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Yeni Yol Model UN

WHO Study Guide

Sustainable Recovery Post COVID-19
Pandemic.

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Introduction:

With approximately 550,000 people infected, almost 25,000 dead, and millions in lockdown around the world, the COVID-19 pandemic has made the world come to a halt. It's affected so many people and societies, practically changed our lives and caused serious damage to our economy, society, ecosystems, education but most importantly our livelihoods and health.

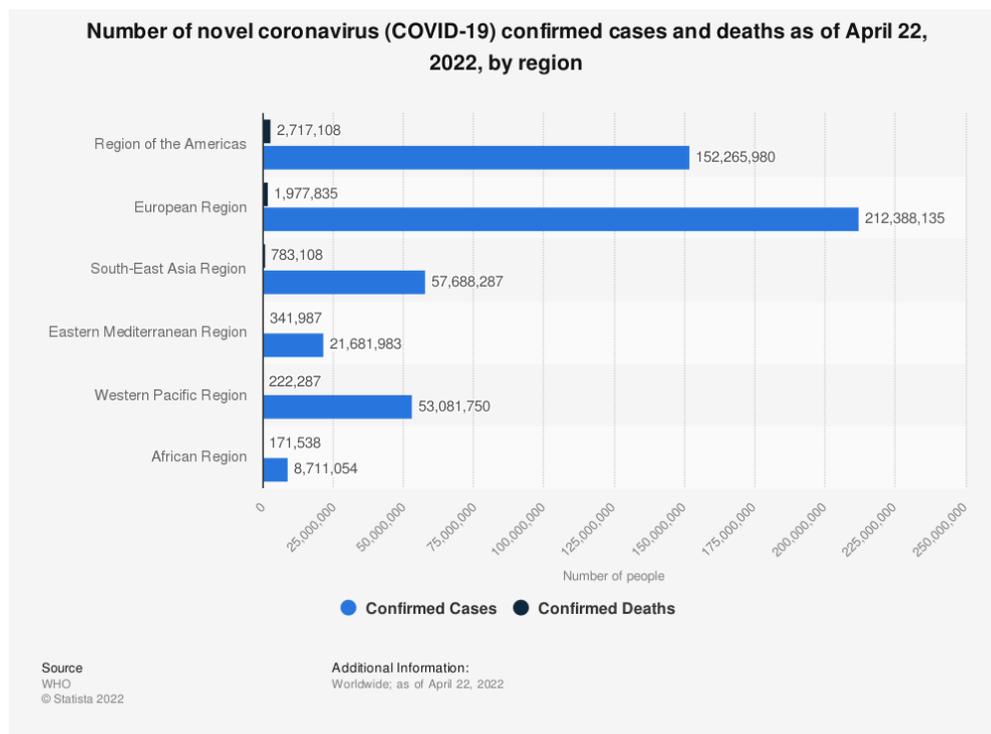
The pandemic has become much more than a public health crisis. It has had severe socioeconomic consequences. In the immediate term, global economic activity has stalled and has led to the greatest global economic downturn in a century. In the longer term, the pandemic's socioeconomic consequences are likely to outlast the pandemic, particularly for the most vulnerable, disadvantaged groups that have suffered disproportionately from the impacts of the pandemic. The pandemic threatens to unravel decades of development progress and derail global prospects for achieving the Sustainable Development Goals by 2030.

Simultaneously, countries around the world are being forced to confront the challenges of managing compound risks from natural hazards and the COVID-19 pandemic. Since the onset of the pandemic, countries have had to deal with both COVID-19 and natural hazards such as **cyclones in India and the Pacific, floods in Japan and Vietnam, and heatwaves in the United States and Europe**, among many others. Climate-related hazards threaten to exploit many of the same vulnerabilities, amplifying disaster risk and its potential impacts as the public health emergency continues.

The COVID-19 pandemic has put a spotlight on the poor and most vulnerable, including women, older people, young people, children, low-wage earners, informal workers, persons with disabilities, indigenous peoples, people in situations of conflict, people living in rural areas, refugees and migrants. Countries need to enhance social protection and access to essential services for the poor and most vulnerable to ensure an inclusive recovery and that no one will be left behind. Human rights principles and standards must underpin the sustainable and resilient response to recovery from the pandemic. Furthermore, concerted actions are needed to mainstream a gender perspective into COVID-19 response and recovery efforts.

History of the Issue:

Covid-19 is part of a family of viruses called coronaviruses that infect both animals and people. This particular one originated in China at the end of 2019 in the city of Wuhan. In the past two decades, coronavirus outbreaks have caused global concern, including one in 2003 with the Severe Acute Respiratory Syndrome (SARS) and more recently in 2012 with the Middle East Respiratory Syndrome (MERS).



The COVID-19 pandemic has led to a dramatic loss of human life worldwide and presents an unprecedented challenge to public health, food systems and the world of work. The economic and social disruption caused by the pandemic is devastating: tens of millions of people are at risk of falling into extreme poverty, while the number of undernourished people, currently estimated at nearly 690 million, could increase by up to 132 million by the end of the year.

Severe cases can lead to serious respiratory disease, and even pneumonia. Those most at risk are the elderly, or people with underlying medical issues, such as heart problems or diabetes. According to the most recent global numbers (27 March 2020), 14.8% of people over 80 years old, infected with the virus, have died from it, compared with 0.4% in people aged 40-49% and none in children under 9 years. The situation across countries is rapidly changing and these numbers will continue to change as the pandemic shifts.

According to the United Nations Environment Programme (UNEP), 60% of known infectious diseases in humans and 75% of all emerging infectious diseases are zoonotic¹, while at least six outbreaks of novel coronaviruses were observed in the last century. Several interacting drivers underpin the emergence of zoonotic diseases by creating novel and diverse contacts among wildlife, livestock and people. These include:

- I. Population growth and rapid and uncontrolled urbanisation,
- II. Increasing demand for animal protein, with a consequent increase in exploitation of wildlife, agricultural intensification and trade, (3) inadequate husbandry practices,
- III. Poorly managed informal wildlife and fresh produce markets, and industrial meat processing plants.

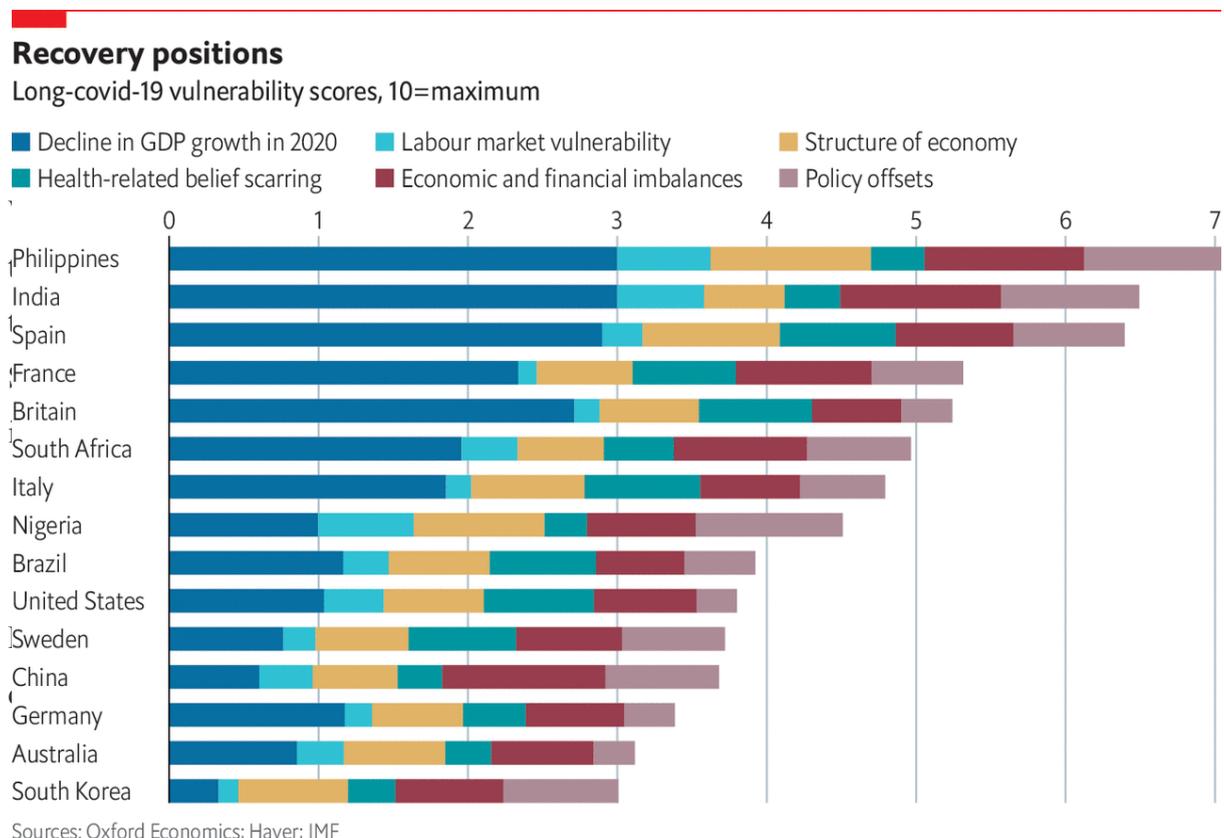
It is also clear that today's high levels of international trade and travel make pathogens spread faster, as diseases can now move around the world in periods shorter than their incubation periods.

¹ Zoonotic diseases (also known as zoonoses) are caused by germs that spread between animals and people.

Current Issues:

In Asia and the Pacific, the COVID-19 pandemic has triggered a severe decline in human development, with the poorest and socially excluded hit the hardest. Millions of jobs and livelihoods have been destroyed, equivalent to a loss of 140 million full-time jobs. While the region was already off-track to meeting the Sustainable Development Goals (SDGs) by 2030, the pandemic has provided a further significant setback. The Asian Development Bank (ADB) estimates that some 78 million people in the region were pushed back into extreme poverty in 2020.

The pandemic has also exposed the region’s pre-existing social, economic, and environmental vulnerabilities. These include poverty, limited social safety nets, weak health systems, social exclusion, and structural gender inequality. For example, UN Women has estimated that **more than four out of five women in the region who lost their jobs during the pandemic did not receive unemployment benefits or other government support.** During the pandemic, women and girls have suffered an increased risk of domestic violence and risk of trafficking. Healthcare workers are predominantly women and therefore more exposed to the COVID-19 infection.



The United States is the country with the highest number of confirmed cases and deaths. The U.S. government's overall response to the pandemic has been criticised, and state governments have also come under fire for enforcing rules that were not tough enough and lifting restrictions too early. However, the country's vaccination rollout has so far been a success, with the U.S. one of the countries with the highest number of vaccinations administered worldwide. The U.S. economy contracted by 31.4% in the second quarter of 2020 but has rebounded strongly since then. The unemployment rate stayed at 5.8% in May 2021.

On March 11 2021, President Biden signed into law the American Rescue Plan, which provides another round of coronavirus relief with an estimated cost of \$1,844bn (about 8.8% of 2020 GDP). The plan focuses on investing in the public health response and providing time-bound assistance to families, communities and businesses. It extends the unemployment benefits programs (including supplemental unemployment benefits), sends direct stimulus payments to eligible individuals, provides direct aid to state and local government, adds resources to the vaccination program and increases funding for school reopening.

2. Brazil

In 2020, the COVID-19 pandemic adversely affected the Brazilian economy and cost a large number of lives, infecting 9% of the population. Brazil has recorded one of the highest figures in absolute terms and in relation to the population among the countries hit by the pandemic.

Brazil's fiscal measures included the expansion of health spending, temporary income support to vulnerable households – cash transfers to informal and low-income workers with the Emergency Aid program, expanding the Bolsa Familia program with the inclusion of over 1 million more beneficiaries, and advance payments of salary bonuses to low income workers –, employment support, lower taxes and import levies on essential medical supplies.

Furthermore, public banks expanded credit lines for businesses and households, with a focus on supporting working capital (credit lines add up to 4.5 percent of GDP), and the government has backed over 1 percent of GDP in credit lines to SMEs² and micro-businesses to cover payroll costs, working capital and investment.



3. China

COVID-19 continues to have a big impact on China's economy. China controlled the pandemic, which helped its rapid economic recovery as it outperformed other major economies in 2020. But in 2021, new waves of infection sent shock waves from economically underdeveloped regions to the country's economic centres. China adheres to a zero-COVID-19 policy of eliminating the virus and public opinion opposes the so-called 'living with the virus model.

China's specific pandemic prevention and control strategies include digital technology pandemic prevention, zero-case policy, all-staff nucleic acid testing, all-staff vaccinations, the long-term quarantine system, and the official accountability system.

² Small and medium-sized enterprises.

On March 18, 2020, the State Council issued the “COVID-19 Pandemic Psychological Counselling Work Plan” in China. The plan requires all localities under its guidance to study and judge phased changes in the psychology of all people in real-time, adjust the focus and response measures of social psychological services according to the time and situation, maintain the population's mental health, and promote social harmony and stability.

4. India

India’s healthcare workers and public officials were vigilant in their fight against the virus. Despite that, the country’s healthcare infrastructure may not be enough in the face of an epidemic. Data from 2017 showed India had less than 0.5 hospital beds per 1,000 people. Moreover, the country’s population density was one of the highest in the world, making it harder to contain local transmissions if strict precaution measures are not followed. A lacking healthcare infrastructure also remains a major cause for concern.

After the economic stoppage because of the pandemic, the International Labour Organisation has projected that 400 million people in India risk falling into poverty. The government’s crisis response has mitigated damage, with a fiscal stimulus of 20 trillion rupees, almost 10 percent of GDP. Also, the Reserve Bank of India enacted a decisive expansionary monetary policy. Yet, banks accessed only 520 billion rupees out of the emergency guaranteed credit window of 3 trillion rupees.

Many times, India has eased its rules on testing, quarantine and hospital admissions in a bid to free up resources for its neediest people, a strategy hailed by experts even though it carries the risk of a heavy undercount of infections and deaths.

Actions Taken:

Amid a drop in infections and high vaccination rates, many countries are now completely lifting the restrictions they put in place to curb the coronavirus outbreak, with some dropping COVID passports, others mask mandates, and others restrictions on entering social areas.

Capacity limits on indoor areas, such as concert halls, museums, cinemas, theatres, bars, and restaurants, in some countries, as well as an obligation to show proof of vaccination, have also largely come to an end.

Most European nations have begun easing coronavirus measures after high vaccination rates and the emergence of omicron as a dominant variant with mild symptoms, despite a continued rise in case numbers.

Possible Considerations for the Future:

Preventive Measures as Individuals

Preventive measures include physical or social distancing, quarantining, ventilation of indoor spaces, covering coughs and sneezes, hand washing, and keeping unwashed hands away from the face. The use of face masks or coverings has been recommended in public settings to minimise the risk of transmissions.

Distancing Measures

Methods include quarantines; travel restrictions; and the closing of schools, workplaces, stadiums, theatres, or shopping centres. Individuals may apply social distancing methods by staying at home, limiting travel, avoiding crowded areas, using no-contact greetings, and physically distancing themselves from others.

Restrictions on travel, transportation

One of the very first measures taken by the international community was to close borders and suspend international flights, which were followed by restrictions on domestic mobility.

Shutting down border gates and halted international flights whereas traveling within the country may be restricted and only if people have the permission of the provincial governor's offices may be exceptional.

Closing borders to international flights, but not imposing strict measures on domestic travel.

Measures to reduce mass mobility

Countries most affected by the virus have so far adopted different policies on curfews. Some countries did not impose a curfew, but they called on citizens to stay at home.

Measures for work life

To protect employees, banning companies from terminating employment or service contract. "Short work allowance" can be provided to companies that were forced to halt business due to the outbreak. Those workers whose contracts were terminated ahead of these policies can be provided with economic support, monthly during their unpaid leave or unemployment period.

Measures at health institutions, healthcare system

The spread of the virus brought a heavy burden on the healthcare systems in the most affected countries, and stocks of healthcare equipment and medication began to melt. They faced problems in supplying basic protective gear such as masks and gloves as well as testing kits and treatment services.

Economic measures

Taking economic measures in a bid to limit the impact of the virus, easing tax and loan burdens of the businesses.

People and companies can be able to pay income tax and corporate tax at a later time. The enterprises most affected by the outbreak can be able to pay their value-added tax and payment of premiums six months later.

Those companies whose cash flow has declined can be able to pay their capital credit and interest payments three months later while they were also financed by the state.

Social assistance

Steps should be taken to reach the needy and strengthen social solidarity during the pandemic. Cash support can be given to low-income households.

Considerable amount of funds can be provided to the social assistance and solidarity foundations.

Financial support programs for the needy can be put into effect in all countries with the highest number of cases.

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