

COMMITTEE: World Health Organisation

QUESTION OF: Preventing the misuse of human genetic editing technologies

SUBMITTED BY: People's Republic of Bangladesh

CO-SUBMITTED BY: Algeria, Azerbaijan, Canada, Brazil

SIGNATORIES: Türkiye, Venezuela, South Korea, Mexico, Guyana, Panama, Singapore, Italy, Sierra Leone, North Korea, China, Pakistan, Ukraine, United States of America, Japan

The General Assembly,

Reaffirming the freedoms and protections allowed by the Universal Declaration on the Human Genome and Human Rights (UDHGHR), and their endorsement by General Assembly resolution 53/152,

Declaring that human genetic editing technologies should be limited to safe, ethical, and therapeutic medical purposes in accordance with international bioethical principles,

Noting the rapid advancement of human genetic editing technologies such as CRISPR-Cas9, and recognising their significant potential in treating genetic disorders and improving global health outcomes,

Aware of the technical risks associated with genetic editing technologies like unintentionally changing DNA and the risks of creating new diseases or immune reactions,

Taking into account that the misuse of gene editing technologies can contribute to a bigger gap between HEDCs and LEDCs,

1. Calls upon Member States to adopt national legislative and regulatory measures that:
 - a. Seek to define and distinguish:
 - i. Somatic genome editing (non-heritable, therapeutic),
 - ii. Germline genome editing (heritable),
 - iii. Non-therapeutic enhancement, and
 - b. Prohibit the clinical use of heritable (germline) genome editing for non-therapeutic enhancement, including “designer baby”

applications, and treat willful violations as suitably serious offences under domestic criminal law, at the discretion of the local court of law;

2. Further calls upon Member States to create or designate a National Genome Editing Oversight Authority (NGEOA), empowered to:
 - a. License, suspend, and revoke authorisation for facilities conducting human genome-editing research or clinical applications,
 - b. Register all projects concerning human genome-editing projects, in order to track and monitor all such endeavors,
 - c. Require periodic independent ethics review and scientific risk assessment for all licensed activities by organisations licensed for this role by the WHO,
 - i. Calls for genetic data collected from surgeries to be held confidential and not be shared with third parties,
 - d. Conduct regular inspections and compliance audits, and
 - e. Apply enforceable and effective sanctions, including but not limited to:
 - i. Professional de-licensure and institutional de-accreditation,
 - ii. Civil penalties and profit disgorgement for prohibited services, and
 - iii. Referral for criminal prosecution where applicable,
 - f. Regulations reviewed every five years to ensure that the legislation remains up to date regarding the UN's standards and needs;
3. Directs Member States to promote international transparency regarding significant scientific developments in genetic research, with the aim of enhancing cooperation, trust, and the responsible advancement of such technologies;
4. Affirms that domestic regulatory frameworks for the research and application of gene editing technologies must be determined by each Member State in accordance with its sovereign legal order, ethical norms,

and societal values — resisting one-size-fits-all international oversight or enforcement mechanisms;

5. Encourages UN Member States to partner with non-governmental organizations, including the International Bioethics Committee (IBC) and the United Nations Educational Scientific and Cultural Organization (UNESCO) to ensure the ethical development, oversight, and implementation of human genome editing technologies;
6. Promotes the creation of a binding treaty regarding the regulation, ethical use, and international oversight of human genome editing, replacing the current UNESCO/IHGE non-binding declaration by:
 - a. Establishing clear international standards for purposes including but not limited to:
 - i. Permissible research,
 - ii. Safety review, and
 - iii. Clinical application,
 - b. Incentivising member state compliance through:
 - i. Technical assistance,
 - ii. Capacity-building, and
 - iii. Increasing access to shared research resources;
7. Endorses increased non-monetary incentives for voluntary participation in ethical genomic research and monitoring programs by:
 - a. Working with local governments to:
 - i. Create healthcare-based incentives for volunteers contributing genetic data including but not limited to free health screenings for blood pressure, anaemia, etc., and
 - ii. Provide paid time off to workers to encourage safe and transparent participation in genomic research;
8. Emphasizes the need for legislative innovations and procedures encouraging safe practices, by:
 - a. Creating a biannual WHO-guided innovation conference that selects a number of evidence-based research projects for funding regarding the safety, monitoring, and ethical deployment of genome editing technologies,

- b. Partnering with UN research bodies such as the United Nations Development Program (UNDP), WHO Collaborating Centers and academic institutions,
 - c. Establishing an evaluation review in order to maintain accuracy and efficiency regarding research and resources by reviewing past projects and determining eligibility for continued funding based on success, effectiveness, and scalability,
 - d. Offering WHO supported grants and fellowships for students and researchers committed to responsible and safe genetic innovation, and
 - e. Prioritizing projects focused on treating genetic diseases rather than enhancement projects;
9. Introduces youth and adult education programmes provided by the WHO to willing member states' national education curriculum about genome-editing research and applications in order to raise awareness on Somatic and Germline Editing, off-target CRISPR-Cas9 treatments, and other applicable subjects.