

HUMANITARIAN RESILIENCE JOURNAL

ISSUE
05

COVID-19 ECONOMIC VULNERABILITY VS HEALTH EMERGENCY



PREFACE:

Humanitarian Resilience Journal is a biannual magazine published with the support of Asian Preparedness Partnership (APP) under the umbrella of Pakistan Resilience Partnership (PRP). This initiative has been undertaken to bring forward different perspectives on the general humanitarian landscape of Pakistan. Each issue of the journal is dedicated to a specific topic of national importance. The contributions to this magazine are purely on volunteer basis.

The fifth issue of the Journal is focusing on the COVID-19 epidemic. The writers have discussed the challenges, their implications and possible solutions to address the economic vulnerability during the health emergency. The views, thoughts and opinions expressed in these articles are those of the authors and do not necessarily reflect the official policy or position.

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CONTAINMENT OF SPREAD OF COVID-19 WHILE KEEPING PACE OF SOCIO-ECONOMIC ACTIVITIES: A DIFFICULT TRADE OFF



BY: SALEEM SHEHZAD MALIK

The world is passing through testing times in the annals of history as it is hardly hit by the Coronavirus pandemic disease called Covid-19. As many as 12.750 million people have so far been diagnosed Covid-19 positive with more than 566,356 recorded deaths to date across the globe. Pakistan is no exception where 251,625 people have so far been tested positive with 5266 deaths caused by Covid-19. (as of 13 July 2020)

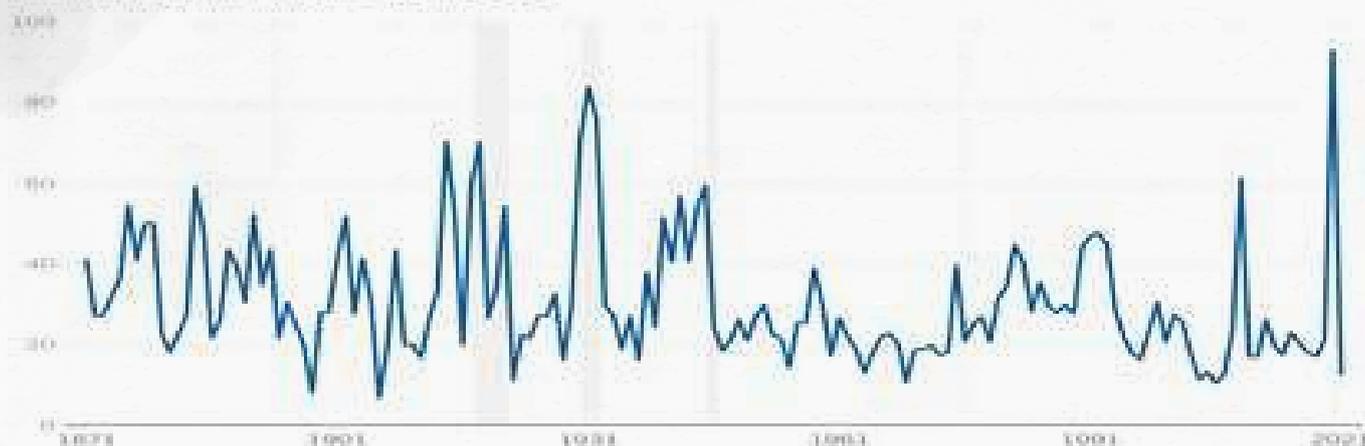
COVID-19 initially paralyzed almost all the socio-economic activities on earth while most of the countries are still experiencing direct and indirect impacts of the global pandemic on their economy and society to varying degrees. **[UN Socio-economic impact assessment]**. It is a public health crisis that is unprecedented in recent history and a trial of our collective responding capacity. The pandemic has brought with it the third economic, financial and social jolt of the 21st Century i.e. after 9/11 and the Global Financial Crisis of 2008. On one hand, Covid-19 has adversely affected the production in affected countries followed by halted supply chains across the world. On the other hand, it has caused a massive drop in consumption. Rigorous measures to contain the virus are being applied, albeit essential, are thrusting our economies into an unparalleled “deep freeze” state, from which emergence will not be automatic or smooth. No doubt the most urgent priority is to minimize the loss of life and health but the pandemic has also triggered a major economic crisis that will put stress on our societies in the long run. Hence, a trade-off between the two phenomenon’s is the

need of the hour.

Given the Covid-19 pandemic, World Bank’s baseline economic outlook envisages a 5.2 percent contraction in global GDP in 2020 despite the extraordinary efforts of governments to overcome the downturn with fiscal and monetary policy support. All the regions are subject to substantial growth reduction. East Asia and the Pacific will grow by a scant 0.5%; South Asia will contract by 2.7%; Sub-Saharan Africa by 2.8%; the Middle East and North Africa by 4.2%; Europe and Central Asia by 4.7%; and, Latin America by 7.2%. These depressions are likely to quash years of progress toward development goals and tip tens of millions of people back into abject poverty. In the long run, the deep recessions are likely to have a lasting impact through lower investment, an erosion of human capital through lost work and schooling, and fragmentation of global trade and supply linkages. Emerging markets and developing economies will be battered by economic headwinds from multiple quarters including pressure on weak health care systems, declining remittances, tight financial conditions amid mounting debt, restrained capital flows and loss of trade and tourism. Moreover, energy exporters will be hard hit. Demand for metals and transport-related commodities such as rubber and platinum used for vehicle parts has also plummeted. While supplies to agriculture markets are satisfactory, trade restrictions and supply chain disruptions can still raise food security issues in some places. **[World Bank]**.

Most countries are expected to face recessions in 2020

Share of economies in recession, 1871-2021



The proportion of economies with an annual contraction in per-capita GDP. Shaded areas refer to global recessions. Data for 2020-21 are forecasts.
Source: World Bank

The OECD Interim Economic Outlook, released on 2 March 2020, was a first attempt to take stock of the likely impact of COVID-19 on global growth. The behaviour of financial markets was a clear depiction of the extraordinary uncertainty of the situation. It was likely that there is a sequential decline in global GDP, in the current and next quarters of 2020. One can comfortably say that developing countries may suffer the direct and indirect impact of Covid-19, as they did after the 2008 crisis. The global public health crisis coupled with an enormous economic and financial crisis will put huge strains on our societies. Even after the worst of the health crisis will pass, people will continue to struggle with the jobs crisis that will ensue. In case financially insecure people lose their income for three consecutive months they may trap into the poverty circle. Well before the outbreak of the pandemic, the global economy was already under stress owing to several underlying vulnerabilities, which have now been worsened by Covid-19 i.e. high level of corporate debt and trade tensions between major economies; gaps in income, wealth and job stability in many countries.

[OECD-Coronavirus-COVID-19-Joint-actions-to-win-the-war]

There was varied policy response to Covid-19 worldwide.

(<https://www.imf.org/en/Topics/imf-and-covid19/Policy-Responses-to-COVID-19>). Few countries pursued the policy of extensive/ large scale testing and strict lockdown like South Korea. The authorities implemented comprehensive testing and tracking, which enabled early isolation and treatment while minimizing widespread mobility

restrictions. In China, the government imposed a strict lockdown in Hubei province, where the Covid-19 was first detected. It further pursued general containment measures including the extension of the national Lunar New Year holiday, ban on large-scale mobility at the national level, social distancing, and a 14-day quarantine period for returning migrant workers. Few countries resorted to imposing curfew (e.g. Kingdom of Saudi Arabia and Sri Lanka) while few countries did not place any lockdown or curfew and just created awareness among the masses to follow the principle of social distancing such as Sweden. It, however, deserves special mention here that both spread of Covid-19 and its severity neither had a pattern nor a uniform trend worldwide (<https://coronavirus.jhu.edu/data/animated-world-map>). The United States declared state emergency and implemented a range of measures including travel restrictions, social distancing, closure of non-essential businesses, schools. The United Kingdom implemented a set of measures including social distancing, travel restrictions, closures of non-essential businesses, entertainment.

In Pakistan, the first-ever state-level policy response to Covid-19 came from the National Security Committee, the apex civil-military coordination body, which took cognizance of the situation in its meeting held on March 13, 2020 and made certain decisions such as to close the border with Iran, social distancing, to ban large public gatherings and closing down educational institutions across the country. Subsequently, the policy decisions regarding the Covid-19 response are being taken by the National Coordination Committee (NCC) headed by the Prime Minister of

Pakistan with all the Chief Ministers of the provinces on board. Initially, NCC was supported/assisted by the Implementation and Monitoring Cell established in Prime Minister's Office. However, the National Command and Operational Centre (NCOC) was soon established (by the end of March 2020) and National Coordinator was appointed from Pakistan Army. The daily meetings of NCOC are co-chaired by Federal Minister for Planning, Development and Special Initiatives and National Coordinator while Chief Secretaries from all the provinces/regions/areas along with all relevant stakeholders are part and parcel of NCOC. Based on consultation with the provinces and other relevant stakeholders including data scientists, health care professionals and economists, NCOC recommends policy measures/strategies to NCC.

The policy response in Pakistan remained selective quarantines, border closures with neighbouring countries, international and domestic travel restrictions, school and university closures, banning of public events, social distancing measures, and varying levels of lockdown across the country and 14-days quarantine, on return, for Pakistanis stranded abroad. The salient feature of the Covid-19 response remained the coordination of federal and provincial governments while ensuring a certain degree of provincial autonomy under the 18th constitutional amendment. The lockdown has been gradually eased out by allowing 'low-risk and high priority industries' to start their operation and 'small retail shops' to reopen with newly developed Standard Operating Procedures (SOPs). Besides, the ban on domestic and international travel has been lifted (i.e. domestic and international flights have resumed, train services and by-road travel (inter-provincial, inter-city and inter-district transport has been allowed). Educational institutes are likely to open from September 15, 2020. Now a policy of smart lockdowns is being pursued under which only hot-spots (where Covid-19 positive case rise above a certain level) are locked/sealed. This strategy of smart lockdown has been found very successful. Meanwhile, hospitals' capacity has been enhanced which has eased out the stress on hospital resources which was felt during the early phase. Nevertheless, the hospital ramp-up plan is being executed.

The main challenge faced by Pakistan was to adopt such policies/strategies which should result in the minimal spread of disease with nominal

disruption in socio-economic activities. Initially, the strategy of a complete lockdown was implemented. On one hand, this complete lockdown strategy had repercussions on employment and, consequently, people's livelihoods. It had implications on food production, the entire value chain including marketing, distribution and even the consumption due to lack of livelihood opportunities and the majority of the population having subsistence earnings. Informal sector workers remained most vulnerable and many of them lost their jobs due to the prevailing lockdown situation across the country. Small entrepreneurs, shopkeepers and small factories owners and labourers who were directly dependent on income sources from daily trade and economic activities in rural and urban areas also experienced a sharp decrease in their earnings. Likewise, nearly half of households in the country relied on agriculture and livestock as their primary and/or secondary source of livelihood who came under stress. It was feared that almost 125 million people could touch the poverty line. On the other hand, due to the closure of health facilities at out-patient departments, immunization, preventive health care, and pre & post-natal care, etc. people with common diseases suffered a lot. This situation developed a potential risk of increases in mortality.

To cope with the situation, the Government of Pakistan announced a PKR 1.25 trillion (approx. USD 8 billion) through a multi-sectoral relief package to address the challenges arisen due to the outbreak of Covid-19. The overall economic package included \$ 1.2 billion spent for providing relief to the daily-wagers and labourers by disbursing Rs12,000/- each per month through the "Ehsaas program" i.e. the Social Protection system; \$ 600 million for the industrialists and exporters, which would help resolve their liquidity issues; \$ 600 million for agriculture and SMEs sectors; \$ 300 million for the Utility Stores Corporation (USC) to provide five basic edible commodities, including flour, pulses, sugar and Ghee, on subsidized rates; \$ 1.69 billion to procure 8.2 million tons of wheat during the current season; and, \$ 90 million incurred on tax break on health and food supplies. [\[OCHA Response plan\]](#)

To sum up, the Government has so far been able to maintain a delicate balance between containing the spread of disease and keeping the pace of the socio-economic activities. Hence, the strategy of smart lockdown and hospital ramp-up plan should continue.

COMMUNITY NEEDS AND EMERGENCY RESPONSE TRENDS IN COVID-19



BY: MS. SHAHNAZ AKHTER

Introduction

Consequent upon National Health Emergency of COVID-19 in the country, fear of isolation, death, hunger, loss of business aroused in the communities. It was a complete paradigm shift. This pandemic took hundreds of lives and affected a lot of small and large scale businesses. Government took many emergency steps to cope up with the challenging situation and prevent the spread of the pandemic. The role of frontline doctors, nurses, rescuers, paramedics and security staff became highly essential from February 2020 to this day and there was a continuous shift in pattern with reference to provision of emergency services, health facilities and even provision of financial support to the families. This pandemic sensitized the governments across globe as well as Pakistan to increase health facilities and shift business to online to minimize the health and economic risk from such situation. Rescue Service being first emergency response agency to all emergencies also took emergency steps to meet the COVID-19 challenge. These steps include Corona Helpline 1190, Training of Rescue staff from Emergency Services Academy, shifting of Corona patients from house to hospital, hospital to isolation / quarantine centers, patients care in hospitals, establishment of Corona Triage Center, food packs distribution, awareness raising and burials of corona patients. During the Corona emergency, about 100 rescuers of Punjab Emergency Service suffered from Corona disease and two lost their lives but Rescue Service remained available to all on a single call for all kind of emergency assistance to the communities.

Role Of Punjab Emergency Service

The Punjab Emergency Service performed following activities in Punjab during COVID-19.

Shifting of Corona Patients:

The main role of Punjab Emergency Service amid pandemic is to provide emergency shifting of the COVID-19 positive patients from home to quarantine, /isolation centers and hospitals. Besides that, shifting of critically ill patients to the ICU's and HDU's established at Government facilities tertiary care hospitals is also being performed by the Rescue Service. So far a total of **12433 corona patients** have been shifted including **9308 patients in hospitals and 3125 in quarantine centers** by Rescue Service in Punjab.

Disinfection of Public Places:

Fire Rescue Service carried out disinfection activities at 97691 public places across Punjab. Fire Vehicles were used to spray chorine mixed solution at important offices and area from where corona patients were received.

COVID -19 Awareness:

Motorbike Ambulance Service was used to give awareness in the communities of narrow streets about precautions to avoid spread of COVID-19. People were asked to use masks, practice hand washing, social distance and avoid social gatherings.

COVID -19 Burials:

When people were scared of catching the infection

from corona dead bodies, the Rescue teams were included in district burial teams for professional and dignified burials of suspected and confirmed corona dead bodies. Rescue Service performed over 1751 corona burials in Punjab.



ROLE OF PAKISTAN RESCUE TEAM DURING COVID-19 PANDEMIC

Pakistan Rescue Team, the first (UN-INSARAG) classified team of South Asia, was entrusted by Chief Minister of Punjab and Minister of Health Punjab to support the functions of the Health Department, Punjab to combat against the pandemic in mid of March 2020.

Expo Corona Rescue Triage Center:

Keeping in view the expertise of Pakistan Rescue Team (PRT) and readiness in order to combat against COVID-19 specifically in Lahore Region, PRT was tasked to establish Expo Corona Rescue Triage Center to facilitate patients on daily basis. Pakistan Rescue Team (PRT) took responsibility of managing Lahore Expo Triage Center established by Government of Punjab to deal with daily influx of patients with routine and COVID- 19 complaints. The Rescue Team is involved in information gathering, screening and shifting of patients and decontamination of ambulances, area and personnel. The Triage Center facilitated over **6550 patients and shifted 1191 patients in expo hospital and 280** in other hospitals.



Training of Rescuers on Corona Management:

As the first case of COVID-19 appeared in the country the Pakistan Rescue Team immediately organized specialized Corona Management Training for the rescuers of Punjab, Khyber Pakhtunkhwa and Baluchistan at Emergency Services Academy to combat this situation in more



professional manner. The special videos, emergency response and safety instructions with reference to use of complete Personal Protective Equipment (PPE), emergency response, disinfection of the emergency vehicles, equipment and proper disposal of used PPE were developed through consultative process. The compiled manuals were issued to all rescue services for safe and effective management of COVID-19 emergencies.

Deployment of Resources at Various Significant Places:

Pakistan Rescue Team ensured proper deployment of resources at various significant places/offices including Governor House, Civil Secretariat Punjab for screening of people visiting offices and subsequently shifting Suspected COVID-19 patients at the designated government facilities. The PRT established another Command and Control Center at hub of Punjab Civil Secretariat to monitor COVID-19 activities in conjunction with other allied departments.

Corona Rescue Helpline 1190:

Keeping in view the increasing number of calls at Emergency Number 1122 a dedicated Corona Rescue Helpline 1190 was established with universal toll free number to scrutinize the patients calling from various places across Punjab province with intimation & prompt response to shift the patients on priority basis to nearby health testing facility. Initially, people with routine cough, fever, were calling to seek guidance. Interesting part was that people were also providing information about the person with recent travel history in their area. During first three weeks, the Helpline received thousands of calls but out of them, approximately 300 people were required to be shifted to hospital. The data revealed that people have fear about this pandemic and they are discussing and reporting on Helpline to get relief.

Economic Vulnerability:

The sudden change in the trend of calls at Corona Helpline 1190 was observed after 12 April 2020. The trend showed that fear of pandemic was taken over by the fear of hunger. The majority of calls were now concerning to the food insecurity. People were reporting loss of employment and consequently loss of a stable source of food. Rescue Service distributed over 50,000 ration packs to deserving people these rations were collected from affluent people of the society under the umbrella of Pakistan Development Network.

Challenges Faced by Emergency Service:

Initially the number of calls received at rescue helpline 1122 increased three folds therefore a dedicated Corona Rescue Helpline was started to facilitate corona related callers and provision of services in this regard. During the initial stages of the emergency there was a shortage of PPE for the emergency personnel. However, the dedication of the staff was not hindered by this shortage. They used all available resources to perform their functions. Later on due to support of National Disaster Management Authority, National Command and Operations Center and Government of Punjab Rescue Service were provided sufficient supply of PPE. Another challenge was availability of training material on corona emergency response this was dealt with the self-development of emergency training course videos and guidelines.

Recommendations:

The community emergency preparedness plans must be prepared down to town Union Councils level so that area wise community needs could be identified in pandemic and decisions like imposition of smart lockdown, distribution of food packs and financial assistance could be effectively implemented. Centralized data of each household should be available for better planning of any pandemic situation.

The needs of community change according to the emergency they are facing therefore, the emergency response should be flexible to address the changing requirements. The business related to medical items should be enhanced at local level to meet such challenges in better way. The support to community should be provided through centralized distribution mechanism to avoid duplication. The emergency responders like Rescuers must be part of each contingency plan as they are the first responder in any emergency situation.



IMPACT ON THE MARGINALIZED AND WHAT THE GOVERNMENT CAN DO TO MINIMIZE ITS EFFECTS



BY: SHAMAILA IDREES

Economic vulnerability is the expected exposure of an economy to developing obstacles and emerging out of financial receptiveness, while economic adaptability is characterized in light of the fact that the planning originated capacity of an economy to look up to or get over the consequences of such shocks. Economic vulnerability of a community is often evaluated by defining how diverse its sources of income are, the convenience of access and control over means of production, (e.g. farmland, livestock, irrigation, capital etc.) adequacy of economic fall back mechanisms and therefore the availability of natural resources within the area. The Vulnerability Index may be a measurement of the negative impact that the coronavirus crisis can have on employment based upon a region's mixture of industries. For instance, accommodation and food services are projected to lose more jobs as a result of the coronavirus (over half jobs lost, on average) compared to utilities and education services (with mild or no job contractions).

As the pandemic started increasing within the world, especially in under developed countries like Pakistan the speed of vulnerability index also increased. This has caused resentment within the community thanks to lack of services, resources and knowledge. The gains on poverty reduction and social indicators were already hard-won gain in Pakistan for the last 20 years, COVID-19 has pushed those efforts further back. The pandemic has adversely affected the consumptions, investments, international trade and private capital flows leading into bad cash flows or bootstrap.

Being an agriculture based country Pakistan had a hard-hit during lockdown, disruption in transportation, logistics, labor for harvest and scarcity of resources for next planting season.

Extremely vulnerable groups including households that have agriculture and livestock as their primary or secondary source of livelihood (nearly half Pakistan's households); people that depend upon daily wages, including skilled/unskilled non-agricultural labourers and forestry workers (22% of households); households within the poorest wealth quintile that farming, fishing, livestock rearing and agricultural labour (33%) and on daily wage labour, i.e. skilled and unskilled non-agricultural work (29%). Those facing an interruption in essential services also are highly vulnerable, including: nearly 42 million school children unable to attend school; 17 million children under-five in danger of missing out on immunization; 4.7 million pregnant women unable to succeed in antenatal and postnatal care; 2.45 million more people, additionally to the prevailing 40 million, who are food insecure; and 12 million children who are undernourished and undersized.

The government should devise strategy and take proper measures and provides pragmatic solution which may resolve problems permanently. e.g provide food items to poor families at subsidized rates from Utility Stores. Other measures involve reducing the worth of all petroleum products, allowing electricity and gas bills to be paid in instalments over three months and per unit rate shouldn't be raised abnormally, strengthening the capacity of public hospitals to deal with the

pandemic, offering tax refunds for exporters, and raising targets for wheat procurement to inject a cash stimulus into the agricultural economy.

The COVID-19 Socio-Economic Framework should be designed and aim to support the government to reduce, mitigate and manage the consequences of the pandemic – to save lots of lives, protect people and ‘recover better’ through government collaboration with donor organizations and development partners’ engagement. This would enable Pakistan to instrument new monetary priorities, protect jobs and economic activity, ensure food security, and meet the social and health needs of vulnerable groups in a cohesive and collaborative manner.

Necessary work needed to guard the health system during the crisis, and ensuring that essential health services are available to those in need, continue essential health care services, especially those provided by basic health units and rural health centers, maintain immunization services for youngsters under-two; continue reproductive, maternal and child health services; and ensure a resilient health system. Awareness campaign should be started through SMS, social media, the mainstream media and online platforms – to tell parents and caregivers about alternate mechanisms for delivering health services, including immunization and reproductive health care.

The most important measure for social protection and helping people cope through relief packages, basic services and food security that's scaling up resilient, pro-poor social protection systems; maintain the food system and essential nutrition services; make sure the continuity and quality of water and sanitation services; ensure sustained learning for all children, preferably in schools and ensure child health protection.

There's dire need of the framework that only focus is on ‘recovering better’ and delivering on the SDGs (Sustainable Development Goals) in Pakistan. The framework should effort on better health system and provide free emergency health cares for the community. This needs a transformational approach – one that addresses the basis causes and drivers of economic, social, political and environmental challenges, and not just targeting their symptoms. There is an alarming requirement to form changes in social structures, institutions and relations, including patterns of inequality – associated with income, gender, ethnicity and geography – that hold people back, paired with attention on better natural resources management and addressing global climate change.

We need to raise voice to international authorities like IMF to return up with plausible solution in order that government can afford to pay back debt easily, and may step towards the economic stability. Right now, our government should focus on vulnerable community and health emergencies instead of progressing big projects like motorways, new airports, metros, stadiums and dams etc. Imperatively, the policies should be formulated to offer basic food necessities e.g. subsidies on wheat, grains, pulses, milk, clean water, child nutrition, quality education, petroleum, medicines, vaccination and immunizations etc. There should be minimal tax on fast-moving commodities. These practices can help reduce the burden of this economic and health disaster and on the most vulnerable segments of society and can ultimately results into overall economic stability and development.

THE GOVERNMENT'S RESPONSE



BY: MS. FAUZIA SAEED

Background

What is Corona Virus? Corona Viruses are a large family of viruses which many cause illnesses in animals or humans. In humans several Corona Viruses are known to cause respiratory infections ranging from common cold to more severe disease such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The most recently discovered corona virus causes corona virus disease named COVID-19.

How does COVID Spread? People can catch COVID-19 from others who have the virus. The disease can spread from person to person. Small droplets from the nose or mouth which are spread when a person with COVID-19 coughs or exhales. These droplets land on objects and surfaces around the person. Other people then catch COVID-19 by touching these objects or surfaces and then touching their eyes, nose or mouth without washing or sanitizing them. People can also catch COVID-19 if they breathe in droplets from a person with COVID-19 who coughs out or exhales droplets. This is why it is important to stay more than 1 meter (3feet) away from a person who is sick.

The first case of COVID- 19 was reported from Karachi on February 26, 2020 since then the virus has spread into various regions nationwide and has currently become an epidemic. Within 45 days on July 20, 2020 the Pakistan's tally has reached

264593 confirmed cases, while 204276 patients have recovered, and 5591 have died.

The government of Pakistan has taken unprecedented steps to counter the effects of COVID-19 crisis, but it is unclear if these will be enough given the challenges facing the country prior to the pandemic.

Pakistan is amongst the 185 countries dealing with the coronavirus pandemic. There are now clear warning of a global economic recession as workers continue to fall sick, factories remain shut, and healthcare system becoming overwhelmed.

The Spread of disease within and into Pakistan cannot be separated from the global context. The world's urban population at 4.2 billion has now exceeded the global rural population, and almost 40% of Pakistanis live in cities.

At the moment it is hard to calculate and forecast the true impact of coronavirus beyond the estimated human toll. The outbreak is ongoing, and researchers are continuing to learn about this new form of virus. While the SARS outbreak costed the world \$50 million, initial estimates for coronavirus are already suggesting a loss of 360\$ billion. In Pakistan relatively localized epidemics (such as Dengue, Measles and Hepatitis C) have posed challenges. A full-fledged global pandemic can have dire implications.

Challenges

A Broken Health System:

Outbreak of such scale expose gaps and fractures in the undelaying healthcare system. This can be related to the timely detection of disease, availability of basic healthcare, tracing contract, quarantine and isolation procedures, and preparedness beyond the health sector. All of these issues are especially prominent in resource constrained settings.

Dealing with Resistance:

The Government of Pakistan is particularly hampered in its ability to deal with COVID-19 by the social, political and context of the country. Resistance created by the social, political and cultural context of the country. Resistance created by community dynamic, local religious benefits, political instability, economic fragilities, and a lack of trust in government and institutions has made Pakistan struggle with far less infectious diseases like polio. The fight against Ebola in Africa was subjected to similar challenges. Pakistan is now facing the same obstacles with coronavirus.

The Mosques have been shut down in most Muslim nations including Saudi Arabia. However, Pakistan's policymakers have not adopted such stringent measures for fear of a backlash from the religious groups. They have so far only restrained congregational prayers on Fridays. It is nonetheless important to explore ways of working with religions organizations and leaders to influence outcomes and behavior.

A Major Economic Downturn:

The economic ramifications of the crisis are also significant in Pakistan. A downturn in Pakistan's GDP (Gross Domestic Product) growth was anticipated even before the epidemic reached the country. The State bank had already downgraded the GDP growth rate to 3% from an earlier estimate of 3.5% for the fiscal year 2020. The Asian Development Bank also lowered its projected growth rate to 2.6% from an estimated 2.9% while the World Bank has reduced it to 1.1%. Official assessments estimate an initial loss of PKR 2.5 trillion (\$15 billion approx.). It has further forecasted an economic loss of up to \$5 billion while official authorities expect anywhere between 12.3 to 18.5 million layoffs.

Government Response

The Government of Pakistan has unveiled a PKR 1.13 trillion (6.76\$ billion) rescue and stimulus package with a good balance between providing direct assistance to the vulnerable and protecting industry and businesses. The allocation is sizeable but its true impact can only be assessed by how it is implemented. Some of this will be funded by support from the World Bank and Asian Development Bank in over the next few months. Like many other countries the Government is experimenting with various forms of lockdowns. Sindh was the first province to implement a curfew like lockdown. Karachi faced the most stringent measures compared to anywhere else in the country. Meanwhile Punjab has implanted a milder form of lockdown and KP (Khyber Pakhtunkhwa) resorted to a partial lockdown. Direct investments into healthcare and services have also been undertaken. Currently, only half of the 2,200 ventilators in Pakistan are functional to treat coronavirus patients. An amount of PKR 50 billion has been set aside to purchase medical equipment including Personal Protective Equipment (PPE). The testing capacity has also been enhanced from 30000 to 280000 and according to official sources will be further enhanced to 900000. The government is also contemplating putting in place a coronavirus ordinance to speed up procurement and provide protection against personal liability of healthcare professionals (Doctors, Nurses, Paramedic and Technical staff and Psychologists). Punjab is using WHO's Strategic Preparedness and Response Plan (SPRP) for coronavirus to calculate future health related interventions.

A Vital Support System.

Like many other countries, the global outbreak of COVID-19 poses an enormous challenge to health services. The Sehat Tahaffuz 1166 call center is increasingly becoming an important platform to listen to the concerns of people, provide correct information, and connect them to a doctor when required.

Since the outbreak of COVID-19 the call volume has increased dramatically to about 70000 calls a day. "Each call agent responds to about 150 calls a day. To increase the capacity of the helpline, thirty agents have joined to manage the growing number of calls, "added a Worker of 1166 helpline.

Despite adding more agents, the call volume has become unmanageable for the helpline center. The

situation has prompted the government to assign additional resources. The Digital Pakistan initiative of the Prime Minister's Office is helping recruit an additional 165 agents while the National Institute of Health assigning ten more doctors to the technical team and more psychologists for counseling of corona patients.

"Training and commitment of call agents are very important. Otherwise the helpline will not work, "said Huma". (Worker from 1166 helpline) We have four supervisors managing the team of call agents and support them when required as the work here is highly challenging especially with the high number of calls every day".

All call agents undergo a comprehensive training on COVID-19 basic information and primary symptoms facilitated by the National Institute of Health, followed by sessions on the helpline technology and interpersonal communication.

Using Technology for Awareness:

Pakistan is coming up with innovative smart solutions and exploring the use of technology to create awareness, mitigate the risks, and contain the shocks created by this pandemic. To promote public knowledge, the government has, in collaboration with the telecommunication industry, replaced ringtones with an awareness message about the dangers of COVID-19 and measures that can be taken to remain safe. The government regularly sends SMS to encourage people to wash hands and practice social distancing. Authorities are also contacting suspects or confirmed cases through mobile tracking and pushing them to get their tests done.

Ensuring Food Security:

The government has also kept funds for logistical support to the National Disaster Management Authority (NDMA), the federal authority mandated to deal with a wide spectrum of disasters, to ensure food supplies. Of course, ensuring food security and access to a safety net are just as critical as having a sound health system. The government plans to temporarily abolish all taxes on food items and has announced a significant reduction in oil prices. Payment of utility bills has been deferred for three months for households with bills falling below a certain threshold.

Project of Ehsas Programme:

Cash transfers are also being leveraged in the country. In fact, Pakistan has already in place one of the world's most well targeted cash transfer programme – the Benazir Income Support Programme (BISP). As an immediate top-up to the existing five million families under BISP, the government has enhanced their monthly stipend from PKR 2000 to PKR 3000. More recently the government has announced a basic income scheme to provide an emergency cash transfer of Rs. 12,000 using data analytics to decide who is eligible. It is further expanding the inclusion criteria to provide relief to those on the margins of hunger such as daily wage workers, street vendors, rickshaw drivers, particularly during the lockdown period.

Protecting Business:

The State Bank of Pakistan (SBP) has announced a Temporary Economic Refinance Facility to fuel new investment. This will offer subsidized loans to the manufacturing sector and a refinance facility to allow banks to get loans at zero mark-up, which they can offer to hospitals at 3% for five years. The SBP has also reduced the interest rate to 11%, 150 basis points lower than before.

Economic Impacts

Pakistan is the fifth most populous country in the world, with dense cities where contagion spreads far and fast. This virus, alongside measures to mitigate it, poses major risks to lives and livelihood with impacts that could last for decades.

While the poverty rate declined by 40 percent over the last two decades to 24.3 percent in 2015. The IMF projects a sharp reversal, with up to 40 percent of Pakistan living below the poverty line after the COVID-19 crises.

Real (GDP) Gross Domestic Product growth is expected to reduce to 3 percent, with downturns in services and manufacturing. Agriculture will also lag if the lockdown continued to disrupt the needed transportation, logistical support, labor, and access to inputs for the next planting season.

Those most at risk include people already living below poverty line, women, children, people with disabilities, the elderly, and other marginalized groups whose lives livelihoods, nutrition and access to basic services are least secure.

Concluding Remarks

Such pandemics expose the inadequacies of response of successive governments to poverty, healthcare and inclusive social protection and governance. While one cannot predict what will cause the next major epidemic and when, early actions can prepare government to handle it better. However, any strategy that counters such a pandemic must address underlying vulnerabilities. The challenges facing Pakistan in the current crisis are stark, and it remains to be seen whether the

huge interventions that the government has undertaken will be enough to mitigate the loss of life and economic hardship.

Pakistan Prime Minister Imran Khan on May 15 2020, urged provinces to loosen travel restrictions imposed by the COVID-19 lockdown saying more than 150 million people in the country have “suffered economically.” Mr. Khan and other policymakers point to a relatively low death rate from the coronavirus to make the case for loosening the lockdown.

ENTERPRISES AT A STANDSTILL



BY ASIAN PREPAREDNESS PARTNERSHIP (APP)

When you want to paint the life of local communities across the Philippines, head to their sari-sari stores. Framed under a colorful awning, you'll see neon-tinged chips and candy packets hanging from the ceiling. But these shops are more than your one-stop needs solution, they bring a community together through native snacks or local refreshment stalls on the side.

For the past two months, the shutters of these local havens have been closed. The COVID-19 pandemic has forced the over 1 million sari-sari shops to shut their storefronts. These tiny enterprises are the link between community and consumers. Their significance comes in numbers- in 2016, sari-sari stores were estimated to have a national **retail sales value of more than \$26 million.**

Veronica Gabaldon, Executive Director of the **Philippine Disaster Resilience Foundation (PDRF)**, understands that the enhanced community quarantine (ECQ) conditions will lead to many sari-sari shops and micro, small, and medium enterprises (MSMEs) in the Philippines having to cease operations in the long run. Most of them lack the capital and support to restart even after lock measures are eased and phased out. **MSMEs make up 99.52% (998,342) businesses and employ more than 5.7 million people (63% of total employment) across the nation.**



She recently spoke at a **UNDRR Webinar on Business Resilience** focusing on how the COVID-19 pandemic affects MSMEs the most, “Webinars have become the new normal in a time where social-distancing is the best preventative measure. When a disaster strikes, we seek constant information to comprehend our new reality. These webinars are a medium for the right information, guidance, and source of sound advice from true experts and practitioners.”

Unlike Previous Chapters

The current situation is beyond any previous textbook case and it poses unique challenges. Veronica emphasizes that MSMEs should implement business continuity plans while accessing relevant information and services, “The current continuity plan can be somewhat repurposed but MSMEs need to collect information from reliable sources. MSMEs need to constantly communicate with the associations, cooperatives, and chambers of commerce. They also need to take advantage of government assistance because such support is vital.”

Following the announcement of the ECQ conditions announced by the Philippine Government in March 2020, PDRF found that MSMEs were most concerned with food security and the kind of assistance they would receive from frontline health workers. “We have disseminated information on government assistance and prevention packages with our members during March and early April,” states Veronica. The training sessions that they conducted under the **Asian Preparedness Partnership (APP)** program provided an efficient methodology to carry out such activities. “Organized data on government issuances and information campaigns are the first steps in supporting small enterprises. The challenge now is to operationalize these plans and resource mobilization for recovery initiatives.”

The Groundings for Resilience

The **Philippine Preparedness Partnership (PHILPREP)** is our national partnership in the Philippines. It is a tripartite partnership among the government, local humanitarian organizations, and the private sector. It was established with the support of the Asian Disaster Preparedness Center (ADPC) and the Bill and Melinda Gates Foundation (BMGF). Representing the private sector in the

Philippines, PDRF is one of the founding member organizations of PHILPREP. We work to develop curriculums to strengthen partnerships at the community level. Our success lies in mobilizing member agencies such as PDRF to provide training and knowledge dissemination at the local level. We have connected individuals and organizations to share experiences and reduce duplication of efforts and resources.

Through PHILPREP, PDRF developed the Training for Business Resilience (T4BR) course from previous projects with funding from GIZ/ GIDRM and conducted Business Continuity Management (BCM) training for MSMEs in selected regions of the Philippines with our support. The T4BR and BCM training courses are framed to help build resilient economic lifeline supply chains and fence line communities in order to ensure their ability to continue the delivery of services and products and to establish their capacity to immediately recover from disasters.

Comprehension is a Matter of Asking

The most accurate information towards tailored solutions comes from engaging those at the frontline. Kasagana-Ka Cooperative conducted a survey of 3,296 MSME members following the 60-day mark of the lockdown. “The survey results reflected that 64% feel that their income will decrease 6 months after the ECQ, 66% are now going through financial problems, 76-80% of their businesses are closed, and 73% of them have lost their income,” details Veronica. A majority of MSMEs are running out of the finances that they have set aside. “Nine out of 10 business owners were concerned about running out of capital. They have used it for food consumption or to compensate for their employees’ salaries.”



¹ The course materials were adapted from the Train for Business Resilience (T4BR) courses developed by Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH within the framework of the Global Initiative on Disaster Risk Management (GIDRM) and the iPrepare Business facility at ADPC under the framework of the Global Initiative on Disaster Risk Management (GIDRM) as part of an earlier regional project on “Strengthening the Disaster Resilience of Small and Medium Enterprises in Asia” (2014-2017)”



locally-led activities and sustainable interventions designed by the government and the private sector. “A concrete information-sharing hub for the government, the private sector, and humanitarian actors is necessary to consolidate all recovery efforts and create recovery hubs,” according to Veronica. PDRF launched **Synergizing Recovery Initiatives, Knowledge, and Adaptation Practices (SIKAP)**, an online business recovery hub to address the most critical pain points for MSMEs. “The ad-hoc business recovery center proved effective during Hurricane Yolanda. The center would deliver information on health force work and safety, addressing bureaucracy pain points in accessing government loans, support and assistance, and helping them to match industry 4.0 or a post-COVID environment where they might need to digitize or pivot their business model.”

Optimism is a constant for these businesses. “Financial support following the disaster is the key – 59% of enterprises indicated that they would take a low-interest loan to recuperate. On average these businesses would need 10,000 to 15,000 pesos (\$200 to \$300) to restart their businesses. I believe that microfinance institutions (MFIs) can facilitate this assistance,” observes Veronica. Online and mobile platforms enable MSMEs to continue their operations. However, these platforms remain underutilized by business owners – only **33% of men use online marketing applications, and 18% use online market access applications, compared to 12% and 8% for women**, respectively. “We promote the use of digital payment through some of our telco members, Pay Maya and G Cash. Payments through e-wallets are very easy to learn because most of these enterprises lack the capacity for a website or an online store.”

United Towards the New Normal

Veronica also recognizes that the current conditions will lead to lay-offs at an all-time high by June or July 2020, “PDRF is working with the Department of Health (DOH) and the private sector to increase personal protective equipment (PPE) through our Project Kaagapay initiative. The DOH is working to increase national manufacturing capabilities given the global shortage of PPEs.” The UN estimated that LICs and MICs will require **2.2 billion surgical masks, 1.1 billion gloves, 13 million goggles, and 8.8 million face shields for the rest of 2020**. “Our concerted efforts with the DOH, the Department of Trade and Industry (DTI), and member companies have helped convince manufacturing firms to repurpose their operations into producing PPEs. The Confederation of Wearable Exporters of the Philippines (CONWEP), one of the manufacturing firms, is currently able to produce 10,000 PPEs per day.”

Keeping it In the Community

The Philippines has made strides in the public-private sector collaborations for disaster relief. This progress has indicated the need for



The medical community has estimated that 30,000 additional testing kits are necessary in order to prevent a second wave of infections. “The two co-chairs of PDRF, Manuel V. Pangilinan (Managing Director and Chief Executive Officer, First Pacific Company Limited) and Jaime Augusto Zobel de Ayala (Chairman and Chief Executive Officer, Ayala Corporation) are working hand in hand with the government to increase laboratory testing and medical support through harnessing the resources and expertise of the private sector.”

Veronica finds the greatest inspiration from the smallest of enterprises, “MSMEs are the backbone of our country. Their tenacity to not be defined or defeated by the pandemic is heartwarming.”

The smallest businesses are bound to fail the

fastest when a pandemic strikes. SMEs are the foundation of the Asia-Pacific and their disruption transcends from individual livelihoods to entire economies. It is estimated that **1.3 billion people or two-thirds of the workforce in the region** will be hit the hardest by the economic shock of the COVID-19 pandemic.

SMEs are limited in their capacity to survive a disaster- they have limited human resources and financial support. Providing specific and targeted support is essential for them to maintain operations and recover. Small enterprises must also generate short term profit while facing constraints that include high costs, inaccessibility to insurance or appropriate financial products, and lack of access to expertise.

Asian Disaster Preparedness Centre (ADPC) with support from Bill and Melinda Gates Foundation (BMGF) is implementing the program 'Strengthening Capacity of Government, Local Humanitarian Organizations and the Private Sector on Preparedness for Response in Asia' in 6 South and South-East Asian countries namely- Nepal, Pakistan, Sri Lanka, Cambodia, Philippines and Myanmar.

The program utilizes a unique network approach by creating the Asian Preparedness Partnership (APP) - a multi-stakeholder regional partnership through the program. APP strives to improve inter-organizational coordination and dialogue between Governments, Local Humanitarian Organization networks and Private Sector networks for enhancing capacities through partnerships, knowledge resources, training and networking opportunities. The program's goal is to strengthen the emergency response capacities in these countries to better prepare for, respond to, and recover from disasters.

With the creation of national partnerships in the program countries and commencement of planned activities, it would be imperative to highlight the value addition of this collaborative approach in the overall humanitarian architecture of each project country. As part of this strategy, communications and outreach can play a critical role in the dissemination of work undertaken to improve and strengthen coordination mechanisms and emergency response capacities of our key stakeholders.

The logo for the Asian Disaster Preparedness Centre (ADPC) is displayed in a large, white, lowercase, sans-serif font. The letters are bold and spaced out, set against a light pink rectangular background. The background of the entire page features a faint, repeating pattern of a globe.



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