**Pakistan’s Response to COVID-19 Pandemic and Efficacy of Quarantine and Partial Lockdown: A Review**

**INTRODUCTION**

The outbreak of coronavirus was not new to the world. It

was observed in various parts of the world in the past (1). It was

discovered in 1960. Coronavirus caused upper and lower

respiratory problems in human and was termed as severe

acute respiratory syndrome, abbreviated as SARS (2). The first

outbreak of coronavirus related infection was documented in

2002-03. That affected 29 countries of Asia, Europe, North and

South America. About eight thousand cases were identified

with 9.5% fatalities (3). Studies conducted in 2010-15 revealed

that coronavirus was found in both, animals and humans

being. Although it was lethal, but till now no vaccine is

available. Therefore, preventative strategy was/is

recommended against the outbreak of corona virus, such as

change in eating habits, monitoring and surveillances (4).

Recently, Chloroquine was also tried, but not very effective to

treat COVID-19 (5). In 2007 a detail study was conducted about

infectious viral diseases in Pakistan. It was suggested that

Pakistan is facing various problems, such as flood, earthquake,

epidemic of various viral diseases (Polio, dengue, and

hepatitis). Therefore, Pakistan governmentis required to go for

a comprehensive health policy of preventative nature (6).

Quarantine is one historical preventative measure and has

a key role in prevention of epidemic and pandemic. It is simply

isolation of suspected patient for a particular time period (7,8).

During this isolation, if a person develops symptoms of a

particular disease, s/he is transferred to hospital for further

treatment. If s/he developed no such symptoms, s/he is setfree

(9). Quarantine period is different for differ disease

 **METHOD AND APPROACH**

This was a desktop study. Most of the informations were

collected from print, electronic and social media.

**LIMITATION OF THE STUDY**

Due to partial lockdown it was not possible to locate

COVID-19 patient and contact them.

**RESULTS AND DISCUSSION**

In Pakistan first case of COVID-19 was reported on 25th of

February 2020. The number of COVID-19 reached to 1865 on

31st March with 25 deaths (12). The WHO reports revealed that

the number of new cases is toward increase. In comparison

with other countries, especially the neighbor (Iran and China),

the number of COVID-19 cases are very less (Figure 1).

First COVID-19 case was reported on 25th of February and

First death was reported on 29th March. During that period no

one believed on coronavirus. One thing is clear that in

comparison of the neighboring countries (China and Iran),

situation of Pakistan is not worst.

**ESTABLISHMENT QUARANTINE HOUSE**

Government of Pakistan has set quarantine house at

borders as well as in various cities. Simultaneously, the

government has decided to lockdown major cities for more

than one-month duration. In this way, the whole country was

put into self-quarantine as practiced by other countries, such

as china and Malawi also (13). But the government has offered

no facility to keep the citizen inside their houses. For basic

needs and daily requirements, such as food and medicines,

they were allowed to go outside of their houses. This is how;

some shops were allowed to keep open. These include

vegetables, general store, and medical stores. Some business

and shops were completely closed, such as hotels, weeding

hall, barber shops and beauty parlors.

Pilgrims from Iran was one big problem for Pakistan. In the

first week of March more than 3000 pilgrimage were receive and were kept limited to Taftand

 **LESSONS LEARNED FOR THE FUTURE**

On the basis of the above factors, poor countries, like

Pakistan are/were more vulnerable and affected negatively.

The following are few recommendations, as lessons learned for

Pakistan as well as other developing countries.

1. Must construct quarantine facilities on all exist and

entrance with the neighboring countries.

2. Pakistan should establish quarantine facilities at

provincial level in all provincial capital cities, Karachi,

Quetta, Lahore and Peshawar.

3. We must initiate, at least at university level, online

classes as future strategy to avoid break in academic

session during epidemic.

4. Each country must keep a database for all sort of labor.

In this way the government of Pakistan can reach to

poor labor on time for support

**ACKNOWLEDGEMENTS**

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Government of Pakistan for all efforts and regular and on time

information provided on their web sites. We are also thankful

for the responsible reporting of national and international

electronic and print media for on time reporting. Special

thanks goes to all health care workers and police who are on

the frontlines of the pandemic/epidemic. We hope that this

report will be helpful for the young researcher and policy

maker in future.

**CONCLUSIONS**

Due to limited resources, like other developing countries,

Pakistan was not in a position to handles such fast-growing

pandemic effectively. No one was expecting Pakistan to handle

this pandemic efficiently. The various developments revealed

that the control over COVID-19 were promising. Therefore, the

various acts of Pakistan were appreciable and got control over

the spread of VOVID-19 to a big extent.

COVID-19 is/was new to the world; it affected poor and rich

countries equally. Here is a lesson for the future that developing countries seems more vulnerable as compared to

developed world due to the following reasons.

1. Arrangement and management of quality quarantine

facility

2. Occupational safety measures for doctors and other

health workers

3. Awareness and education of common persons

4. Handling of daily wage labor and other poor segments

of a society

5. Availability of preventive measures in terms of sanitizer

and good personal hygiene

6. On time availability of first aid

7. Special transport facility for COVID-19 patients and

dead bodies.

8. Availability of on time treatment in hospital