XIII. Space and global health

1. In accordance with General Assembly resolution 76/76, the Subcommittee considered agenda item 16, entitled “Space and global health”.

2. The representatives of China, India, Indonesia, Japan, Switzerland, Thailand and the United States made statements under agenda item 16. During the general exchange of views, statements relating to the item were also made by representatives of other member States.

3. The Subcommittee heard the following scientific and technical presentations:
   (a) “Role of space technologies in public health crisis management”, by the representative of Australia;
   (b) “‘Space2Health’: technology and knowledge transfer at the intersection of space and health”, by the representative of Germany;
   (c) “Space dosimetry: Hungarian innovations”, by the representative of Hungary;
   (d) “Anaerobic bioreactors for refugee health and long-duration space missions”, by the observer for SGAC.

4. The Subcommittee had before it the following:
   (a) Draft resolution on space and global health (A/AC.105/C.1/L.402);
   (b) Draft report of the Working Group on Space and Global Health on the work conducted under its multi-year workplan (A/AC.105/C.1/L.403);
   (c) Conference room paper containing a proposal by the Chair of the Working Group on Space and Global Health regarding the establishment of a space and global health network to support and sustain the implementation of the recommended space and global health platform (A/AC.105/C.1/2022/CRP.12);
   (d) Conference room paper containing a note by the Secretariat entitled “Draft General Assembly resolution on space and global health” (A/AC.105/C.1/2022/CRP.21).
5. The Subcommittee noted a broad array of activities relevant to space and global health in areas such as telemedicine, space life sciences, space technologies, tele-epidemiology and disaster management (including responses to epidemics), as well as activities undertaken through space-based research, including at the International Space Station.

6. The Subcommittee acknowledged the contribution of space science, space technology and space applications to the prevention and control of diseases, the promotion of human health and welfare, the addressing of global health issues, the advancement of medical research, the advancement of health practices and the provision of health-care services to individuals and communities, including in rural areas with limited access to health care.

7. The Subcommittee noted with concern the extraordinary situation, with global implications, created by the coronavirus disease (COVID-19) pandemic, which had affected, inter alia, societies and their health, the economy, tourism, sports and culture in an unprecedented way.

8. The Subcommittee noted the vital role of space science, space technology and space applications in addressing the COVID-19 pandemic, and their critical role in supporting contact tracing, the identification of affected areas, modelling the spread of the disease and monitoring its transmission, connectivity for remote working, telehealth, communications, and methods for coping with social isolation.

9. Some delegations expressed the view that it was necessary to strengthen research on the use of space observations in order to better understand the emissions, trends and impacts on human health of air pollutants such as particulate matter (PM$_{2.5}$ and PM$_{10}$) and ozone.

10. The view was expressed that the availability and accuracy of space-based data, supplemented by ground-based observations, should be improved, and that those data should be accessible to a wide range of stakeholders.

11. Pursuant to paragraph 11 of General Assembly resolution 76/76, the Subcommittee, at its 955th meeting, on 7 February, reconvened its Working Group on Space and Global Health, with Antoine Geissbühler (Switzerland) as Chair.

12. At its [...] meeting, on [...] February, the Subcommittee endorsed the report of the Working Group on Space and Global Health, which is contained in annex III to the present report.