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Security Nexus Perspectives

## POLICY GUIDANCE FOR PAKISTAN'S OSCILLATING RESPONSE TO COVID-19

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South Asia is a complex and dynamic region in which religious, ethnic and social polarization have led to protracted social conflict and persistent animosity between neighboring countries characterized by long standing territorial disputes. The region is important from a geo-strategic perspective as it borders with Afghanistan, China, Russia and Iran, while at least two of the region's nations are nuclear powers. Ambitious regional defense and security policies focus on inter-regional competition and fail to address the low human development index scores, poor governance and the limited extent of democracy in the region. Because of their size and coercive power, Pakistan and India overshadow other small regional states, and their bilateral relations have become the region's identity.

Pakistan is heavily populated with over 200 million people. It is in the process of going through macroeconomic restructuring and performs poorly on most human development indicators. As COVID-19 spread throughout the world, the government of Pakistan launched a version of pandemic response to limit the spread of the virus. Pakistan's neighbor India opted for immediate complete and strict lockdown, while Pakistan chose a softer version.

Without lockdown measures, modelers in Pakistan estimate that 43 million people are susceptible to COVID-19. Of these, they forecast 32 mil exposed, 13 mil asymptomatic, 31 mil mildly infected, 6 mil severely infected, 967,000 critical cases, and 760,000 fatalities. Effective lockdown measures are predicted to reduce transmission by 30% and mortality by 47%.

On February 26, Pakistan reported its first two cases. By March 10, Pakistan reported 20 cases and its first death was reported on March 17. On March 13, a nationwide response was initiated, which included closing borders with Iran and Afghanistan, banning large gatherings, and closing schools/educational institutions. On March 23, Sindh province went into complete lockdown for two weeks, which was followed to a lesser

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degree by Punjab. Prime Minister Imran Khan was against a national lockdown, and so each province has attempted its own strategies for coronavirus containment. The federal government did, however, devise a National Action Plan for The Corona Virus Disease, which provided policies and a template to guide provincial leaders in their efforts to deal with the pandemic.

Although the government started with a hard lockdown, it rapidly saw the financial effects on the poor and decided to take a softer approach to improve individual earning capacity. By April 29, Pakistan had already reduced coronavirus lockdown restrictions with exemptions granted to dozens of sectors to open up as there were only 15,000 cases and 335 deaths, which were well below official projections. Restrictions were further lifted on May 22. This softening of stance turned out to be an error in judgement. Globally by Jun 8, there were over seven million cases with 403,000 deaths. At this time, Pakistan became the fifteenth nation to have over 100,000 cases with over 2,000 deaths.

### **Salient Features of Pakistan's Response**

#### **A complex crisis has its challenges**

Although the government of Pakistan took immediate measures to cope with the pandemic, such as the release of funds, establishment of quarantine centers, hiring of medical staff, and acquisition of testing kits and medicines, they faced major challenges every step of the way. A lack of facilities, equipment and supplies in hospitals, poor health system infrastructure, corruption of officials, and inconsistent implementation of government policies for managing people at borders and airports all resulted in the rapid spread of COVID-19 throughout the nation.

#### **Public-private Partnership**

The average annual wage in Pakistan is \$420 and 35% of the population lives below the poverty line. The literate population is only 54.3%, so the rest rely on non-literate jobs. Any loss of work thus places half the population in dire straits very quickly. To mitigate this aspect of the pandemic impact, the federal government announced a \$6.76 billion rescue and stimulus package to financially assist exposed social groups and safeguard the financial sector. The program is called "Ahsas" (Empathy) and it provides needy households \$73. The private sector also supports the poor through delivery of free groceries. The BBC covered this in a broadcast entitled, "Pakistan dealing with COVID-19 through law of generosity." Furthermore, a Corona Relief Fund was established by the Prime Minister for those who want to donate to relief activities. By May 1, \$18.3 mil had been donated for the Prime Minister's COVID-19 relief fund.

The federal government proposed a "Corona Relief Tiger Force" made up of Pakistani Youth, who would be tasked with expanding the reach out capacity of government services. Registration began on March 31 and within ten days more than 850,000 individuals had registered. This initiative empowered the public and made them implementers of the COVID 19 strategy.

#### **Gender Role**

Pakistan being a patriarchal society, attaches a greater and more visible role on men. Most public space is men's space. As a result, the common perception is that men have become infected at a greater rate and are

suffering more from COVID-19. However, men all come home to women who are then exposed. It is well documented and known that as homemakers and caregivers, women experience a disproportionate burden in families and the informal economy. Unhygienic conditions combined with a lack of social distancing, which for women is virtually impossible, renders many women's livelihoods extremely exposed to the impact of the pandemic.

Women are playing their role as first-line defenders in the fight against Covid-19. There are two women in decision making positions, who implement the government's COVID response policy. Dr. Sania Nishter heads up the rehabilitation program to address pandemic-induced poverty, and Dr. Yasmin Rashid is Minister for Health in the most populated province, Punjab. Both women are highly appreciated for their resilience, professionalism and empathetic policies.

### **Civil-Military Cooperation**

Pakistan's national COVID-19 policy includes both civil and military institutions. It gives a lead role to civil institutions and a supporting role to the military. On the civilian side, the National Disaster Management Authority is headed by Lt. Gen. Muhammad Afzal. It is responsible for planning and executing the COVID-19 response strategy. Dr. Zafarullah Mirza heads the civilian infrastructure to deal with COVID-19 and serves as a Special Assistant for Health to the Prime Minister. The government's proactive civil-military organizational efforts have assisted in a coherent and combined effort. The military is seen to be working with the people and not set against them in a policing manner. The military was activated to support provincial governments, who have control over health systems and are in charge of their own measures to limit the spread of the virus. Good security governance is fundamentally important in addressing any major nationwide emergency.

### **Incapacitated Health System**

Pakistan's healthcare system is not in any position to handle this caseload effectively, which will increase the mortality rate. Pakistan only spends 2% of its GDP on healthcare, against a global average of 10%, so its health care system is already overstretched in normal circumstances. However, as in most countries, the pandemic did not break the health system; rather it exposed weaknesses and vulnerabilities.

There is a big question mark on the availability, sustainability, reliability, preparedness and affordability of Pakistan's health care system. During the pandemic in this resource-constraint environment, Pakistan's hospitals have become quickly overwhelmed and cannot identify all infectious patients and carriers. The provision of credible health to everyone is not possible and neither is contact-tracing, appropriate quarantine, isolation provisions, and the provision of adequate medicine for other health conditions. On March 23, many doctors across the nation complained about the lack of proper equipment for battling the virus. A spokesman for the Doctors' Union in Khyber Pakhtunkhwa said, "We do not have personal protective equipment (PPE), or goggles, and even [face] masks we are buying from our own funds."

### **Public Ignorance and Religious Resistance**

To make matters more difficult, illiteracy, social stigma, orthodoxy, and a poor economy have driven an undercurrent of social and cultural resistance against the government's COVID-19 response, which undermines its efficiency and performance. Although mosques were initially closed across the country, they were reopened on April 18 for mosque congregations during Ramadan with social distancing, hand sanitizer, no physical contact and age limitations. However, these guidelines were not followed or enforced in 80% of observed mosques. A considerable number of people did not understand the posed by COVID-19. They considered it as a non-issue and a conspiracy designed to undermine their religious activities. Such beliefs contributed in the spike of COVID-19.

### **Nonexistence of Basic Governments/Local Democracies**

Provincial government and members of provincial assemblies have large constituencies with no constitutional role in the local administration, although they can illegally influence matters. Members of local government are guided by the provincial level, but know what needs to be done at their level and are accountable to their constituency. Local government provides a well-established mechanism to reach out to common man. However, Pakistan does not currently have a hierarchy of local governments from village to town to city as promised in its constitution. Elected elders are socially renowned and at times, social influencers, so their absence was an obstacle for timely rehabilitation efforts, and efforts to reach out to victims in time to limit the spread were not effective. This situation overburdened the external administration and civil bureaucracy because they did not know the area as much as the elected leadership.

### **Smart Technology**

Innovative smart solutions have been applied to increase the efficiency of COVID-19 policy responses. They range from the use of mobile phone applications for the capacity building of general public to sending text messages to encourage people to follow the precautionary measures. The CoronaCheck app was launched in April, only has 10,000 downloads to date. It provides users with expert information to help them assess their level of risk and when to seek medical advice.

Where possible, authorities are using mobile tracking to contact people who have come into contact with confirmed cases and request that they get their tests done. The shortage of ventilators led the National Command and Operations Centre to develop Pak Nigheban, an app that provides hospitals with information on the availability of ventilators across the country.

In Pakistan, 25% of women (8 million) grapple with emotional, physical and sexual violence every year. Stay-at-home lockdown orders during the pandemic have increased domestic violence across the world, which places protection and response services under pressure. In Punjab province, authorities partnered with the United Nations to develop and promote a Women Safety app that helps women in emergency situations to seek help and receive an immediate response to these concerns. Women using the app can alert the police on an emergency helpline or send an auto text via WhatsApp to the Punjab Safe Cities Authority. This activates an immediate response with designated teams mobilized to the caller's precise location.

## Sustainable Food Security

Since Pakistan is an agricultural country and the pandemic is not a disaster that interrupts food production and transportation, there is no issue of food scarcity or inadequacy at present. However, due to sudden unemployment and business losses, the poor are suffering and the middle class has reduced consumer spending capacity. In early May, it was reported that Pakistan's poor are relying almost exclusively on the charity of fellow citizens because the government is largely missing in action.

## Where to from here?

The uncertain and demanding pandemic is revealing the level of preparedness in each nation and is testing every government's capacity to address the situation with vision and to identify ways to limit damage. All crises bring our governance failures to the forefront while imposing a stark reality check on our policies and processes.

Currently, new COVID-19 infections show no sign of decrease in Pakistan and are rising exponentially in Punjab and Sindh and less so in other provinces. All efforts by the government have not resulted in any obvious flattening of the curve as they have done in more proactive countries. Prime Minister Imran Khan justified the softer approach by explaining that it would have devastating economic consequences for the poor. However, Sweden did not avoid falling into a deep economic crisis with its soft approach, because deaths depress the economy and nations that are tightly coupled internationally cannot effectively isolate economically. Pakistan may come to regret its soft approach, much in the same way that Sweden has done, and is moving back to a hard stance. This is supported by the World Health Organization, which recommended that the country impose an "intermittent lockdown" to slow the spread of COVID-19.

The Planning Minister Asad Umar heads the national response to the pandemic and recently said, "First we educated the masses about the protocols, then we warned them, and now, in the last meeting with the prime minister in the chair, we directed administrations to crack down on places protocols are not being followed." Many commercial areas, retail outlets and markets have been shut down in response to non-compliance of government policies.

The end is nowhere in sight and Pakistan will experience many more cases in the weeks to come. To learn and grow, policymakers must address the vulnerabilities and fragilities of the pandemic response system. While Pakistan faces an unprecedented challenge due to the pandemic, its other internal and external security issues, such as the border conflict with India, demand local, national and international support to mitigate the loss of life and economic setback. It is time for Pakistan to reassess the threats, recalculate the costs, identify the opportunities for change, find a new way through these security dilemmas, and formulate indigenous, tailor-made approaches.

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