biological agent. The teams also have specialized personal protective equipment, detection devices, and patient decontamination capabilities.

Locations:
Denver, Colorado
Winston-Salem, North Carolina
Los Angeles, California
Washington, D.C.

**National Pharmaceutical Stockpile Program (NPSP)**

Description: The CDC initiated this program to stockpile pharmaceuticals and other medical supplies for treating casualties of chemical and biological agents and a system to distribute them in the event of a terrorist attack in 1998. The CDC’s goal is to be able to deliver a prepackaged shipment of antibiotics and other medical supplies anywhere in the continental United States within 12 hours. These “push packages” will be stored in at least four Veterans Administration (VA) sites around the country. The first package became operational in December 1999 at the Edward Hines VA hospital outside of Chicago, Illinois. In addition, the CDC is developing contracts with manufacturers to provide follow-on supplies and expand the stockpile to include other types of pharmaceuticals such as vaccines.

Locations: Hines, Illinois
Others to be determined

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91 HHS envisions stockpiling enough pharmaceuticals to treat 10 million anthrax victims, 1 million victims of plague or tularemia and 40 million victims of smallpox. Department of Health and Human Services, “HHS Initiative Prepares for Possible Bioterrorist Threat,” February 9, 1999.
93 House Committee on Government Reform, Subcommittee on National Security, Veterans Affairs, and International Relations, *Combating Terrorism: Management of Medical Stockpiles*, March 8, 2000
94 Telephone interview with Centers for Disease Control and Prevention official, November 9, 1999.
DEPARTMENT OF ENERGY (DOE)

Aerial Measuring System (AMS)
Description: AMS is composed of helicopters and fixed-wing aircraft that can conduct aerial radiation surveys to locate and characterize radioactively contaminated areas. These aircraft are capable of all-day/all-weather operations. The aircraft can be deployed within two hours of notification.\(^95\)
Locations:
Nellis AFB, Nevada
Andrews AFB, Maryland

Nuclear Emergency Search Team (NEST)
Description: The mission of NEST is to search for and identify nuclear materials, conduct diagnostic assessment of suspected nuclear devices, and disable such devices.\(^96\) NEST can provide technical assistance to the FBI in conducting search and recovery operations for nuclear materials, weapons, and devices and assist in identifying and disabling improvised nuclear devices (INDs) and radiological dispersal devices (RDDs).\(^97\) NEST personnel and equipment are available to deploy at all times and can include as many as 800 personnel.\(^98\)
Location: Nellis AFB, Nevada

Radiological Assistance Program (RAP)
Description: RAP teams can provide assessments of radiological contamination with hand-held radiation detectors and air monitoring equipment. They can also provide medical advice on the handling of contaminated patients. Thirty-eight six-person RAP teams are located throughout the country and can be deployed within two hours of notification.\(^99\)
Locations: DOE facilities in the United States.

Radiation Emergency Assistance Center/Training Site (REAC/TS)
Description: DOE can provide medical consultations or treatment 24 hours a day through REAC/TS. If necessary, a six-person response team can be deployed to assist in triage, diagnosis, treatment, and

\(^95\) Department of Defense and Department of Energy, \textit{op cit.}, p. 8.
\(^96\) Ibid., p. 7.
\(^99\) Department of Defense and Department of Energy, \textit{op cit.}, p. 8.
decontamination of patients exposed to radiation. REAC/TS also maintains a list of healthcare providers throughout the country who have been trained by REAC/TS for radiological emergencies.\textsuperscript{100}

Location: Oak Ridge, Tennessee

ENVIRONMENTAL PROTECTION AGENCY (EPA)

Environmental Response Team (ERT)

Description: EPA's ERT can provide 24-hour access to special decontamination equipment for chemical releases as well as advice on hazard assessment, decontamination, and remediation. These teams can operate in contaminated areas and are equipped with portable instruments for the detection and identification of chemical and radiological contamination.\textsuperscript{101}

Location:
Edison, New Jersey

Radiological Emergency Response Team (RERT)

Description: The RERTs are designed to provide response and support for incidents involving radiological hazards. These teams can provide on-site monitoring and mobile laboratories for field analyses of samples. Requests for RERT support may be made 24 hours a day via the National Response Center (NRC).\textsuperscript{102}

Locations:
Montgomery, Alabama
Las Vegas, Nevada
Washington, D.C.

FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA)

Urban Search and Rescue (USAR)

Description: FEMA maintains 27 USAR task forces around the nation to respond to structural collapses. The teams are composed of local emergency services personnel trained and equipped by FEMA and can

\textsuperscript{100} Ibid., p. 10.
\textsuperscript{102} Ibid.
be ready to deploy within six hours.\textsuperscript{103} A new initiative in 2001 will train and equip six of these teams to operate in an environment contaminated with chemical, biological, or radiological materials.\textsuperscript{104}

\textbf{UNITED STATES COAST GUARD (USCG)}

\textbf{National Strike Force}

Description: The USCG maintains three strike teams to respond to hazardous material incidents resulting from accidents, natural disasters, or pollution. The mission of the teams is to prevent or reduce environmental damage from such incidents. These teams are not limited to events at sea and can respond anywhere in the nation.\textsuperscript{105}

Locations:

- Fort Dix, New Jersey
- Novato, California
- Mobile, Alabama


\textsuperscript{104} Office of Management and Budget, \textit{Annual Report to Congress on Combating Terrorism}, p. 38.

\textsuperscript{105} U.S. Coast Guard Internet site, http://www.uscg.mil/hq/nsfcc/nsfweb/.
Appendix C. Federal Support Assets

Support assets are those resources that could provide expert assistance, laboratory analysis or other specialized services to local, state or federal agencies in the event of a WMD incident. Support assets tend to be reliant on large, fixed facilities to provide these capabilities even if they deploy small teams to the incident. This appendix is illustrative and is not meant to be a definitive survey of all available Federal assets or indicate which assets would be actually be needed to respond to a WMD incident.

DEPARTMENT OF DEFENSE

United States Army Medical Research Institute for Chemical Defense (USAMRICD)
Description: USAMRICD develops and tests medical defenses and treatments for chemical agents. In addition, the institute offers training for military and civilian healthcare providers in the treatment of chemical casualties. Experts in the treatment of chemical casualties are available for consultation in the event of a chemical terrorist event.106
Location: Aberdeen Proving Ground, Maryland

United States Army Medical Research Institute of Infectious Disease (USAMRIID)
Description: USAMRIID develops medical defenses against biological warfare agents and other infectious diseases that may pose a threat to members of the military. USAMRIID has a number of resources that could be useful in the event of a biological terrorist attack. The institute offers the only “fixed patient-care suite in the world designed for medical care under maximum biological containment.”107 USAMRIID also maintains small stockpiles of special vaccines and antiviral pharmaceuticals. In addition, USAMRIID’s laboratory offers confirmatory and reference capabilities for biological agents, and its staff can provide technical assistance regarding diagnosis and treatment of casualties of biological warfare.108
Location: Fort Detrick, Maryland

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108 Department of Defense and Department of Energy, op cit., p. 20.
Edgewood Biological Chemical Forensic Analytical Center
Description: This center serves as an analytical laboratory for chemical and biological agents. The center maintains a rapidly deployable environmental monitoring and assessment system for chemical and biological agents, the Mobile Analytical Response System (MARS). This system can be ready to deploy within four hours of notification.
Location: Aberdeen Proving Ground, Maryland

Navy Medical Research Center (NMRC)
Description: NMRC designs reagents, assays, and procedures for use by laboratories to analyze biological agents in environmental and clinical specimens. In addition, it developed rapid, hand-held assays for detecting biological agents in the field.
Location: Silver Spring, Maryland

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention (CDC)
Description: The CDC has one of the few laboratories in the nation capable of safely analyzing highly lethal pathogens under Biosafety Level-4 conditions, the highest level of biological containment possible. CDC’s Rapid Response Advanced Laboratory (RRAT) serves as the key entry point for all unknown or suspicious biological specimens sent to the CDC. The RRAT is on duty 24 hours a day, 7 days a week and screens specimens before sending them to one of the agent-specific specialty labs at CDC. In the event of a chemical agent incident, the CDC’s National Center for Environmental Health (NCEH) is capable of measuring human exposure to more than 200 toxic compounds.
Location: Atlanta, Georgia

110 Department of Defense, op cit., p. 22.
112 Ibid; Department of Defense and Department of Energy, op cit., p. 23.
113 Telephone interview with CDC official, April 27, 2000.
DEPARTMENT OF ENERGY

Atmospheric Release Advisory Capability (ARAC)
Description: ARAC is a computer-based modeling capability for predicting the spread of nuclear, chemical, or other hazardous materials in the atmosphere in near–real time. Information provided includes airborne concentrations and estimated distribution of contamination. Initial predictions can be made within one hour and updated as new information becomes available.\(^{115}\)
Location: Lawrence Livermore National Laboratory, Livermore, California

Forensic Science Center
Description: The Forensic Science Center provides expertise in analytical chemistry, nuclear science, biochemistry, and genetics that enables the center to analyze and characterize virtually any compound, element, or isotope.\(^{116}\) The FBI has designated the center as the Bureau's West Coast support laboratory.\(^{117}\)
Location: Lawrence Livermore National Laboratory, Livermore, California

ENVIRONMENTAL PROTECTION AGENCY

Radiation Environmental Laboratories
Description: The EPA has two radiological laboratories that can quickly characterize radiation sources.\(^{118}\)
Locations:
Las Vegas, Nevada
Montgomery, Alabama

### Appendix D. Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>AIT</td>
<td>Aeromedical Isolation Team</td>
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<td>AFRAT</td>
<td>Air Force Radiation Assessment Team</td>
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<td>AFRRRI</td>
<td>Armed Forces Radiobiological Research Institute</td>
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<tr>
<td>AMS</td>
<td>Aerial Measuring System</td>
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<tr>
<td>ARAC</td>
<td>Atmospheric Release Advisory Capability</td>
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<tr>
<td>BDC</td>
<td>Bomb Data Center</td>
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<tr>
<td>BPRP</td>
<td>Bioterrorism Preparedness and Response Program</td>
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<tr>
<td>CBDCOM</td>
<td>Chemical Biological Defense Command</td>
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<tr>
<td>CBIRF</td>
<td>Chemical Biological Incident Response Force</td>
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<tr>
<td>CBRN</td>
<td>Chemical, Biological, Radiological and Nuclear</td>
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<tr>
<td>CB-RRT</td>
<td>Chemical Biological-Rapid Response Team</td>
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<tr>
<td>CBRT</td>
<td>Chemical Biological Response Teams</td>
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<td>CCST</td>
<td>Chemical Casualty Site Team</td>
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<td>CDC</td>
<td>Centers for Disease Control and Prevention</td>
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<td>CIRG</td>
<td>Critical Incident Response Group</td>
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<td>COMPIO</td>
<td>Consequence Management Program Integration Office</td>
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<td>CRTF</td>
<td>Critical Response Task Force</td>
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<td>DMAT</td>
<td>Disaster Medical Assistance Team</td>
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<td>DNAT</td>
<td>Defense Nuclear Advisory Team</td>
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<td>DOD</td>
<td>Department of Defense</td>
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<td>DOE</td>
<td>Department of Energy</td>
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<td>DOJ</td>
<td>Department of Justice</td>
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<td>DOMS</td>
<td>Director of Military Support</td>
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<td>DTRG</td>
<td>Defense Technical Response Group</td>
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<td>EIS</td>
<td>Epidemiological Intelligence Service</td>
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<td>EMI</td>
<td>Emergency Management Institute</td>
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<td>EOD</td>
<td>Explosive Ordnance Disposal</td>
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<td>EPA</td>
<td>Environmental Protection Agency</td>
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<tr>
<td>Acronym</td>
<td>Description</td>
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<tr>
<td>NSC</td>
<td>National Security Council</td>
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<td>OEP</td>
<td>Office of Emergency Preparedness</td>
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<td>OJP</td>
<td>Office of Justice Programs</td>
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<td>OMB</td>
<td>Office of Management and Budget</td>
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<td>OSLDPS</td>
<td>Office for State and Local Domestic Preparedness Support</td>
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<tr>
<td>PDD</td>
<td>Presidential decision directive</td>
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<td>PHS</td>
<td>Public Health Service</td>
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<td>RADCON</td>
<td>Radiological Control</td>
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<td>RAID</td>
<td>Rapid Assessment and Initial Detection</td>
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<td>RAMT</td>
<td>Radiological Advisory Medical Team</td>
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<td>RAP</td>
<td>Radiological Assistance Program</td>
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<td>RDD</td>
<td>Radiological dispersal device</td>
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<tr>
<td>REAC/TS</td>
<td>Radiation Emergency Assistance Center/Training Site</td>
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<td>RERT</td>
<td>Radiological Emergency Response Team</td>
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<tr>
<td>RRAT</td>
<td>Rapid Response Advanced Laboratory</td>
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<tr>
<td>RRIS</td>
<td>Rapid Response Information System</td>
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<tr>
<td>SBCCOM</td>
<td>Soldier and Biological Chemical Command</td>
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<tr>
<td>SEL</td>
<td>Standardized equipment list</td>
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<tr>
<td>SWAT</td>
<td>Special Weapons and Tactics</td>
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<tr>
<td>TEU</td>
<td>Technical Escort Unit</td>
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<tr>
<td>USAMRICD</td>
<td>U.S. Army Medical Research Institute for Chemical Defense</td>
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<tr>
<td>USAMRIID</td>
<td>U.S. Army Medical Research Institute of Infectious Disease</td>
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<tr>
<td>USAR</td>
<td>Urban Search and Rescue</td>
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<tr>
<td>USCG</td>
<td>U.S. Coast Guard</td>
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<tr>
<td>WMD</td>
<td>Weapon of mass destruction</td>
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<tr>
<td>VA</td>
<td>Veterans Administration</td>
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</table>
The John F. Kennedy School of Government and the U.S. Department of Justice have created the Executive Session on Domestic Preparedness to focus on understanding and improving U.S. preparedness for domestic terrorism. The Executive Session is a joint project of the Kennedy School’s Belfer Center for Science and International Affairs and Taubman Center for State and Local Government.

The Executive Session convenes a multi-disciplinary task force of leading practitioners from state and local agencies, senior officials from federal agencies, and academic specialists from Harvard University. The members bring to the Executive Session extensive policy expertise and operational experience in a wide range of fields - emergency management, law enforcement, national security, law, fire protection, the National Guard, public health, emergency medicine, and elected office - that play important roles in an effective domestic preparedness program. The project combines faculty research, analysis of current policy issues, field investigations, and case studies of past terrorist incidents and analogous emergency situations. The Executive Session is expected to meet six times over its three-year term.

Through its research, publications, and the professional activities of its members, the Executive Session intends to become a major resource for federal, state, and local government officials, congressional committees, and others interested in preparation for a coordinated response to acts of domestic terrorism.

For more information on the Executive Session on Domestic Preparedness, please contact:

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http://www.esdp.org
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The Center’s Director is Graham Allison, former Dean of the Kennedy School. Stephen Nicoloro is Director of Finance and Operations.

BCSIA’s International Security Program (ISP) is the home of the Center’s core concern with security issues. It is directed by Steven E. Miller, who is also Editor-in-Chief of the journal, International Security.

The Strengthening Democratic Institutions (SDI) project works to catalyze international support for political and economic transformation in the former Soviet Union. SDI’s Director is Graham Allison.

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2001-4 Kayyem, Juliette K. “U.S. Preparations for Biological Terrorism: Legal Limitations and the Need for Planning.”


2000-23 Eckley, Noelle. “From Regional to Global Assessment: Learning from Persistent Organic Pollutants.”


2000-17 Biemman, Frank. “Science as Power in International Environmental Negotiations: Global Environmental Assessments Between North and South.”


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The Taubman Center for State and Local Government focuses on public policy and management in the U.S. federal system. Through research, participation in the Kennedy School’s graduate training and executive education programs, sponsorship of conferences and workshops, and interaction with policy makers and public managers, the Center’s affiliated faculty and researchers contribute to public deliberations about key domestic policy issues and the process of governance. While the Center has a particular concern with state and local institutions, it is broadly interested in domestic policy and intergovernmental relations, including the role of the federal government.

The Center’s research program deals with a range of specific policy areas, including urban development and land use, transportation, environmental protection, education, labor-management relations and public finance. The Center is also concerned with issues of governance, political and institutional leadership, innovation, and applications of information and telecommunications technology to public management problems. The Center has also established an initiative to assist all levels of government in preparing for the threat of domestic terrorism.

The Center makes its research and curriculum materials widely available through various publications, including books, research monographs, working papers, and case studies. In addition, the Taubman Center sponsors several special programs:

The Program on Innovations in American Government, a joint undertaking by the Ford Foundation and Harvard University, seeks to identify creative approaches to difficult public problems. In an annual national competition, the Innovations program awards grants of $100,000 to 15 innovative federal, state, and local government programs selected from among more than 1,500 applicants. The program also conducts research and develops teaching case studies on the process of innovation.

The Program on Education Policy and Governance, a joint initiative of the Taubman Center and Harvard's Center for American Political Studies, brings together experts on elementary and secondary education with specialists in governance and public management to examine strategies of educational reform and evaluate important educational experiments.

The Saguaro Seminar for Civic Engagement in America is dedicated to building new civil institutions and restoring our stock of civic capital.

The Program on Strategic Computing and Telecommunications in the Public Sector carries out research and organizes conferences on how information technology can be applied to government problems -- not merely to enhance efficiency in routine tasks but to produce more basic organizational changes and improve the nature and quality of services to citizens.

The Executive Session on Domestic Preparedness brings together senior government officials and academic experts to examine how federal, state, and local agencies can best prepare for terrorist attacks within U.S. borders.

The Program on Labor-Management Relations links union leaders, senior managers and faculty specialists in identifying promising new approaches to labor management.

The Internet and Conservation Project, an initiative of the Taubman Center with additional support from the Kennedy School's Environment and Natural Resources Program, is a research and education initiative. The Project focuses on the constructive and disruptive impacts of new networks on the landscape and biodiversity, as well as on the conservation community.
2001 Kayyem, Juliette N. “U.S. Preparations for Biological Terrorism: Legal Limitations and the Need for Planning.”
2001 Koblenz, Gregory D. “Overview of Federal Programs to Enhance State and Local Preparedness for Terrorism with Weapons of Mass Destruction.”
2000 Merari, Ariel. “Israel’s Preparedness for High Consequence Terrorism.”
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