Mr Chair, Distinguished Representatives,

The current pandemic continues to starkly illustrate the damaging effects disease can have on societies. We are now approaching 5 million recorded deaths globally, with many hundreds of thousands likely to have gone unrecorded. The impact of COVID-19 goes beyond its high fatality rates: many survivors of the disease have continued to suffer significant health consequences from ‘long-COVID’.

The pandemic’s global socio-economic impacts are at levels unprecedented since the second world war. The pandemic has also exposed and exacerbated longstanding economic, racial and gender divides. Many of these socio-economic effects are highly likely to generate further health effects beyond the direct impacts of COVID-19.

Biological weapons are tools for deliberate disease, and lessons from the current pandemic must be drawn to enhance preparedness for future outbreaks of diseases that may be deliberate.

For the First Committee, this means first and foremost reaffirming commitments to the BWC and the Geneva Protocol, and reporting on measures taken to implement and strengthen BWC provisions.

But the COVID-19 experience demands additional action. First Committee delegations must seriously consider how to make the broader biological disarmament architecture more fit for purpose in today’s world. One element that needs serious attention is the growing number of high biocontainment laboratories.

Countries around the world are investing in these facilities to study lethal viruses and to prepare against unknown pathogens. Triggered by concerns of bioterrorism and emerging infectious diseases in the early 2000s, the construction boom has to date resulted in dozens of these commonly-called
biosafety-level (BSL) 4 labs globally. More countries are expected to build these labs in the wake of COVID-19 as part of a renewed emphasis on pandemic preparedness and response. In addition, high risk and gain-of-function research with coronaviruses, and other zoonotic pathogens with pandemic potential, is likely to increase as scientists seek to better understand these viruses and to assess the risk they pose of jumping from animals to humans or becoming transmissible between humans.

Clinical work and scientific studies on pathogens are important for public health, biomedical advances, and disease prevention. Some of these activities, however, pose significant risks. Surges in the number of labs and expansion in the high-risk research carried out within them exacerbate safety and security risks, yet there is no authoritative international source tracking numbers of labs or ensuring research oversight.

The First Committee has an obligation to consider international structures that could be introduced to systematically register, monitor and inspect high biocontainment labs and high-risk biological activities like gain-of-function experiments with potentially pandemic pathogens to ensure that all such research is being conducted safely, securely, and responsibly.

There are already proposals on the table for how to do this, along with other proposals for how to evolve the biological disarmament architecture to uphold its central role in preventing the misuse of biology for hostile purposes. First Committee delegations must give these proposals the serious and constructive consideration they deserve.

Thank you for your attention.