<u>Speech: PM's press conference</u> <u>statement on Syria: 14 April 2018</u>

Prime Minister Theresa May:

Last night British, French and American armed forces conducted co-ordinated and targeted strikes to degrade the Syrian Regime's chemical weapons capability and deter their use.

For the UK's part four RAF Tornado GR 4's launched storm shadow missiles at a military facility some 15 miles west of Homs, where the regime is assessed to keep chemical weapons in breach of Syria's obligations under the Chemical Weapons Convention.

While the full assessment of the strike is ongoing, we are confident of its success.

Let me set out why we have taken this action.

Last Saturday up to 75 people, including young children, were killed in a despicable and barbaric attack in Douma, with as many as 500 further casualties.

We have worked with our allies to establish what happened. And all the indications are that this was a chemical weapons attack.

We have seen the harrowing images of men, women and children lying dead with foam in their mouths.

These were innocent families who, at the time this chemical weapon was unleashed, were seeking shelter underground, in basements.

First-hand accounts from NGOs and aid workers have detailed the most horrific suffering, including burns to the eyes, suffocation and skin discolouration, with a chlorine-like odour surrounding the victims.

And the World Health Organisation has received reports that hundreds of patients arrived at Syrian heath facilities on Saturday night with "signs and symptoms consistent with exposure to toxic chemicals."

We are also clear about who was responsible for this atrocity.

A significant body of information including intelligence indicates the Syrian Regime is responsible for this latest attack.

I cannot tell you everything. But let me give an example of some of the evidence that leads us to this conclusion.

Open source accounts allege that a barrel bomb was used to deliver the chemicals.

Multiple open source reports claim that a Regime helicopter was observed above the city of Douma on the evening of 7th April.

The Opposition does not operate helicopters or use barrel bombs.

And reliable intelligence indicates that Syrian military officials coordinated what appears to be the use of chlorine in Douma on 7th April.

No other group could have carried out this attack. Indeed, Daesh for example does not even have a presence in Douma.

And the fact of this attack should surprise no-one.

We know that the Syrian regime has an utterly abhorrent record of using chemical weapons against its own people.

On 21st August 2013 over 800 people were killed and thousands more injured in a chemical attack also in Ghouta.

There were 14 further smaller scale chemical attacks prior to that summer.

At Khan Shaykhun on 4th April last year, the Syrian Regime used sarin against its people killing around 100 with a further 500 casualties.

And based on the Regime's persistent pattern of behaviour and the cumulative analysis of specific incidents we judge it highly likely both that the Syrian regime has continued to use chemical weapons since then, and will continue to do so.

This must be stopped.

We have sought to do so using every possible diplomatic channel.

But our efforts have been repeatedly thwarted both on the ground and in the United Nations.

Following the sarin attack in Eastern Damascus back in August 2013, the Syrian Regime committed to dismantle its chemical weapon programme — and Russia promised to ensure that Syria did this, overseen by the Organisation for the Prohibition of Chemical Weapons.

But these commitments have not been met.

A recent report from the Organisation for the Prohibition of Chemical Weapons has said that Syria's declaration of its former Chemical Weapons programme is incomplete.

This indicates that it continues to retain undeclared stocks of nerve agent or precursor chemicals — and is likely to be continuing with some chemical weapons production.

The OPCW inspectors have investigated previous attacks and on four occasions decided that the Regime was indeed responsible.

And on each occasion when we have seen every sign of chemical weapons being used, any attempt to hold the perpetrators to account has been blocked by Russia at the UN Security Council, with six such vetoes since the start of 2017.

Just this week, the Russians vetoed a draft Resolution that would have established an independent investigation into this latest attack — even making the grotesque and absurd claim that it was "staged" by Britain.

So we have no choice but to conclude that diplomatic action on its own will not be any more effective in the future than it has been in the past.

Over the last week the UK government has been working intensively with our international partners to build the evidence picture, and to consider what action we need to take to prevent and deter future humanitarian catastrophes caused by chemical weapons attacks.

When the Cabinet met on Thursday we considered the advice of the Attorney General, the National Security Adviser and the Chief of the Defence Staff — and we were updated on the latest assessment and intelligence picture.

And based on this advice we agreed that it was both right and legal to take military action, together with our closest allies, to alleviate further humanitarian suffering by degrading the Syrian Regime's Chemical Weapons capability and deterring their use.

This was not about interfering in a civil war.

And it was not about regime change.

As I discussed with President Trump and President Macron, it was a limited, targeted and effective strike with clear boundaries that expressly sought to avoid escalation and did everything possible to prevent civilian casualties.

Together we have hit a specific and limited set of targets. They were a chemical weapons storage and production facility, a key chemical weapons research centre and a military bunker involved in chemical weapons attacks.

Hitting these targets with the force that we have deployed will significantly degrade the Syrian Regime's ability to research, develop and deploy chemical weapons.

A year ago, after the atrocity at Khan Shaykhun, the US conducted a strike on the airfield from which the attack took place. But Assad and his regime hasn't stopped their use of chemical weapons.

So last night's strikes by the US, UK and France were significantly larger than the US action a year ago and specifically designed to have a greater impact on the regime's capability and willingness to use chemical weapons.

And this collective action sends a clear message that the international community will not stand by and tolerate the use of chemical weapons.

I also want to be clear that this military action to deter the use of chemical weapons does not stand alone.

We must remain committed to resolving the conflict at large.

The best hope for the Syrian people remains a political solution.

We need all partners — especially the Regime and its backers — to enable humanitarian access to those in desperate need.

And the UK will continue to strive for both.

But these strikes are about deterring the barbaric use of chemical weapons in Syria and beyond.

And so to achieve this there must also be a wider diplomatic effort — including the full range of political and economic levers — to strengthen the global norms prohibiting the use of chemical weapons which have stood for nearly a century.

Although of a much lower order of magnitude, the use of a nerve agent on the streets of the UK in recent weeks is part of a pattern of disregard for these norms.

So while this action is specifically about deterring the Syrian regime, it will also send a clear signal to anyone else who believes they can use chemical weapons with impunity.

There is no graver decision for a Prime Minister than to commit our forces to combat — and this is the first time that I have had to do so.

As always, they have served our country with the greatest professionalism and bravery — and we owe them a huge debt of gratitude.

We would have preferred an alternative path.

But on this occasion there is none.

We cannot allow the use of chemical weapons to become normalised — either within Syria, on the streets of the UK or elsewhere.

We must reinstate the global consensus that chemical weapons cannot be used.

This action is absolutely in Britain's national interest.

The lesson of history is that when the global rules and standards that keep us safe come under threat — we must take a stand and defend them.

That is what our country has always done.

And that is what we will continue to do.

News story: Programme: EU-UK Article 50 negotiations Brussels, 16-18 April 2018

Monday, 16 April 2018

• Meeting at technical level — Withdrawal Agreement — remaining issues

Tuesday, 17 April 2018

• Meeting at technical level — Withdrawal Agreement — remaining issues

Wednesday, 18 April 2018

- Coordinators' meeting Ireland/Northern Ireland
- Coordinators' meeting future relationship

Next meetings provisionally scheduled for w/c 30 April.

News story: PHE urges vigilance in spotting signs of scarlet fever

Updated: Added latest update.

Latest update

The latest <u>Health Protection Report</u> (13 April 2018) shows 20,372 cases of scarlet fever have been reported since mid-September 2017, compared to an average of 9,461 for the same period over the last 5 years. There were 1,180 cases reported for the most recent week (2 to 8 April 2018).

Dr Nick Phin, Deputy Director of National Infection Service at PHE, said:

We are urging parents to look out for the symptoms of scarlet fever such as a sore throat, fever and rash after seeing a significant upsurge in cases this year. The good news is that over the Easter holidays we have seen a slight decline in cases, which may indicate that activity has peaked.

Scarlet fever, which mainly affects young children, is not usually a serious illness and can be easily treated with the appropriate antibiotics. We encourage parents to contact their GP or NHS 111 if they spot symptoms of scarlet fever or have concerns.

Previous updates

9 March 2018

Scarlet fever is a very contagious, seasonal bacterial illness that mainly affects children and is not uncommon for this time of year.

The latest <u>Health Protection Report</u> (9 March 2018) showed 11,982 cases of scarlet fever have been reported since mid-September 2017, compared to an average of 4,480 for the same period over the last 5 years. There were 1,267 cases reported for the most recent week (12 to 18 February 2018).

This increasing trend is in line with usual patterns although cases are currently higher than those reported at this point in the last 4 seasons. It is not possible at this point to determine what the final numbers will be for this season. Scarlet fever is a clinical diagnosis and not usually confirmed by laboratory testing so the activity we may be seeing could be due to increased awareness and reporting of scarlet fever, although the exact cause is still being investigated.

Scarlet fever is usually a mild illness; PHE is advising parents to be on the lookout for scarlet fever symptoms, which include a sore throat, headache and fever with a characteristic fine, pinkish or red rash with a sandpapery feel. If signs of scarlet fever are suspected, it is important to contact your local GP or NHS 111. Early treatment with antibiotics is important and can help reduce the risk of complications such as pneumonia and the spread of the infection. Children or adults diagnosed with scarlet fever are advised to stay at home until at least 24 hours after the start of antibiotic treatment to avoid spreading the infection to others.

Nick Phin, Deputy Director at Public Health England, said:

It's not uncommon to see a rise in cases of scarlet fever at this time of year. Scarlet fever is not usually a serious illness and can be treated with antibiotics to reduce the risk of complications and spread to others. We are monitoring the situation closely and remind parents to be aware of the symptoms of scarlet fever and to contact their GP for assessment if they think their child might have it.

Whilst there has been a notable increase in scarlet fever cases when compared to last season, greater awareness and improved reporting practices may have contributed to this increase. Professor Helen Stokes-Lampard, Chair of the Royal College of GPs, said:

Scarlet fever is a bacterial infection that usually presents with a sore throat, fever, headaches, and a rosy rash that generally starts on a patient's chest.

It is a very contagious disease and much more common in children under 10 than teenagers or adults, but it can be treated quickly and effectively with a full course of antibiotics and all GPs are trained to diagnose and treat it.

Scarlet fever used to be a lot more common than it is now, but GPs are noticing more cases than in previous years at the moment. If a patient thinks that they, or their child, might have symptoms, they should seek medical assistance.

PHE is also urging GPs, paediatricians, and other health practitioners to be mindful when assessing patients and promptly notify local health protection teams of cases and outbreaks.

For further information on scarlet fever visit the NHS Choices website.

Guidelines for the <u>management of scarlet fever</u> are also available from the PHE website.

6 February 2018

The latest <u>Health Protection Report</u> showed 6,225 cases of scarlet fever had been reported since mid-September 2017, compared to 3,764 for the same period last season. There were 719 cases reported for the most recent week (22 to 28 January 2018).

<u>Press release: PM call with President</u> <u>Trump: 12 April 2018</u>

A Downing Street spokesperson said:

"The Prime Minister spoke to President Trump about Syria this evening.

"They agreed that the Assad regime had established a pattern of dangerous behaviour in relation to the use of chemical weapons.

"They agreed it was vital that the use of chemical weapons did not go unchallenged, and on the need to deter the further use of chemical weapons by the Assad regime.

<u>Speech: We must stand up for an</u> <u>effective non-proliferation regime</u>

Thank you very much Mr President. Many thanks indeed to our Bolivian colleague for his briefing and the work of his Committee. We welcome the new coordinators and may I say at the start that we were very pleased to be paired with Equatorial Guinea in terms of capacity building.

Mr President, 1540 was the first subject I worked on when I came to the Security Council ten years ago, my first time here, so I am very pleased to have opportunity to talk about it today and to be able to say that for the United Kingdom, the 1540 Committee is a vital component of the international order. We need to empower it to fulfil its mandate. We need to support it to the hilt.

Mr President, as a number of us have said this week already, we risk seeing a situation that the Council should dread: that chemical and biological weapons become a routine part of fighting and regrettably, we have been confronted in very recent times by multiple incidents of the use of weapons of mass destruction by non-state actors. The UN Joint Investigative Mechanism found Da'esh used mustard gas on at least two occasions in Syria. There are multiple instances of mustard gas use by Da'esh in Iraq. In Australia, a planned chemical terrorism attack was thwarted in July last year. These incidents clearly exemplify why the 1540 Committee and its work to prevent the proliferation of nuclear, chemical and biological weapons by non-state actors is so important.

These events, Mr. President, are awful enough. Yet in acts of unbelievable irresponsibility, those risks have been exacerbated by the use of weapons of mass destruction by state actors. The chemical weapons attacks in Douma, the attempted murders in Salisbury are the most recent instances but we also have the assassination of Kim Jong Nam in Malaysia and the horror of Khan Sheikoun a little over a year ago.

Mr President, I take this opportunity to say that in respect of Salisbury and the invitation from this Council to keep members updated, we have requested a Security Council meeting next week where we would like to brief on the outcome of the OPCW findings. It is a worrisome pattern this state use of WMD and it clearly undermines our collective efforts to deter and eradicate the use of these weapons by state and non-state actors alike.

We very strongly support the work to increase states capacity and we are encouraged that there are now only 13 non-reporting states. Any non-reporting is troubling but it is good number is going down. And as I say, we were

delighted to be paired with Equatorial Guinea and provide support.

But it is clear that we stand on the cusp of a nightmare —where weapons of mass destruction are used with impunity. Where our citizens live in real fear of an indiscriminate attack at any time and without warning. It is not enough just to condemn this. We need to find a way to take meaningful action and ensure that there are meaningful consequences for perpetrators. We have all benefitted from the international order that has kept us safe since the end of World War II. It behooves all of us, Mr President, to make every effort to uphold this international architecture.

It is clear that not all countries share this view and we have talked about that several times this week so I just want to say that in respect of this particular Committee 1540, there is one Council member who has sought at every opportunity, to slow progress and dilute the substance of every proposal whether this is Programme of Work deadlines, calls to action and efforts to take progress forward, all of these have sadly been consistently been watered down and the Panel of Experts has even been prevented from travelling. Mr President, if we are serious about dealing with the threats that this Committee was set up counter then this state of affairs can't continue.

Since last February the 1540 Committee has met formally only once and the actions agreed in the 2017 Programme of Work have barely made progress. That means also that the commitments made in the relatively modest Resolution 2325 have not been fulfilled. The new Programme of Work has only just been agreed, two months later than legally mandated and in these two months, the Committee was left without a clear steer of objectives and activities to pursue.

Mr President, I cannot think of any legitimate reason why any country would want to affect the work of the 1540 Committee adversely in this way and I appeal to everybody round the table to redouble efforts so that we have an ambitious programme of work for the Committee. We must stand up for the universal norms and standards we have spent decades building to create an effective and powerful non-proliferation regime whether that deals with state actors or it deals with non-state actors.

Thank you very much Mr President.