**Position Paper**

General Information

Name Of Country : United States Of America (USA)

Name Of Committee : United Nations General Assembly (UNGA)

Name Of Topic : Causes Of Pandemic

“A great catastrophe is as long in the tooth as the trilobites an hour after it has happened.”

On 30 January 2020, outbreak was disseminated a Public Health Emergency Of International Concern. On 11 February 2020, World Health Organization (WHO) trumpeted a name for the up to the minute coronavirus disease: COVID-19.

Federal Government has laid hold of numerous steps in response to COVID-19 in bailiwicks of Health and Safety, Travel Immigration and Transportation, Money and Taxes, Education, Scams and Fraud, Benefits and Grants, Housing, Federal Building Status Updates and National Parks, Voting and Elections, Courts, Communications, Businesses, International Cooperation, Cyber Security and Federal Workforce.

Moreover the Federal government is making both ends meet to take harsh steps in compliance to other NATO Allies in order to avoid amateurism of situation.

Coronavirus collapse pulls down US consumer-price index dipped 0.4% last month which had notably been biggest decline in past 5 years according to Labor Department of the sovereign state.

Core inflation, minus food & energy, prices fell 0.1% in March, The first decline in 10 years. The rate of inflation over the past 12 months fell to 1.5% from 2.3%. Core inflation Slowed to 2.1% in March from 2.4% in February. In the year to March, overall prices rose 1.5%, while core prices were up 2.1% on the year, the Labor Department said.

Future intervention policies if compared can result in acquirement of an accurate prediction of its impact and furthermore its different outcomes.

To end this, a compartmental analytical model known as SEIRS, which considers subpopulations such as susceptible, exposed, infected, and recovered people. The former model is calibrated with the data received by government of USA. However, augmentation of data by combination of the data under the same topic from other sources, including from the centres for Disease Control and prevention (CDC), The World Health Organisation (WHO) , other countries too. To compare different policies, predicted impact on (a) the number of people susceptible, exposed, infected and recovered comma be required, (b) hospital resources (common hospital beds, hospital ICU beds and number of Ventilators), and (c)the number of deaths. Impact of these policies is then compared by performance of cost-effectiveness analysis in which impact of these policies in terms of costs and citizens' overall quality of life is measured.

 Furthermore, the effectiveness of some policies depends on the time period during which they are imposed. For instance, it matters how long we keep schools closed. Nevertheless, a trade of in cost versus quality of life (measured by a metric known as quality adjusted life years (QALY)) is seen: as the duration of imposed policies increases so do both costs and improvements in the population’s overall quality of life.

However, results indicate that policies such as suspension of cinemas, gyms, home delivery, and takeaway food for about 120 days are great options in that, with a relatively low cost impact, can yield significant improvements in citizens' all over health.