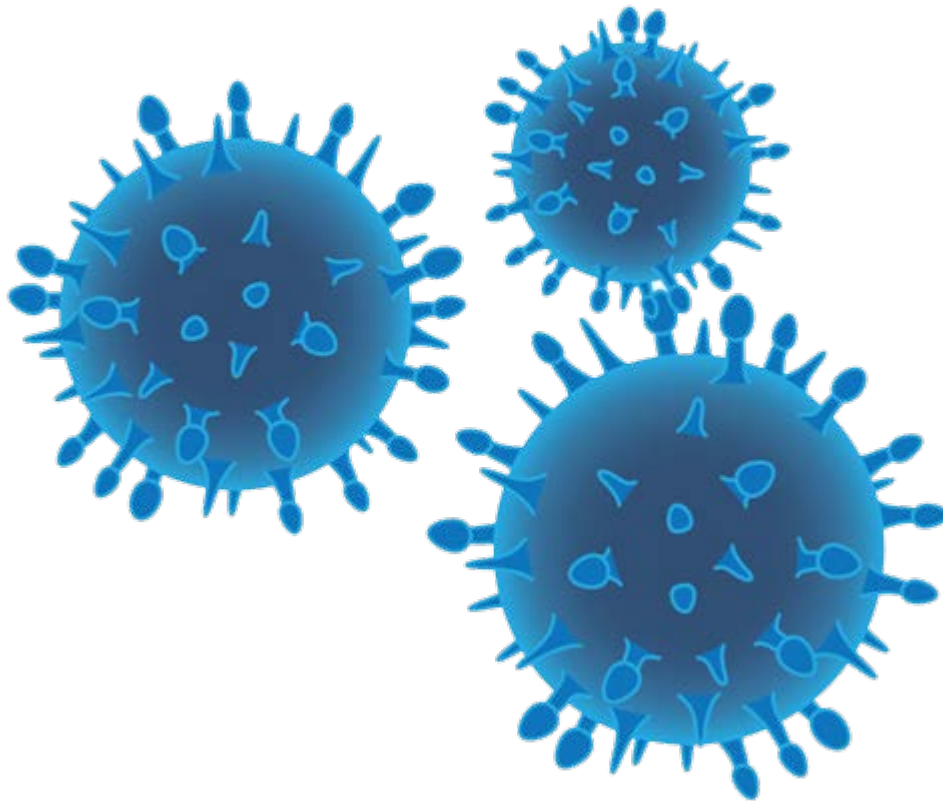


NEWSCLIPPINGS

JANUARY TO JUNE 2021

CORONAVIRUS (COVID-19)



Urban Resource Centre

A-2, 2nd floor, Westland Trade Centre, Block 7&8, C-5, Shaheed-e-Millat Road, Karachi.
Tel: 021-4559317, Fax: 021-4387692, Email: urc@cyber.net.pk, Website: www.urckarachi.org
Facebook: www.facebook.com/URCKHI Twitter: <https://twitter.com/urckhi>

Covid vaccine trials to be held at Karachi's Expo Centre

The Sindh government announced on Thursday that it would be setting up a vaccination facility at the Expo Centre in Karachi, selecting it as one of the sites where the clinical trial of a coronavirus vaccine developed by Chinese CanSinoBio would be carried out.

Phase-III of the trial was initiated in Pakistan on October 13, 2020, after the Ministry of National Health Services Regulation and Coordination received formal approval from the Drug Regulatory Authority of Pakistan (DRAP).

As the provincial government decided to set up a vaccination facility for the trial at the Expo Centre, Sindh Health Minister Azra Fazl Pechhuho visited the site and reviewed arrangement being made in that regard.

She assured that facilities for cold chain storage and other necessary requirements would soon be made available at the centre, adding that vaccines would be administered in phases there.

Besides, she issued instructions for compiling the data of frontline health workers who would be deployed at the facility.

Confirming these details, the health department spokesperson said that vaccines were expected to arrive in Pakistan within the first three months of 2021, before which the Sindh government intended to finalise a strategy for conducting trial in the province.

Meanwhile, Sindh health secretary volunteered himself for the trial underway at The Indus Hospital (IHS) in Karachi. Currently, the trial is being conducted at the IHS and Aga Khan University Hospital in the city.

According to Dr Naseem Salahuddin, the head of infectious diseases department at IHS, only persons above the age of 18 are being vaccinated as part of the trial, after medical examinations.

"This is because care needs to be taken that any person being vaccinated is healthy and has not contracted the coronavirus in the past," Dr Salahuddin explained.

She said the trial would continue at the hospital for at least another eight to 10 days, adding that over 50 volunteers had been visiting the healthcare facility daily to get vaccinated during phase-III of the trial.

According to her, almost 15,000 people have been vaccinated so far during the ongoing trial, with 3,000 of them having been inoculated at the IHS.

She maintained that the vaccine had proved to be completely safe, further stating that teams at the hospital would stay in touch with persons administered the vaccine until conclusive findings were made regarding its results.

Who can be vaccinated?

According to the staff at the IHS, healthy person older than 18 years and not having any illness, especially cancer, are eligible for vaccination. They should be admitted to a hospital during three months preceding vaccination and pregnant women, too, cannot be vaccinated, they said, adding that the volunteers shouldn't have a mental illness or be addicted to drugs.

Those administered any vaccine during two weeks preceding the trial of have had a blood transfusion during three months preceding the trial are also not eligible for vaccination.

Besides, volunteers must not be allergic to the vaccine and following the vaccination, should not be inoculated by any other vaccine, even if for Covid-19.

(By Newspaper's Staff Reporter The Express Tribune, 04, 01/01/2021)

Covid-19 vaccine is no substitute for precautions, says Dr Zafar Mirza

The coronavirus pandemic, standard operating procedures (SOPs) and precautions to prevent its spread and the Covid-19 vaccine were at the fore of the media talk by former adviser to the prime minister on health Dr Zafar Mirza here on Thursday.

"These days, any talk about health turns to talk about Covid-19. We have been quite lucky here in Pakistan to not have experienced the kind of devastation that so many other countries went through," he said at the event organised by the Pakistan Institute of Labour Education and Research at the Karachi Press Club.

"In Pakistan, we understood the dangers of the coronavirus early. The first case here emerged on Feb 26 but we had been preparing for it since January. Then came the decision of imposing lockdowns or smart lockdowns during the National Security Committee meeting on March 14. These lockdowns definitely had an impact on controlling the spread of the virus. The disease can be controlled even if 20 per cent of the people at a high risk of catching the coronavirus observe the SOPs. And we were able to do that in the first wave," he said.

Missing resolve

Coming to the second wave of the pandemic, Dr Mirza said that it was not taken as seriously as the first by the administration or the people. "That kind of resolve which we saw in the first wave is missing in the second. Despite the government's banning big gatherings, [they are] still happening all around. But we should have responded to it like we had done in the first wave.

'The new variant or strain is said to be 70 per cent more transmissible. So the disease can spread fast and would be difficult to control'

"And now that the second wave is easing a bit there is the UK Covid-19 variant. There is a scare about it now. Yes, viruses and bacteria are always evolving. We have already seen some 150 genetic changes in Covid-19. The new variant or strain is said to be 70 per cent more [transmissible]. So the disease can spread fast and would be difficult to control. So you need to take care that you don't become the reason for spreading it," he said.

Vaccine and precautions

Coming to the Covid-19 vaccine, he said that it is no substitution for precautions. "Precautions have their own importance. Yes, Pakistan is accessing the Global Alliance for Procurement of Vaccines. At least eight pharmaceutical companies are in the process of manufacturing coronavirus vaccines and the Pakistan government is talking to some companies for purchasing it. But until the Chinese vaccine is available, this would be administered to front-line health workers followed by other health workers. In the best case scenario, only 20 per cent of Pakistan's population would be receiving it by the first quarter of 2021," he said.

"In developing countries such as ours, the influential people get vaccines first. But it will not be available to the private sector soon. So even if you can buy it, you may not be able to. The government, too, should take care that it should be given to those in line of priority, and there should not be any snatching," he said.

Finally, as adviser to the World Health Organisation (WHO) on universal public health in Pakistan, he shared that the government of Pakistan is not providing health services to more than 30pc of the population. "Until we involve the private sector in healthcare, the situation would not improve," he said, adding that public-private partnership is needed for universal coverage of health.

"The National Health Card issuance is one of the steps, which is provided to the people of Khyber Pakhtunkhwa and Punjab. In Sindh this card was provided to people in Tharparkar district. Disabled and transgenders are also being provided health cards on a priority basis," he said.

He added that the WHO has established an important body called Global Council for Health Financing to look at why governments are not spending on health, especially in developing countries. He said it is now an established fact that health is a factor of productivity and it was essential to invest in human health. He also said that currently, health is not part of fundamental rights in Pakistan's Constitution. "A constitutional amendment is required to incorporate the right to health in the Constitution," he noted.
(By Shazia Hasan Dawn, 13, 01/01/2021)

Two more test positive for UK Covid-19 variant in Sindh

Two more cases of the UK Covid-19 variant were detected on Thursday, raising the total number of patients carrying the potentially more contagious form of coronavirus to five in Sindh, health department sources told *Dawn*, citing preliminary laboratory results.

"Both men in their 20s are UK returnees and residents of Karachi. They are stable with no symptoms of the disease and under home isolation," an official of the health department said.

So far, five UK returnees, including three women, had been detected with the new Covid-19 variant out of the 12 testing positive for coronavirus, he added.

Further tests of the patients carrying the UK Covid-19 variant are being done at the Aga Khan University Hospital while their houses are placed under police surveillance.

It may be recalled that the first case of the new variant of coronavirus (B.1.1.7) can be traced back to late September in the south of England. Since then, it has spread to over 50 countries.

According to experts, a certain strain of virus is considered a variant when it has enough mutations to change a minor portion of its genetic code. The most recent variant found in the UK, known as B.1.1.7, meets that benchmark.

All currently known variants of Covid-19, they say, belong to the Sars-CoV-2 strain and have not mutated enough to be classified as their own strain.

Some UK researchers believe that this variant is up to 70 per cent more transmissible because it has 22 coding changes to the virus genome.

However, there is no evidence to suggest that the variant is any deadlier than previously known strains of the coronavirus, or that it makes people any sicker or is resistant to the vaccines that have been developed.

(By Newspaper's Staff Reporter Dawn, 13, 01/01/2021)

'UK variant is 56pc more transmissible than previous variants'

A webinar bringing together a panel of experts on Saturday, shed light on the myths, misconceptions and effectiveness of vaccines against mutations of the coronavirus. Titled 'SARS CoV 2-VOC (UK variant) 202012/01: will vaccines still work?', the webinar also looked at the emerging data, which shows that the UK variant is 56 per cent more transmissible than previous variants.

Providing an overview of the virus structure, the UK mutations and genotype in Pakistan, Prof Zahra Hassan, section head of Molecular Pathology, Department of Pathology and Laboratory Medicine, Aga Khan University, said that all viruses have an envelope that encases the virus's nucleic acid. "This envelope is made of E protein, Membrane protein, Spike protein, and this word 'spike' has become very important in the context of SARS CoV because the SARS CoV spike protein is thought to help it bind to the cell that it enters. And the concerns about generating changes at the level of the genome can be related to any of these proteins. So in terms of perspective of the virus, there are both structural and nonstructural proteins. The structural proteins that the envelope is made of is where changes can occur.

Experts shed light on myths, efficacy of vaccines against mutations of coronavirus

"So the first important change that people noticed in the spike protein was related to a change in a mutation which was at the 614 residue. That was observed very soon after SARS CoV was identified. Essentially, there is a whole field of pathogen epidemiology or genomic epidemiology that is related to trying to understand how the virus changes," she explained.

"From January 2020 till now, we have got a lot of information about genomes of SARS CoV strains that have been identified across the globe and it's the first time that so much data has been shared. There are tens of thousands of sequences available globally.

The virus does change as all viruses do and essentially these virus changes have been linked to the development of different lineages of families across the globe and the main families are the A and B and the diversification of the B lineages have been found to be the most common," she said.

"What we have seen in Pakistan. At the Aga Khan University, we have had the opportunity to look at some virus strains from the beginning of the pandemic in March. And, of course, we had had a look at a subset of strains. The predominant strains globally are related to the G lineage. And in Pakistan, too, we have mostly seen the G lineage and the GH lineage. But what came out of Wuhan was the S lineage which split from S to L and which went from L to V to G.

"In terms of diagnostics, does the variety in the lineages make a difference? No, because the diagnostics for SARS CoV have been designed to be fairly robust. And tests based on identification of genetic changes are for more than one gene," she said.

"We have mapped a number of stains to get a perspective of relatedness in terms of global strains. We have found a variety of countries that are matching with such as in the West, the UAE, Iran, Iraq, etc. And it is not surprising because these are coming from people who have been travelling, while some strains are local strains. So as expected, there is a lot of commonality within the strains and we will learn more as we go along and are able to get more data on Pakistani strains," she said.

"The new variant and its impact, well, about 23 mutations have been identified to occur in this variant. One has a change in the spike protein, the envelope mentioned earlier, which is what probably leads to increased transmission. From a genomics perspective, the variations in strains occur in different regions too. So you need to think about what immunity means to the host, bacterial, fungal and viral pathogens are dealt with by different cells, including first line defender cells. There are also adaptive slow responses. Specific responses generated by exposure to the virus or by immunity developed through a vaccine should be driven by cell responses, and all will develop antibodies," she said.

The variety in diversity of the SARS CoV virus occurs in different components of the genome. And because the immune responses are also to the different components of it, therefore having some changes on only one part of the protein like the spike protein may change the biology of the virus to perhaps make it more transmissible but it should not take away from the fact that the human host should be able to have an immune response against the virus," she concluded.

Dr Adeel Ajwad Butt, professor of medicine and professor of population health sciences at Weill Cornell Medical College, Qatar, spoke about the different vaccines available and how vaccines can help build immunity. He also said that natural immunity isn't enough and getting vaccinated is important "because antibody levels in the body are not universal. Vaccination provides a high level of antibodies. Also there is little or no chance of getting Covid-19 from the vaccine because there is no dead or alive virus in the vaccine," he explained.

He also said that based on early data, it can be said that the vaccine protects one for four to six months and possibly even up to a year.

Dr Syed Faisal Mahmood, associate professor, Section of Infectious Diseases, Department of Medicine, Aga Khan University, discussed the impact of the mutations to the types of vaccines. His key message was that the vaccines are generally expected to work because they are equipped to recognise the virus effectively.

Dr Mehreen Arshad, attending physician, infectious disease, and assistant professor of paediatrics at Northwestern University School of Medicine, US, elaborated on the mutations and discussed studies indicating that children may now be hotspots and discussed studies indicating that children may now be hotspots. "It is true that children from ages 10 to 19 are at a higher risk and more likely to transmit the virus because even if you close the education institutions, there are still in the malls and cinemas that are open," she said.

Dr Daisy Ilagan-Tagarda, infectious diseases specialist, chair of the Infection Prevention Control Committee at Diliman Doctors Hospital, the Philippines, shared her experience and how their government in the Philippines is taking steps for it.

Finally, summing up the discussion, the moderator Dr Wajihah Javed, head of Public Health and Research at Getz Pharma Pvt Ltd, said that: "We cannot rely on herd immunity as the level required to reach herd immunity is too high for any population to achieve it

without vaccinations. Vaccines do take into account different mutations of the Covid-19 virus and hence are still effective against it. Vaccines are necessary as they help build antibodies in the body.

“Social distancing measures still need to be continued even after one is vaccinated as it takes time for vaccines to work and antibodies to be developed hence it is advised that all those vaccinated continue the social distancing measures and wearing masks even after the doses are administered.”

(By Newspaper’s Staff Reporter Dawn, 13, 04/01/2021)

Vaccine delivery likely to face delay, says Sindh health minister

There would be some delay in getting the Covid-19 vaccines from the federal government, earlier planned to be handed over to the Sindh government by Jan 15, the provincial health minister stated on Tuesday.

“The National Command and Operation Centre (NCOC) had earlier communicated that the vaccines would be delivered by mid-Jan. But, we have just been informed that there would be some delay in this process,” said Health Minister Dr Azra Fazal Pechuho in a statement.

Preparations, however, were in full swing to formulate a policy plan and set up a comprehensive vaccination management and information system at the divisional level, she added.

“This would be further extended to smaller centres in districts once the system becomes operational. The department is setting up adult vaccination centres at the divisional level, especially in Karachi and Hyderabad, and preparing lists of frontline healthcare providers involved in the care of Covid-19 patients, who would be the first to receive the vaccine. The general population would get the free-of-cost vaccines in the second stage, depending upon their availability.”

Vaccine was earlier to be received by Jan 15

The main features of the vaccine management plan include identification of the human resource required for running the whole system, data compilation about the vaccines’ stocks and vaccine recipients, dissemination of information to vaccine recipients and, last but not the least, proper disposal of medical waste.

“We are taking guidance from the Ministry of National Health Services, Regulation and Coordination and it’s expected that a similar system would develop across the country,” the health minister said.

She expressed the hope that by the end of this year a large population would be vaccinated against Covid-19 that would be a key success against the pandemic.

It may be recalled that the health department had earlier notified the Provincial Vaccine Administration Coordination Cell (PVACC) after getting a commitment from the National Vaccine Task Force and NCOC for supply of 250,000 doses of Covid-19 vaccine by Jan 15; each recipient would get two doses with a gap of 21 days.

The cell would be headed by secretary health Dr Kazim Hussain Jatoi while its members include MPA/parliamentary secretary Muhammad Qasim Soomro, director general health Dr Irshad Ahmed, programme director EPI Dr Akram Sultan, Dr Mazahir Ali, Raza Muhammad Shar, both section officers at the health department, Sindh IT head Faizan Gul Sheikh and provincial technical focal person at the Emergency Operation Centre (EOC) on Polio Dr Ahmed Ali Sheikh.

The department decided to set up 50 cubicles at the Expo Centre where 5,000 individuals would be vaccinated in a single day.

Facilities for vaccine administration would be provided at tertiary care hospitals in the interior areas of Sindh.

(By Faiza Ilyas Dawn, 13, 06/01/2021)

Cabinet approves law to get succession certificate from Nadra

In view of the lengthy process of obtaining the letter of administration and succession certificates from courts, the Sindh government on Wednesday decided to enact Letters of Administration and Succession Certificate Bill-2020 so that it could be obtained directly from the National Database and Registration Authority (Nadra).

The decision was taken in the Sindh cabinet meeting held under the chairmanship of Chief Minister Syed Murad Ali Shah here at CM House. The meeting was attended by all the provincial ministers, law adviser, chief secretary and planning and development board chairman.

Law Adviser Murtaza Wahab while briefing the cabinet said currently letters of administration and succession certificates were being issued under Succession Act 1925 by the component courts having jurisdiction. As obtaining the administration and succession certificates from the court was a lengthy process, a law should be enacted to make it efficacious and speedy to curtail fraud and forgery as has been done by the federal government, the CM’s aide said.

IBA-selected headmasters to continue till appointments through SPSC

The cabinet approved the proposed draft law and referred it to the Sindh Assembly. Under the proposed law, the heirs of a deceased person will be able to apply for succession directly in Nadra for obtaining succession certificate.

Headmasters

The school education department told the cabinet that as many as 2,000 headmasters/headmistresses had been appointed on a contract basis through IBA Sukkur in 2015 and their contract was about to expire.

Education Minister Saeed Ghani told the cabinet that the court had directed his department to appoint headmasters through Sindh Public Service Commission (SPSC). The appointment through the commission would take some time, therefore the services of contract headmasters be continued till the appointment [of headmasters] through SPSC. The cabinet, after thorough discussions and deliberation, approved the request of the department and simultaneously directed the chief secretary to request the SPSC to expedite selection procedure.

Irrigation lands

The cabinet was told that the encroachments along the irrigation channels, lands and colonies had been identified.

Irrigation Minister Sohail Anwar Siyal told the cabinet that in the first phase, encroachments were being removed from the operational areas [the areas which create hindrances in the smooth flow of the irrigation water]. He proposed that encroachments also be removed from the irrigation lands where commercial activities had been started.

The cabinet approved the proposal and directed the irrigation department to expedite the work of removal of encroachments.

Allotment of vehicles

While taking up the requests of different departments for purchase of vehicles, the cabinet approved the suggestion that instead of purchasing new vehicles, the abandoned vehicles may be repaired and allotted to the entitled government employees.

Provincial ministers Shabbir Bijarani and Mukesh Chawla told the cabinet that due to minor mechanical faults, a large number of vehicles, particularly of 800CC and 1,000CC, had been left abandoned. They said the abandoned vehicles could be made operational with minor repairs. They proposed that instead of purchasing new vehicles, the abandoned vehicles be repaired and allotted to the entitled officials.

The cabinet approved the proposal and constituted Mr Bijarani-led committee, which would also comprise Mr Chawla and Mr Ghani, to prepare a policy for allotment of government vehicles to the entitled employees. The committee was also directed to prepare auction policy of abandoned vehicles and present the proposals within 15 days. The secretary for generation administration would act as secretary of the committee.

Low-cost housing

The provincial cabinet also constituted a committee to identify land for low- and medium-cost housing in katchi abadis in Karachi so that low-cost housing projects could be initiated there.

Minister for Local Government Syed Nasir Shah would head the committee that would also comprise ministers Bijarani and Chawla as its members.

(By Newspaper's Staff Reporter Dawn, 14, 07/01/2021)

Health dept traces five UK-returnees with new Covid-19 variant

Amid growing number of coronavirus cases and challenges linked with the pandemic, the Sindh health authorities find a reason to feel the sense of achievement to some extent after they managed to trace out all the five patients who were recently tested positive for the new Covid-19 variant following their return from the United Kingdom.

The authorities found no traces of the more contagious virus among their contacts and community members, officials and sources said on Sunday.

They said they had started a speedy contact-tracing exercise soon after cases of the new Covid-19 variant — first detected in the UK — were reported in the province in the last week of December 2020. Initially three such cases were reported on December 29 and after a couple of days two more people were found with the same infection raising the total number of patients carrying this version to five in Sindh.

All three patients were female and aged between 19 and 37, they said.

Hectic and swift action helped find their contacts

"The contacts of the patients were identified and the same exercise was also carried out in their community," said a source privy to the details of the development. "One after another contact was tested and cleared. It was a lengthy and time-consuming exercise but was also crucial. None of the patients' contacts and community members was found infected with that variant."

After detection of the first three cases on December 29, the health department confirmed them and only two days later, two more patients were reported. In its first detection, the Sindh health department had said that 12 samples of UK returnees were taken for genotyping out of which six emerged positive and three showed the new variant of coronavirus in the first phase.

"The genotyping showed 95 per cent match of the new variant from the UK. These samples will go through another phase of genotyping." In the meantime, the contact-tracing of these patients was started and their contacts were also isolated.

"Then after two days, two more cases emerged. The two young men, both in their 20s, were UK returnees and residents of Karachi.

However, all the five patients remained stable and stayed at home in isolation," said a health department official. "Quick response was shown from the health department and the contact-tracing of these patients was put in process and their contacts were also immediately isolated."

The first case of the new variant of coronavirus can be traced back to late September in the south of England, indicating that there was ample time for it to spread undetected across the UK and into other countries. The official said that the health department was engaged in rigorous monitoring at the airport since December 15 onward and information about the travellers of UK origin was being communicated by the National Command Operation Centre in Islamabad. Experts say that a certain strain of virus is considered to be a variant when it has enough mutations to change a minor portion of its genetic code. The most recent variant found in the UK, known as B.1.1.7, meets that benchmark. All currently known variants of Covid-19, they believe, belong to the Sars-CoV-2 strain and have not mutated enough to be classified as their own strain.

(By Imran Ayub Dawn, 13, 11/01/2021)

Drive against polio begins as Covid cases cross 500,000 mark

As countrywide Covid-19 cases surpassed the 500,000 mark and the number of deaths reached 10,644 on Sunday, Pakistan will start the current year's first polio campaign under strict precautionary measures and protocols on Monday (today).

According to data of the National Command and Operation Centre (NCOC), 2,899 cases and 46 deaths from Covid-19 were reported in a single day. With the latest figure, the total number of infected people in the country has surged to 502,416 with 456,969 having recovered.

The data about federating units showed that the highest number of cases was reported from Sindh which was 225,509. Though Punjab's population is around 50 per cent of the total population of the country, 144,909 people have contracted the virus in the province.

Khyber Pakhtunkhwa has recorded 61,148 cases while Islamabad, which is a city with only two million people, has reported 39,120 patients.

The data further revealed that 18,373 people were infected in Balochistan, 8,478 in Azad Kashmir and 4,879 in Gilgit-Baltistan. The total number of active cases in the country stood at 34,803 as of Sunday.

Out of the total number of ventilators allocated for Covid-19 patients, Multan had the highest percentage of occupancy at 51pc, followed by Bahawalpur at 41pc, Lahore at 34pc and Islamabad at 33pc.

According to data on oxygenated beds, Peshawar was on top with 49pc of beds in use, 35pc in Karachi, 34pc in Multan and 31pc occupied in Islamabad.

Nationwide polio drive

A five-day national polio immunisation drive will start from Monday during which over 40 million children under the age of five will be vaccinated across the country.

A supplementary dose of Vitamin A drops will also be administered to the children aged six to 59 months. This will help build general immunity among susceptible children to protect them from polio and other diseases.

According to data issued by the National Emergency Operations Centre (NEOC) for Polio, around 285,000 polio frontline workers will visit parents and caregivers at their doorsteps, adhering to strict Covid-19 precautionary measures and protocols while vaccinating children. These measures will include wearing a mask, using hand sanitisers and maintaining a safe distance during vaccination.

"Our aim is to ensure timely and repeated vaccination of children. This is key to reducing immunity gap and protecting children against polio and other diseases. The government is committed to reaching the goal of a polio-free Pakistan which requires full support of the nation, especially from communities and the parents and caregivers of children under the age of five years," said Special Assistant to the Prime Minister on National Health Services Dr Faisal Sultan.

"The year 2021 presents a unique opportunity to leverage the gains made in 2020. The programme implemented six high-quality campaigns in 2020 with the support of various stakeholders and the dedication of our heroes — the frontline workers — who defied the devastating impact of the Covid-19 pandemic and safely implemented high-quality campaigns," he added.

Director General of Health and NEOC Coordinator Dr Rana Mohammad Safdar said that in 2021 the country was looking forward to sustaining the gains achieved in 2020.

"Alongside our plans to conduct quality polio campaigns, we are continuing our efforts to enhance essential immunisation coverage across Pakistan. Repeated campaigns are imperative to give a quick immunity boost to children under the age of five," he said.

"With our highly committed frontline workers and the cooperation of parents and caregivers, the programme aims to restrict the geographic scope of poliovirus circulation to the high-risk areas only and get closer to the goal of eradication in 2021," Dr Rana added.

According to a statement, the programme will continue to sustain high levels of leadership support across the political and society segments and will further strengthen programme implementation structures, engage better with priority communities, reinforce essential immunisation, deliver integrated services to under-served communities and maintain its coordination with Afghanistan counterparts for synergy in planned campaigns in 2021 with the aim to interrupt the spread of poliovirus across the shared epidemiological block between both countries.

It is pertinent to mention that the polio programme is working in partnership with various segments of society and organisations, including communities, local influencers, pediatric and medical associations, media, social activists, religious leaders, sports associations and the Pakistan Cricket Board. They are all supportive of vaccination and the goal of reaching a polio-free Pakistan.

Pakistan is one of the two polio-endemic countries in the world along with its neighbour, Afghanistan.
(By Ikran Junaidi Dawn, 01, 11/01/2021)

Mass testing

IN the past week, Pakistan crossed the half-million mark for Covid-19 cases in the country. After a spike in deaths and heightened positivity ratios over several weeks, we are now seeing a slowdown. Still, daily Covid-19-related deaths are clocking in between 30 and 50, with new infections between 1,500 and 3,000. Although we have statistically fared better than many Western countries and even some regional states, our data has been historically weak due to low testing. This unfortunate half-a-million milestone in the pandemic, coupled with a death toll of over 10,000, could have been much lower.

From the start of the pandemic, Pakistan's daily total testing has been very low. In the early days, the government had vowed to reach the target of 100,000 daily tests, but failed to live up to its pledge. At its highest, daily countrywide testing has been around 50,000, that too for a few days. In the past week, daily testing has been 35,000-45,000 — a sorry figure considering the sheer size of our population. At 32 tests per 1,000, Pakistan's per capita testing is lower than Iran and India that clock in at 95 and 129 respectively. The entire point of increased testing is to test everyone, even those who may be unaware that they are infected, so that they can isolate themselves and prevent the virus from spreading to others in their community. With low testing, we have entered a data fog, which essentially means that decisions are being made on the basis of weak information. In the past, officials have claimed people are reluctant to get tested and that the demand is low, a scenario which points to a failure in public messaging on Covid-19. As the government prepares to reopen schools and universities, it must ramp up testing. A mass testing strategy is more critical now than before, as it will accurately identify which areas are Covid-19 hotspots. Based on this information, the authorities can make data-led decisions regarding the enforcement of targeted lockdowns in specific schools or localities. The current testing is far too low, given the unrestricted public activity and mass gatherings in the country. The government must make tests available and accessible, if it wants to limit the loss to lives and livelihoods. No doubt, there are countries which have had far worse trajectories, but we must strive to be like those who have performed at least reasonably well and not compare ourselves to the worst.

(By Editorial Dawn, 06, 12/01/2021)

'Waste water surveillance can predict Covid-19 cases in Karachi'

The city currently generates an estimated 472 million gallons daily of waste water (sewage). The quantity of waste water treated is 50mgd and about 422mgd remains untreated.

Most people infected with Covid-19 will shed the virus, or pieces of the virus like RNA, in their stool. The virus can be shed in stool whether or not the person experiences symptoms. These pieces of genetic material can be detected in stool using molecular biology techniques.

While the detection of the virus material in waste water cannot identify specific individuals who are shedding the virus, it can identify that the virus is present in the community. The data are used to help understand the potential for community transmission among other uses, but is not a replacement for clinical surveillance.

This field of work is often referred to as environmental/waste-water surveillance or waste water-based epidemiology. Currently 45 countries and 182 universities, worldwide have programmes for waste-water surveillance.

KWSB needs to select sampling points throughout the sewerage system

Waste-water analysis

The testing methods vary by laboratory (and country), but briefly involve collection of representative waste-water samples, concentration of the sample (by filtration or centrifugation), nucleic acid extraction, and finally a PCR-based detection method. There is no surrogate test for SARS-CoV-2 detection in waste water.

It is customary in waste-water engineering to report the finding of the analysis performed as number per millilitre (ml), as number of virus particles per ml. The greater the number, greater is the prevalence of virus in the community, and increase in clinical cases. If there is a decrease in clinical cases, waste-water data will show low virus particles per ml. Some countries found direct relationship of increase in viral particles per ml with increased hospital admissions. Most countries have developed appropriate models, which allow them to report findings as number per 100,000 inhabitants.

Karachi's climate

Karachi's climate is more or less temperate. In temperate climates, it is hypothesised that SARS-CoV-2 transmission may increase during winter months, similar to patterns observed for the flu virus. Further, the virus is likely to be more stable and persist for longer periods at lower temperatures, which may also affect how long infectious virus survives in waste-water streams. Longer persistence during colder winter months may have little impact on waste-water surveillance.

Faecal shedding is highly variable from person to person and the patterns of shedding are not well characterized. Temperature may affect the number of people shedding SARS-CoV-2 and, therefore impact the amount of SARS-CoV-2 entering the waste-water stream.

Monitoring waste water for the presence of the genetic marker of SARS-CoV-2, its RNA, may be useful as a sensitive early indicator of low levels of infections in the community. Having an early warning system to alert public health officials about infection, or the lack of infection, could be helpful.

Waste-water monitoring for SARS-CoV-2 RNA has been shown effective to predict outbreaks of Covid-19. The virus recovered in waste water can sample whole city populations with results achievable in a reasonable time.

Presence of virus in waste water indicates that the virus is being shed by individuals in the community contributing to that waste-water system. Knowing the virus is present in waste water can be an important indicator when monitoring higher-risk communities. However, not detecting viral RNA in waste water can never be used to rule out the presence of infections in a community.

Furthermore, SARS-CoV-2 RNA concentrations in waste water cannot currently be used to determine the total number of infected persons in a community or the percent of the population that is infected.

Most countries have efficient sewerage systems and robust waste-water treatment plants. Those treatment plants, typically, have greater than 95 per cent treatment efficiencies. All the waste water that is generated goes to treatment plants for appropriate treatment. This makes their programme for waste water easy and straightforward. All they have to do is to take samples of waste-water treatment plants' influent and effluent, and analyse those samples for viral particles.

Can KWSB perform waste-water monitoring?

This is not the case in Karachi. Out of 472mgd, only 50mgd is poorly treated. The waste water that goes to the Arabian Sea via Lyari and Malir Rivers is of the order of 422mgd.

The Karachi Water and Sewerage Board (KWSB) presently has three waste-water treatments plants, located at SITE, Mauripur and Mehmoodabad. It had a fourth treatment plant in North Karachi. Designed and constructed by this writer in 1982, the plant, technically called aerated lagoons, and based on the extended-aeration system, had the maximum hydraulic treatment capacity of five mgd (22,730 cubic meters/day). The plant achieved over 90pc treatment efficiency.

The KWSB needs to select sampling points throughout the sewerage system, ensuring that all areas — upstream, downstream, and in between — are covered.

For example, the Lyari River catchment areas start from Scheme 33 and North Karachi, and cover Gulshan-i-Iqbal, Nazimabad, Gulberg Town, and SITE. A sampling programme should be designed such that all these townships are covered. It will also serve the purpose of reporting cases in each township. This would be helpful for discussions and for presentations at appropriate forums.

There are two types of samples: grab samples consist of either a single discrete sample, or individual samples collected over a period of time not to exceed 15 minutes.

Composite samples are collected over time, either by continuous sampling or by mixing discrete samples. A composite sample represents the average waste-water characteristics during the compositing period. Various methods for compositing are available and are based on either time or flow proportioning.

In order to generate representative samples, the KWSB should go for composite samples. KWSB labs, especially the one at COD water treatment plant, may not have the analytical capability, in terms of equipment and trained staff. Large hospitals, on the other hand, do have these resources. Additionally, these hospitals may provide specific hotspots for waste-water sampling.
(By F.H Mughal Dawn, 13, 20/01/2021)

Doctor dies of Covid

Senior doctor and renowned academician Dr Muhammad Saleh Soomro died of Covid-19 on Tuesday, his colleagues and friends said.

They said that Dr Soomro was admitted to high dependency unit (HDU) of Expo Centre Isolation Centre after testing positive a few days ago but later he was moved to ventilator after his health condition deteriorated.

Dr Soomro, they said, was currently associated with Baqai Medical University as professor and chairman of its department of physiology.
(By Newspaper's Staff Reporter Dawn, 13, 20/01/2021)

Covid-19 vaccination

While Pakistan has yet to start a Covid vaccination drive, signs are emerging that it's going to happen pretty soon. After China's announcement of 'gifting' 500,000 doses of a vaccine to Pakistan by the end of January, another good news on free-of-cost availability of a vaccine has come from the World Health Organization. In a statement last Sunday, the world body has announced signing of an agreement for Pfizer-BioNTech vaccine and another arrangement for AstraZeneca/Oxford University vaccine for procurement of two billion doses by the end of the current year. And 150 million of these doses will be made available in the first quarter of the ongoing month.

The agreements have come under the WHO-led Covax programme — a global initiative to ensure rapid and equitable access to Covid-19 vaccines for all countries regardless of income level. Covax is an alliance that had been set up in April last year by the Global Alliance for Vaccines and Immunisation, Coalition for Epidemic Preparedness Innovations and WHO. It has pledged free vaccine for 20% of Pakistan's population.

Of the two billion doses to be procured under the Covax programme, 1.3 billion will be provided to 92 lower-income economies, including Pakistan, says the UN's health agency. Therefore, chances of Pakistan getting the free doses in the first quarter of the current year seem to have brightened. And this is why the Ministry of National Health Services has termed it a positive development and expressed the hope that vaccination against the coronavirus will start soon.

A cash-strapped Pakistani government has earmarked a meager amount of \$150 million for Covid vaccination campaign, with the amount just enough for 0.2% population. The country is thus heavily relying on free procurement of a vaccine in pursuit of vaccinating at least 70 million people to achieve 'herd immunity'. The government has also rightly allowed import of vaccine by the private sector so as to cut the burden of the affording class. A mix of this all could take us to the pre-Covid normal.

(By Editorial The Express Tribune, 14, 26/01/2021)

Vaccination drive

WITH 500,000 doses of Sinopharm scheduled to arrive soon from China, the moment that Pakistan has been waiting for in its fight against the coronavirus pandemic is here. Now begins the daunting task of administering the vaccine to a vast number of people. The National Command and Operation Centre has unveiled an eight-step process for registration and vaccination. An online portal has been created for people to register themselves, and vaccination centres are being set up across the country, with coordination cells at the provincial and district levels. The government has also secured 17m doses of the Astra Zeneca vaccine through Covax, WHO's vaccine support platform, out of which nearly 7m will be available within the first quarter. As with its prompt response when the pandemic initially made its presence felt in the country, Sindh appears to have hit the ground running. On Friday, it presented a detailed phase-wise plan to inoculate its population, starting with 170,000 front-line health workers. Aside from its share of the Sinopharm vaccine it is to receive from the centre, the Sindh government is also planning to procure vaccines on its own, provided it receives permission from the federal authorities to do so.

The real test of the strategy will of course come when the inoculation drive actually gets underway, which should be very soon. One foreseeable hurdle is that online registration will not be practical for many segments of the population, and will surely need to be supplemented by a door-to-door effort. In a country prone to conspiracy theories, where power and privilege go hand in hand, it is vital that the process be completely transparent so it does not become mired in controversy. Far too much hinges on a successful rollout of the inoculation drive. On Friday in the upper house, some senators expressed fears that 'elite groups' such as politicians, generals and judges would be vaccinated first. The minister for parliamentary affairs assured them that priority will be given to high-risk individuals, which include front-line health professionals, the elderly and teachers. The NCOC must continue to provide regular updates on the inoculation drive as well as disaggregated data of the vaccine recipients to instil confidence among the people. An awareness campaign also needs to be rolled out to counter misinformation and reassure a public where too many are prone to suspicions about the side effects of vaccination.

(By Editorial Dawn, 06, 31/01/2021)

15 Covid-19 vaccination centres set up across Sindh

With the Sindh government set to begin vaccination for Covid-19 on Wednesday, preparatory measures for the purpose are near completion in Karachi and rest of the province. A total of 15 vaccination centres have been set up across Sindh, with 10 of them established in the metropolis.

A team of the National Command and Operation Centre, accompanied by Sindh Health Services DG Irshad Memon, EPI Project Director Dr Akram Sultan and the provincial health department officials visited the centre at Khaliq Dina Hall in Karachi on Monday and finalised arrangements.

First in line

The government will be inoculating frontline health workers - doctors, paramedics and laboratory technicians directly dealing with Covid-19 patients and samples of infected persons, as well as teams conducting door-to-door tests - serving at government hospitals in the initial phase of vaccination, here in Sindh. And even among them, those in Karachi and Hyderabad, Shaheed Benazirabad and Jamshoro are to be given priority.

According to Dr Memon, 170,000 health workers have been registered so far and 1,000 doctors and nurses have been trained for the inoculation. With the arrival of the first consignment of the vaccination, 80,000 healthcare workers will be vaccinated and the number will increase as more doses arrive. The second consignment is expected to reach in February as well, he added.

Dr Memon further added that people above 60-years-old will be vaccinated in the second phase while the individuals suffering from different diseases and those below 60 years of age will be vaccinated in the third phase. People below the age of 18 years and pregnant women would be exempted from the vaccination process, he added.

Vaccination centres

Karachi's seven districts - East, West, Central, South, Malir, Korangi and Keamari - are among the 10 where the vaccine will be administered to frontline health workers in the first phase. Apart from the Khaliq Dina Hall, centres have been set up at Jinnah Postgraduate Medical Centre, Sindh Government Hospital in Korangi No5, Dow International Dental College Hospital, Aga Khan University Hospital, the Sindh Government Hospital in New Karachi, Sindh Government's Children's Hospital at Nagan Chowrangi, the Sindh Government Qatar Hospital in Orangi Town, the Sindh Government Hospital in Liaquatabad and the BHQ in Malir district. As for elsewhere in the province, the centres have been established at the new district health quarter building in Badin, Chandka Medical College in Larkana, old IHS in Sukkur, and old IHS in Shaheed Benazirabad.

According to Karachi health director Dr Nadeem Sheikh, each vaccination centre would have 10 cubicles, with 12 to 15 vaccinators deployed in each, administering the doses to 10 persons simultaneously at a time.

He told The Express Tribune that 4,200 vaccinators, who are employees of the health department, would administer vaccines in the province, and 1,100 of them will be deputed in the metropolis.

Besides vaccinators, doctors and other paramedical staff too will be deployed at these centres so that immediate medical assistance could be provided if any person starts having a reaction after being administered a dose.

Briefing the NCOC team on Monday, Services Medical Hospital Superintendent Dr Farhat said that at Khaliq Dina Hall a total of 15 cubicles have been set up and 15 health workers can be inoculated at a time.

Vaccine administration

The NCOC, together with the National Database and Registration Authority (NADRA), has prepared a list of frontline workers who are to be inoculated in the first phase and the list has been sent to the Sindh health department.

According to Dr Farhat, the vaccination process stipulates verification from National Database and Registration Authority (NADRA) and the healthcare workers would have to show the One Time Password received from NADRA to be vaccinated. He added that this will be followed by the next step in which the healthcare workers will have to complete a questionnaire, comprising 15 questions.

The vaccine will finally be administered to the healthcare workers after checking their blood pressure, heart rate and body temperature. Dr Farhat said that the vaccination will be carried out from 8am to 8pm. An emergency room has also been set up at the center in case anyone gets a reaction after being vaccinated, he added.

Procurement and storage

The Sindh government has, reportedly, contacted three pharmaceutical companies to purchase jabs on its own but has been awaiting the Centre's permission to do so.

In a statement issued on Wednesday, Sindh Health Minister Dr Azra Fazal Pechuho said that the vaccine imported from China's Sinopharm - that is to be administered beginning tomorrow - is 90 per cent effective against the coronavirus. The districts where the number of positive cases is higher will be prioritised and number of vaccination centres will increase by the time the inoculation process reaches its final stage, she added.

Meanwhile, Dr Sultan stated at Khaliq Dina Hall that the vaccine will be brought in a cold chain vehicle and be stored at a controlled temperature. Dr Farhat too assured that cold chain arrangements have been made and generators have been installed to ensure uninterrupted power supply.

(By Rija Fatima & Tufail Ahmed The Express Tribune, 04, 02/02/2021)

Altaf contracts Covid-19, recovering in ICU

Muttahida Qaumi Movement founder Altaf Hussain has contracted Covid-19 and is currently admitted to the intensive care unit (ICU) of a London hospital where he is "fast recovering", his party said on Monday.

The news of Mr Hussain's ailment came to light after his brief audio message started circulating on social media on Monday. The audio message was first aired by a YouTube channel, Meri Awaz Suno, in its live-streamed programme in the night between Sunday and Monday in which London-based MQM convener Tariq Javed, senior leader Mustafa Azizabadi and many others participated.

In a frail voice, Mr Hussain, who has been living in the United Kingdom for the past around three decades, said in the audio message he had been admitted to the ICU of a hospital for the past 20 days. "It is because of your prayers that I am able to record this message. May God save all of us from this disease, Covid-19! All of us should take precautions and help each other."

He mentioned that he recorded the audio message on Jan 30 and said he would talk to his followers soon again after complete recovery.

"Altaf bhai's health is not good, but it doesn't mean the rumours being spread by our enemies are true," MQM convener Tariq Javed told the web programme. "Altaf bhai is recovering fast because of the prayers of his supporters and followers."

Mr Azizabadi said that “millions” of people from all over the world were praying for the recovery of the MQM supremo. “His health is improving and God willing he will soon talk to his people through video,” he said.

On Jan 23, the official Twitter handle of the MQM [London] had tweeted that Mr Hussain got ill and “after check-up, doctor advised him to rest and suspend his political activities”.

Mr Hussain and his party, now known as MQM-London, have been facing an undeclared ban after his Aug 22, 2016 incendiary speech. His party leaders in Pakistan had distanced themselves from him and rebranded the party as MQM-Pakistan. (By Azfar-ul-Ashfaq Dawn, 13, 02/02/2021)

Covid-19 vaccination campaign launched in Karachi

While expressing gratitude on the provision of Covid-19 vaccine doses to Sindh, Chief Minister Syed Murad Ali Shah regretted a lack of timely information on the vaccine’s supply and said the federal government needed to provide a proper timetable to the provincial government on the vaccine’s availability.

“There was confusing information; they [the federal government] earlier said it’s getting the Pfizer vaccine. We weren’t told when and how many doses would be given to us,” he said, adding that health officials had held talks with Chinese officials and pharmaceutical companies and would try to procure the vaccine directly. He thanked the Chinese government for donating vaccine doses to Pakistan.

“China helped Pakistan when no one else did. It has donated 500,000 Covid-19 doses out of which Sindh has received 83,000 doses. For this, I am grateful to Pakistan’s government,” he said.

Around 78,000 front-line health workers will be covered with the available vaccine doses

He also appreciated services of healthcare providers, especially those managing and treating Covid-19 patients and shared that there were 320,000 healthcare workers in Sindh. Of them, 180,000 constituted the front-line staff.

The vaccine campaign in Sindh would be transparent and whoever received the vaccine would have his or her details on the website, he added.



The first Covid-19 vaccine in Sindh was administered to Dr Tanveer Ahmed at the facility. Also in attendance were health minister Dr Azra Fazal Pechuho, Chinese Consul General Li Bijian and Health Secretary Dr Kazim Jatoi.

The Sindh chief minister, health minister and Chinese consul general observe as a health professional is administered the dose at the Dow University Hospital while (right) a health worker flashes his vaccination card after receiving the jab at Khaliqдина Hall on Wednesday.—Reuters/Fahim Siddiqi/White Star

‘Inaccurate census data’

Talking to journalists after launching the Covid-19 vaccination campaign at a facility set up on the premises of Khaliqдина Hall, Health Minister Dr Pechuho said the controversial 2017 census recently approved by the federal cabinet might create difficulties for the department in the vaccination campaign.

“Its data is not accurate. That’s why we plan to take help from the National Database and Registration Authority,” she said.

Asked about the vaccine’s efficacy, she said since the virus had the ability to mutate fast, it’s important to vaccinate people as soon as possible. Patients who had recovered from Covid-19 also needed to be vaccinated against the disease, she said.

Earlier at the Dow Hospital, Ojha campus, the health minister emphasized that the healthcare staff getting the Covid-19 vaccine jab must continue to follow all precautionary measures recommended for disease prevention.

“The department is trying to vaccinate all healthcare workers by the end of this month. A total of 78,000 front-line workers currently working in the Covid-19 wards would be covered with the doses available.” (By Faiza Ilyas Dawn, 13, 04/02/2021)

Vaccine awareness

WITH Pakistan having begun its first stage of Covid-19 vaccinations, a mass awareness programme about the need, efficacy and safety of the vaccines is critical. Even in these early days, there has been some confusion about whether the Chinese Sinopharm vaccine is safe for those over 60. The Ministry of Health, however, has clarified that the vaccine is not being administered to doctors above 60 as the data for Sinopharm is not available for trial candidates in that age bracket. While these are important clarifications, the government must put careful thought and resources into a public-awareness drive. Across the world, vaccine scepticism has been a huge challenge even prior to Covid-19. A December 2020 survey conducted jointly by data-gathering company Ipsos and the World Economic Forum revealed that the country most suspicious of the Covid-19 vaccine is France, which has been a vaccine-sceptical nation even before the coronavirus struck. The survey, which was taken by 13,500 people in 15 countries, revealed that only 40pc of

adults in France intended to get the vaccine. The greatest number of people intending to be inoculated against the virus was seen in China, where 80pc agreed that they would get the vaccine if it was available. One of the main reasons behind vaccine refusal, the survey revealed, was the fear of side effects, followed by doubts about its efficacy. Some respondents said they would refuse as they felt they were not at risk of contracting the virus, while a lower percentage said they are against vaccines in general.

Pakistan is no exception when it comes to vaccine scepticism. The polio vaccination programme for years has been marred by refusals and even violence due to misguided beliefs about polio drops. As a result, Pakistan remains one of the last two countries left where the virus has not been eradicated. The government ought to consider these realities and address not just the sceptics but also those who do not have access to information about the global vaccination drive. An effective awareness programme can be implemented by engaging health experts, public figures and community leaders. Here, the ministries of information and public health can play a pivotal role in addressing concerns about efficacy, side effects, the age factor and other vulnerabilities. The idea should be to share information with the public in a convincing, transparent and accessible manner, so that citizens can make an informed decision about the Covid-19 vaccine.

(By Editorial Dawn, 06, 07/02/2021)

Doctor suspended for vaccinating 2 citizens

Sindh Health Minister Dr Azra Fazl Pechuho ordered on Sunday suspension of East district health officer Dr Aneela Qureshi, who was deployed at Covid-19 vaccination Centre at the Dow University of Health Sciences' (DUHS) Ojha campus, after two common citizens were reportedly inoculated at the facility.

The photos of both the citizens, shared by them on social media, have gone viral.

It is alleged that the said citizens, said to have been vaccinated on Saturday, are the daughter and son-in-law of a politician.

Sindh emergency operation centre coordinator for immunisation and polio in Karachi Fayyaz Hussain Abbasi has been tasked with inquiring into the matter and submitting a report within the next three days.

Taking notice of the incident, Federal Planning and Development Minister Asad Umar tweeted: "A complaint has been received that Covid-19 vaccine is being administered to not just health workers in Karachi, but also acquaintances. Taking immediate notice, [special assistant to the prime minister on health] Dr Faisal Sultan chaired a meeting today (Sunday), attended by the National Command and Operation Centre team and representatives of the Sindh government. In the meeting, it was stressed that only health workers are to be inoculated."

Meanwhile, the DUHS spokesperson stated that the suspended doctor was not employed at the facility.

Separately, according to a statement issued by the Sindh health department on Thursday, a total of 7,349 health workers in Sindh were vaccinated by then. In the metropolis, 1,192 healthcare professionals were vaccinated at Khaliq Dina Hall, 462 at Jinnah Postgraduate Medical Centre, 558 at DUHS' Ojha Campus, 551 at Sindh Government Qatar Hospital Orangi, 255 at Sindh Government Hospital New Karachi, 615 at Sindh Government Hospital Liaquatabad, 268 at Sindh Government Children Hospital, 722 at Sindh Government Hospital Korangi No5 and 881 at Malir Hospital.

(By Newspaper's Staff Reporter The Express Tribune, 04, 08/02/2021)

Flouting health rules: Declining virus fears lead to violation of SOPs in Karachi

As the coronavirus vaccine is being rolled out to populations around the world, the fear of the virus among people seems to be on the decline in Karachi.

Pakistan's case is no different as people have started flouting the virus SOPs at public places, particularly during congregational prayers.

In the bustling financial hub of Pakistan, Karachi, people have seemingly grown tired of wearing masks at public places.

When it comes to mosques and other places of worship, people have started eschewing preventive measures such as social distancing, use of sanitisers etc.

The arrangements to evade the virus threat at most mosques and Imambargahs also seem to be running thin.

It has been observed that the sanitiser gates installed at the doors of mosques and Imambargahs have either been removed or are not being used.

The rule advising a distance of six feet during prayers is being ignored as sanitisers at ablution spots have been removed as well.

The same is the situation witnessed at other public places, markets, and recreational areas, where people don't follow the SOPs such as using sanitiser after shaking hands with others.

Masks are still necessary at educational institutions, including government offices and private institutions. Apart from wearing masks, the implementation of the virus SOPs is almost invisible at most of the places.

The Express Tribune reviewed the implementation of the coronavirus SOPs at mosques, Imam bargahs and public places. Managing Secretary of a local mosque in Liaquatabad, Mohammad Asif, said Covid19 cases started coming in late February 2020, and that is when the preventive measures were introduced.

"From March to August, these SOPs were strictly enforced at mosques and Imam bargahs. Sanitiser gates were installed at the entrances of mosques. Worshippers maintained distance during prayers and wore masks. Soaps and sanitisers were placed at ablution rooms too. However, after the start of the second wave of the pandemic, people started avoiding the SOPs." Asif said that the first to go were sanitiser gates from the entrances, adding that later on rest of the SOPs were also being flouted.

"Now with the arrival of vaccines, the implementation of these SOPs seems to be a thing of the past." Yousuf Qadri, an administrative official at a local mosque in Kemari, narrated a similar story.

He said that the preventive measures are being ignored at the places of worship in not only posh areas but lower and upper middleclass neighbourhoods too. In Gadap, Kemari, SITE, Kharadar, Lines Area, Saddar, Landhi, Korangi, Orangi Town, Liaquatabad, North Karachi, New Karachi, Surjani Town, Nazimabad, Shah Faisal, Malir etc the SOPs are not being followed at all.

Qadri shared that a few mosques in Defense, Clifton, and other elite areas are still following the SOPs. Imam of a local mosque, Hafiz Yasir told that elderly worshippers mostly wear masks but middleaged and young men are flouting this rule.

Speaking to The Express Tribune, Special Assistant to CM Sindh Waqar Mehdi said the Sindh government has made unprecedented arrangements to prevent the virus spread.

"This is why the rate of cases in Karachi is now gradually declining." In the same vein, the official urged the public to wear masks and follow the precautionary measures at public places. "The Sindh government is trying to get people vaccinated as soon as possible." (By Amir Khan The Express Tribune, 05, 16/02/2021)

Vaccine concerns

IT is reassuring to see the Covid-19 vaccine recipient pool expanding further. Thus far, around 38,000 healthcare workers have been inoculated against the virus as the first group in order of priority, with individuals 65 years and above to follow in the second phase. The government on Monday opened registration for senior citizens to get in the queue for vaccination which is projected to start in March. It was on Feb 2, after receiving 500,000 doses of the Sinopharm vaccine the day before, that Prime Minister Imran Khan had launched the countrywide inoculation drive with the first jabs being administered to health workers in Islamabad. Vaccination campaigns in the provinces had begun immediately after. There have been concerns expressed that the campaign has until now proceeded more slowly than anticipated over misgivings about whether the vaccine was safe, especially for people above 60 years, an age group that was not included in the Sinopharm vaccine trials. In such a situation the government must be proactive in countering misinformation that can spread like wildfire creating unnecessary hurdles in the way of a population acquiring herd immunity. Evidence has begun coming in from some countries showing that vaccinations are already having the desired effect. In the UK, the country that launched the global vaccination drive in December, virus levels have come down to their lowest since last July. Israel has reported a 94pc drop in infections among 600,000 people who received two doses of Pfizer's vaccine.

Aside from misinformation and a general distrust of vaccines in many segments of this country's population, it is important that the vaccination drive not exploit existing income inequalities. The government had declared it would make the vaccine available for free to its population. At the same time it has also allowed the private sector to import the approved vaccines so that more individuals can get inoculated sooner. Fair enough: there is nothing wrong in that per se, but it is a matter of concern that the government has exempted the vaccines to be administered to paying customers from the price cap regime that applies to all drug sales in Pakistan. The absence of such a check would allow companies to make a windfall from this health emergency and drive vaccine prices beyond the reach of all but the most well-heeled individuals. Pelf and privilege would buy them protection while others less fortunate would still be waiting their turn.

(By Editorial Dawn, 06, 17/02/2021)

30,000 health professionals vaccinated against Covid-19 in Sindh

As the Sindh government has vaccinated more than 30,000 healthcare providers against Covid-19 across the province so far since Feb 3, the authorities have revised the estimated number of total professionals associated with the health and medical fraternity and now plan to inoculate more than 300,000 people, while earlier 175,000 individuals had been planned to be vaccinated, officials and sources said.

After weeks of hard work, they said the health authorities in collaboration with different public and private organisations had finalised a detailed plan chalking out the strategy.

"The vaccination drive is continuing at 12 centres set up for the purpose," said an official. "Earlier, the total strength of healthcare personnel in the province was estimated at 175,000 out of whom the department has identified 54,000 as the frontline force. Now there is a fresh deliberation and it is estimated that more than 300,000 people associated with the health profession would be vaccinated in the first phase of the vaccination."

The fresh estimates came after the authorities counted those individuals as well who were not directly engaged with treating coronavirus patients or working at virus-related centres, but were associated with the health profession while working at different facilities in different capacities.

The federal government had handed over 84,000 doses of Sinopharm vaccine — part of the half a million doses gifted by the Chinese government to Pakistan — to the Sindh government. Each individual will receive two vaccine doses with a gap of 21 days. Last week, the National Command Operation Centre had announced that the government would start vaccinating citizens over the age of 65 for the coronavirus in March for which it had started the registration process. However, before the vaccination comes to the public a large number of healthcare workers are expected to be in the queue to get the first shot.

Sindh govt plans to inoculate up to 300,000 in the first phase of the vaccination drive

“There are thousands of people who are associated with the health profession,” said another official while explaining the revised estimate of health professionals. “Earlier, those were identified who are directly engaged or associated with the facilities which are providing treatment to coronavirus patients. It was later realised that there is also a huge number of doctors, general physicians, paramedics, laboratory personnel, and collection units [staff] both in public and private sectors who are also at risk though they are not directly involved in treatment of Covid-19 patients.”

He said the process had already begun to register them and the job was expected to be completed within the stipulated time. The department, he said, was gathering numbers, establishing database through assistance of managements of health facilities in both public and private sectors and the fresh estimates suggested that it would be more than 300,000 health professionals who would be vaccinated in the first phase.

“As already announced by the federal government, in the second phase senior citizens would be registered for the vaccination programme,” said the official. “In the third one we expect before the general population to get the shots people with comorbidities [to be confirmed from previous investigation and prescription] would be vaccinated. This is a national challenge and everyone needs to put his or her contribution.”

(By Newspaper’s Staff Reporter Dawn, 14, 21/02/2021)

Vaccine uptake

BY FEB 24, 2021, Pakistan had vaccinated 72,882 front-line healthcare workers utilising part of the 500,000 Sinopharm vaccine doses it had received from China. This means 0.03 doses have been administered per 100 citizens in the country. Bangladesh stands at 1.4 doses per 100 and India at 0.83. While the supply is constrained for developing countries, the roll-out has had challenges of its own.



The vaccination roll-out in Pakistan has received an underwhelming response from front-line healthcare workers. Amongst those who have refused, some have done so because they wanted to wait for the Oxford vaccine AstraZeneca’s shipment to Pakistan; others want to wait and see how the vaccine deters the spread of the virus. There is a clear lack of information about the efficacy and impact of the vaccine.

Considering this response from the healthcare community, active policy iteration at the federal and the provincial level ought to come into play. Firstly, the reasons for refusal need to be carefully recorded and presented to the policymakers to design an effective roll-out that takes the response of front-line workers into account. Is there heterogeneity in the response? If so, what is driving this heterogeneity? How have non-Covid immunisation campaigns fared in our districts? What drove the variation in response to non-Covid immunisation campaigns?

As this data is analysed, the efficacy data of the vaccine procured needs to be communicated effectively to the public and especially front-line healthcare workers. If accompanied by the results of the trials and information on the roll-out of this vaccine in other countries, it is likely to be even more beneficial.

The reasons for refusal need to be carefully recorded.

Having said that, it is important to learn from historical vaccine roll-outs and research in the region that has important policy lessons for health ministries in developing countries. In 2011, Alison Bish and co-authors summarised key determinants of the uptake of vaccinations. Refusal is driven by perceptions about the pandemic being mild, vaccine efficacy and in some areas by gender.

According to Bish and co-authors, one of the reasons behind the reluctance to get oneself vaccinated is the ‘omission bias’. This means that bringing harm to oneself through action is less preferable than harm that comes one’s way without taking any action. It is important to take this into account when designing informational campaigns and a roll-out plan. An effective strategy, proposed by the authors, is one of enabling citizens to view immunisation as a social norm. This lens allows citizens to consider the act of not being vaccinated as a deviation from the norm.

To do that and increase uptake, it is important to build trust. Not only in the vaccination itself but also in the provider of the vaccine. A research experiment conducted by Jishna Das and Saumya Das (2003) in an Indian village has important policy lessons for health ministries. The experiment explores a particular aspect of the demand for vaccinations. Amongst other lessons, it concludes that trust in the service provider and success of parallel programmes by the same service provider is crucial to the uptake of the vaccine. During this study, vaccination rates in a village declined after the death of two women during childbirth. This led to increased mistrust in the service provider’s recommendation to be vaccinated.

In light of these findings, it is also critical that research in the past one year on how information is conveyed and by whom to build trust and confidence in the communication campaign and health systems is effectively utilised. Not only can an effective campaign increase vaccination uptake it can also further increase compliance with SOPs.

Effective communication campaigns have been led by credible public health leaders whose message has been readily accepted and implemented by the people. We see one such example in India, where Nobel laureate economist Abhijit Banerjee led an effective communication campaign that increased compliance with SOPs. In other campaigns, credible local organisations have effectively led successful campaigns and the impact of peer advising at workplaces has also been positive. Given this evidence, the announcement by SAPM Dr Faisal Sultan on Twitter that he received his first dose, is a welcome step towards increasing registration and vaccination rates.

Using data to effectively diagnose the reasons for the heterogeneous and low uptake, the government must use the local public and private health infrastructure efficiently to meet vaccination targets. This colossal task is likely to become easier with an effective, smart communication strategy. Every carefully deliberated measure in this campaign brings us one step closer to the end of this pandemic, a thought that almost seems utopian given the year we have had.

(By Maha Rehman Dawn, 26/02/2021)

Covid vaccination

There is some good news on the Covid-19 vaccination front as PM's Assistant on Health Dr Faisal Sultan has revealed that Pakistan will be getting 2.8 million doses of the Oxford-AstraZeneca vaccine in another two weeks. The vaccines are coming from Pakistan's Covax programme allocation. If waste is avoided, the number is good enough to cover almost 1.5 million people. Sultan informed the nation at a presser the other day that Pakistan should be getting about 17 million total doses through Covax by June.

As things stand, about 60,000 frontline healthcare workers have been vaccinated using the Chinese Sinopharm vaccine, only 500,000 doses of which are available. In addition, the Sinopharm vaccine, though effective, was approved without being thoroughly tested on senior citizens. This is why seniors, including those in the healthcare sector, are not being vaccinated with it. The vaccination strategy, according to Sultan, has been streamlined to help healthcare workers get easier and faster access to existing vaccine stocks. Non-frontline healthcare workers can get vaccinated from Monday, while vaccination for senior citizens — the most at-risk age group — will begin in March. Seniors will exclusively get the AstraZeneca vaccine.

While it is heartening to learn that vaccination for seniors will begin soon, we must also remember that the total vaccine doses earmarked through Covax are not enough to even cover the over-65 population of the country, let alone all healthcare professionals and younger, at-risk people. Estimates show that the over-65 population of Pakistan is about 10.3 million. With zero waste, Pakistan's initial Covax allocation of 17.2 million doses will only cover 8.6 million people. The government needs to find ways to increase acquisition fast. Perhaps appealing to big businesses, including some run by the political elite, is a solution.

This is literally what is happening in the island nation of Honduras, which ranks alongside Pakistan in terms of economic indicators. Businessmen and private companies — knowing that their government can't afford or manage the job — are covering the costs for vaccine acquisition and distribution. Would patriotic Pakistani businesses stand up to do the same?

(By Editorial The Express Tribune, 14, 20/02/2021)

Covid-19 spike

FEARS about a spike in Covid-19 cases in the country turned real this week as coronavirus infections, hospitalisations and the positivity ratio marked increases. SAPM for National Health Services Faisal Sultan said the decline witnessed over the last two months is "clearly reversing" and that positivity had gone up from 3.31pc to 4.16pc within one week. In Punjab, Friday saw 860 cases — the highest reported figure in a day over the last three months — across the province. A report also suggested that cases in Punjab are the highest among people between the ages of 21 and 30. This increase in cases follows the lifting of restrictions across the country a few weeks ago. From educational institutions to indoor weddings, most activities are in full swing — while neither mass testing nor vaccination rollout are meeting satisfactory targets. On March 5, only 38,200 tests were conducted across the country, a figure that is far too low, especially since commercial activities and gatherings are in full swing. Experts and health bodies across the world have said that widely available testing is the only way to gauge the prevalence of the virus and the trends that are developing. But, for some inexplicable reason, the authorities in Pakistan have failed to go beyond 50,000 or so daily tests. The vaccination programme, too, has been unimpressive, with low registration by healthcare workers and lack of clarity from the government about how it will be rolled out. The arrival of the AstraZeneca vaccine has been delayed. What is more alarming is that Pakistan is yet to purchase vaccines; all the vaccines available today, as well as those expected to arrive in the country, are donations by China or Covax.

An urgent vaccination programme should be the top priority. Across the world, countries battered by Covid-19 are looking at phased reopening as the vaccine is administered. People must be informed and protected. The government must do more than simply urge SOP enforcement, especially as the fear of Covid-19 appears to be absent from the public imagination.

(By Editorial Dawn, 06, 07/03/2021)

The third wave

Till 10 days ago, the rate of Covid positive cases in the country was hovering around 3.5%, but the same has now swelled to 6.5%. Yes, a third wave of the coronavirus has hit the country, especially Punjab where 1,653 cases — among the national tally of 2,238 — were reported in a single day, on Sunday, for the first time since June 2020. The government sees the UK variant of the deadly microbe as the major reason behind the sharp surge in the cases. Federal Minister Asad Umar, who is also the chair of the National

Command and Operation Centre (NCOC), has confirmed that genome sequencing done in the wake of a rise in the infection cases in AJK and parts of Punjab — the origin of a big number of British Pakistanis — verifies the presence of this lethal strain of the virus.

Thus the government has had to withdraw the decisions taken on February 24 — whereby all official, commercial, social and entertainment activities across the country were to get back to normal from March 15 — even before they could come into force. Amid the rising number of cases, the NCOC — the Covid nerve centre which has representation from all provinces and regions of the country — has asked all federating units to ensure strict implementation of the prescribed SOPs. The Centre is also considering further restrictions on travel from countries where there is high infestation of new strains of the virus.

In line with the NCOC directives, the Punjab government has imposed a lockdown for two weeks in seven high-prevalence cities — Lahore, Rawalpindi, Sargodha, Faisalabad, Multan, Gujranwala and Gujrat — restricting the movement of the people. Besides, all commercial activities throughout the province of Punjab will be closed by 6pm. Shrine and cinemas have been closed while mosques have been directed to ensure compliance with safety measures. The policy of 50 per cent work from home in case of both public and private offices has also returned. Educational activities have discontinued yet again. People have been warned of a fine as high as Rs35,000 on face mask violation. Similar measures have been imposed in the federal capital and Khyber-Pakhtunkhwa province also.

Even in Sindh, where no cases of the UK variant of the coronavirus have been reported so far, restrictions have been stepped up.

The re-appearance of the curbs has — pretty understandably — not gone down well with both the general public as well as the business community. Frankly speaking, it's pretty natural for people to get fed up with the restrictions that have been in place in some form for about a year. We have even seen people in European countries take to street in protests against lockdown measures. The government, therefore, needs to supplement its efforts to counter the raging pandemic with a swift vaccination process. It's disappointing to note that the government has not yet completely catered to the most at-risk population. Of the 400,000 people ageing 60 and above who registered for vaccination in Karachi and Lahore, only 10,500 have so far received the jabs. The number of doses administered in Pakistan is the lowest in the region — 0.03 per 100 people as against 2.58 in Sri Lanka, 2.03 in Bangladesh, 1.38 in Nepal and 1.2 in India.

Moreover, the \$150 million set aside by our government for vaccine procurement is simply peanuts. And then there is no word yet on the timeline about the doses expected under the Covax programme. Right now, we are solely relying on the one million vaccine doses gifted by China. The government must come up with a proper plan for a swift vaccination process in the country as early as possible. (By Editorial The Express Tribune, 14, 16/03/2021)

Smart lockdowns return

The National Command and Operation Centre (NCOC) showed serious concern over a sharp uptick in the national Covid-19 positivity ratio, which hovered around 5-6% this week, as the single-day tally of new cases stayed above 2,000 for third consecutive day on Saturday.

The number of Covid cases has seen increases in the recent weeks, which the NCOC chairman Asad Umar described as the third wave of the pandemic. In a recent interview, Umar said attributed the increase to the UK strain of the contagion.

A special NCOC morning session, chaired by Umar, took stock of the rising trend and directed all the federating units to take immediate action for strict implementation of the standard operating procedures (SOPs). The forum lauded the steps taken by Punjab for the disease control. The forum noted that the rising disease trend was a matter of serious concern where the major contributors were Punjab, Islamabad Capital Territory (ICT) and few cities of Khyber Pakhtunkhwa (K-P) and Azad Jammu and Kashmir (AJK). Further steps to control the disease, including expanded lockdowns in various cities of Punjab and Islamabad and certain cities of K-P were also discussed.

The forum also discussed spread of new virus strains in the country. The forum also considered further restrictions on international travel from certain countries with high prevalence of South African and Brazilian virus. The forum said the decision would be taken after consultation with all stakeholders. "SOPs implementation week will be implemented across the country from today onwards," the NCOC underscored. It said the citizen were requested to once again display good example of social behaviour and follow Covid related SOPs for collective wellbeing.

The forum mentioned that vaccination drive for elderly population was going on since March 10. "Senior Citizen are encouraged to get themselves vaccinated from designated vaccination centres," it added. The forum requested the provinces to ensure smooth continuation of vaccination drive. Separately, Special Assistant to Prime Minister (SAPM) on Health Dr Faisal Sultan urged the public to strictly adhere to Covid-19 SOPs. "Covid-19 is deadly virus but we can control it just as we controlled it by following the SOPs during the previous two waves," he said.

"We must wear a mask when going out as it reduces transmission of infection by 70 to 90%. Proper hand washing with soap is very beneficial and so is the social distancing. If we continue to practice all SOPs, I assure you that we will counter the Covid-19 successfully," he added. Coronavirus first emerged in the country in February, 2020. The first wave of the disease started ebbing in July after witnessing a peak of more than 5,000 cases in a day in June.

The single-day tally showed a rising trend again towards the end of 2020, dubbed by experts as the second wave. In February the number of cases had come down to over 1,000. In the first 10 days of March the single-day tally of new cases hovered above 1,500. However, for the past three days, the tally stayed above 2,000. The last time the tally crosses 2,000 mark was on January 29, when the NCOC reported 2,186 new cases in a single day.

The NCOC had reported 2,338 new cases on Saturday, adding that 46 virus patients succumbed to the deadly contagion. The situation was particularly alarming in the sense that the last 100,000 cases were registered in a two-month period, according to the official data. The caseload crossed the 600,000 infections mark on Friday. Sensing an alarming situation, the NCOC reintroduced several coronavirus-induced restrictions on Wednesday, including closure of educational institutions in seven districts of Punjab as well as the federal capital and other measures. On Saturday, the authorities concerned introduced smart lockdown in several areas of Lahore, Rawalpindi, Peshawar and many other cities across the country. However, contrary to the national trend, the situation in Sindh – the worst affected province, with caseload of more than 260,000 cases – is improving. It was first time in nearly a year on Saturday there was no Covid-related death, according to the data issued by the provincial government.
(By Newspaper's Staff Reporter The Express Tribune, 04, 16/03/2021)

Malls, markets to be closed by 10pm as new Covid-19 restrictions imposed

The provincial government on Monday notified a new set of restrictions and standard operating procedures (SOPs) for businesses and offices and announced imposing smart lockdowns in hotspots across the province till April 15 in view of a surge in Covid-19 cases. A home department notification said all markets, shopping malls and marriage halls would remain open from 6am to 10pm, except essential services including restaurants, medical stores, clinics, hospitals, fuel stations, bakeries and milk shops.

Amusement parks will be closed by 6pm, it added.

According to the notification, work from home policy would be implemented and 50 per cent of the staff at all public and private offices will be called on duty. Wearing masks has been made mandatory at all the government and private offices and public places.

With three deaths, 171 test positive for coronavirus across Sindh

The order said that no indoor marriage function would be allowed for one month. However, it said, only outdoor events/marriage functions were allowed with upper limit of 300 persons till 10pm under the SOPs. Functions can also be held at marquees with defined modification for ventilation, but no buffet service was allowed at the functions.

As per the order, there would be no indoor dining at the restaurants and only outdoor dining and takeaway would be allowed.

According to the notification, "There will be a smart lockdown as per earlier decision based on disease hotspot as deemed appropriate by commissioners and deputy commissioners under the Sindh Epidemic Diseases Act 2014."

All indoor facilities such as gyms, cinemas, theatres and shrines were also ordered to be closed for a period of one month.

Meanwhile, three more patients died overnight due to Covid-19 and 171 new cases emerged when 8,511 tests were conducted.
(By Tahir Siddiqui Dawn, 13, 16/03/2021)

Active Covid-19 cases rise by 50pc in three weeks

The National Command and Operation Centre (NCOC) on Tuesday revealed that the number of active Covid-19 cases had increased by about 50 per cent in three weeks as another 2,511 people got infected in a single day.

The national positivity ratio has been recorded at 5.7 per cent.

Meanwhile, Adviser to the Prime Minister on Commerce Abdul Razak Dawood received the Covid-19 vaccine at the Pakistan Institute of Medical Sciences (PIMS) in Islamabad on Tuesday.

Mr Dawood advised elderly people to benefit from the facility.

The number of active cases was around 16,000 last month, but it rose to 23,355 on Tuesday.

The number of cases started increasing after the NCOC had on Feb 24 decided to relax most restrictions on commercial activities, schools, offices and other workplaces, allowing them to function at full strength.

However, with no let-up in Covid-19 cases, the NCOC re-imposed the restrictions on March 10.

The NCOC also announced a two-week spring vacation in educational institutions in 10 cities, whereas Balochistan and Sindh were suggested to limit attendance to 50pc.

According to the NCOC data, 2,511 Covid-19 cases and 58 deaths were reported over the past 24 hours, with 258 patients on ventilators throughout the country.

The vents occupancy rate was 46pc in Islamabad, 35pc in Lahore, 30pc in Multan and 27pc in Bahawalpur. The data of oxygenated beds showed that Gujrat had a 66pc occupancy rate, followed by Peshawar 46pc, Islamabad 38pc and Lahore 30pc.

As many as 2,394 patients are under treatment in hospitals across the country, with the total number of deaths recorded at 13,595.

Meanwhile, Abdul Razak Dawood reached PIMS to receive the vaccine.

"This morning, I received the COVID vaccine. I went to PIMS and the whole process was smooth & very well organized. I hope that our elderly populace will use this facility. I would like to commend the efforts of Ministry of Health & @fslsltn in this regard," the PM's assistant tweeted.

Prime Minister Imran Khan had launched the vaccination campaign on Feb 2 and the frontline healthcare workers were inoculated in the first phase.

In the first week of March, the Drug Regulatory Authority of Pakistan allowed the use of Sinopharm — the only vaccine available in Pakistan — for the people over 60 years of age and the inoculation process started on March 10.

However, in view of the high mortality rate among senior citizens, the NCOC had on March 15 allowed the people aged 70 and above, who had registered themselves on help-line 1166, to walk into any vaccination centre to get inoculated against Covid-19.
(By Ikram Junaidi Dawn, 03, 17/03/2021)

Nine areas of district Central go under smart lockdown for 15 days

The administration of district Central on Wednesday clamped discrete 'micro' smart lockdowns in nine areas as the third wave of Covid-19 spreads.

Official sources said that the deputy commissioner Central issued the order that enforced the lockdowns in the streets of the houses with coronavirus-infected people in North Karachi, North Nazimabad and Gulberg.

They said that the 'micro' smart lockdown was imposed in several emerging hotspots in district Central to deal with the rising cases of Covid-19.

The sources said it had become fundamental to ensure quarantine, contact tracing and testing to reduce the transmission and spread of Covid-19, besides mandatory mask wearing and social distancing interventions.

They said that the DC Central under Section 3 of the Sindh Epidemic Diseases Act, amended in 2020, ordered imposition of smart lockdowns and micro-smart lockdowns in the streets and houses of specified areas for at least two weeks.

384 test positive for coronavirus in the province; 150 cases are from Karachi

As many as 11 houses along with their streets in different parts of the district were placed under micro-smart lockdown. The houses were located in Sector 5-F and Sector 5-L in North Karachi, Blocks C, D, K of North Nazimabad and Blocks 12, 14 and 15 in Gulberg.

According to the order, movement of people residing in areas under the smart lockdown shall be strictly restricted and only grocery shops, convenience stores, bakeries and pharmacies shall be allowed to remain open during specific timings as per directives issued by the National Command and Operation Centre (NCOC).

Food delivery not allowed

The order said that all kinds of industrial units in these areas shall also remain closed and no home delivery/takeaway of any sort will be allowed from restaurants and fast-food joints.

It said that no private or family get-togethers would be allowed in homes and no gatherings of three or more persons will be allowed in the specified areas.

The lockdowns in the specified areas will remain effective till March 31 or till the infected people are cured as per the guidelines issued by the provincial government.

According to the order, anyone entering or exiting the lockdown areas shall wear a mask without any exception and the movement of people residing in areas under lockdown shall be strictly restricted.

It said that only grocery shops/convenience stores and medical stores would be allowed to remain open in these areas during timings specified by the home department.

All other business activities will, however, strictly remain closed without any exception.

The orders said that no joy riding would be allowed and the residents coming out of their houses should have valid reason to do so. It also said that pillion riding would be strictly banned in the affected parts of the district.

The order also banned plying of all public transport including buses, taxis, rickshaws, Uber, Careem, Swvl on the roads in these areas.

One more Covid-19 patient dies

One more Covid-19 patient died overnight and 384 new cases emerged when 10,590 tests were conducted.

In a statement issued from CM House, Chief Minister Syed Murad Ali Shah said that the death of one more patient during the past 24 hours lifted the death toll to 4,469, constituting 1.7 per cent death rate.

According to the chief minister, out of 384 new cases, 150 have been detected in Karachi, including 41 from district East, 35 South, 27 Malir, 24 Central, 21 Korangi and two in district West.

He said that Badin had 39, Hyderabad 27, Matiari 22, Sanghar 14, Tando Allahyar 13, Mirpurkhas 11, Qambar 10, Jacobabad 8, Naushahro Feroze, Sujawal, Sukkur, Umerkot and Shikarpur seven each, Ghotki and Jamshoro six each, Khairpur five, Larkana three, Kashmir two and Dadu one.

(By Tahir Siddiqui Dawn, 13, 18/03/2021)

COMMENT: Covid-19 vaccines: public health, private interests

IMMUNISATION against Covid-19 is a public good. The World Health Organisation “recognises the role of extensive immunisation against Covid-19 as a global public good for health in preventing, containing and stopping transmission in order to bring the pandemic to an end...”. Nobody is safe until everybody is safe, which necessitates that the immunisation of the most vulnerable among us be prioritised.

Notwithstanding the above, the current scramble for vaccines in the world reflects the underlying inequities in healthcare between countries and within countries. The North-South divide in the world is as much a geographical term as it is a euphemism for the haves and have-nots in low and middle-income countries.

The UK has immunised more than 55 per cent of its adult population with a first dose against Covid-19, whereas in more than 30 poor countries no one including frontline health workers and senior citizens is immunised. The low-risk young adults are being vaccinated in high-income countries while high-risk health professionals and elderly people are left behind in poor countries. So much for global solidarity in global health!

Pakistan has the fifth largest population in the world and the second largest Muslim population. In terms of vulnerability to Covid-19, speaking in round figures, we have around all-inclusive two million health and allied professionals and 15 million senior citizens in the country. This comes out at 17 million (or one crore and seventy lacs). The government has rightly identified the following as high-risk groups — frontline health workers: those directly responsible for managing Covid-19 patients; other health professionals who are more exposed to Sars-CoV-2 than the general population because of their presence in health care facilities and their interaction with the affected; and an elderly population, aged 60 years and above, due to their weak immunity, body reserves and high comorbidities.

The priority assigned to these high-risk groups is a good government policy, in line with the WHO recommended policy on prioritised vaccine allocation. The government must also be applauded for putting together an IT platform for registering and assigning centres for vaccination. This system is working fairly well. All in all, it is a good system but clearer communication to the public would be helpful. After all, this is the first time Pakistan is organising a vaccination campaign for the adult population on a national scale.

As this piece is being written, according to information available till March 26, 2021, only 1.16m people of the 17m high-risk population have been registered for vaccination in Pakistan and only 0.561m people vaccinated. This indicates only 6.8pc people of the high-risk population registered and 3.3pc of the high-risk population vaccinated, while merely 0.25pc of the total 220m population have been vaccinated till date.

Pakistan is also facing issues accessing vaccines. Unlike India, we have not paid attention to local vaccine production. Consequently, we are recipient of all kinds of vaccines.

There are four possible sources of Covid-19 vaccines for Pakistan. Firstly, donations from friendly countries such as China that has donated over one million doses of SinoPharm.

Secondly, there are donations from Covax, an international platform established in Geneva to procure and supply vaccines globally. Covax is a critical initiative in global health for fair and equitable access to Covid vaccines in all countries, regardless of the ability of the countries to pay. It aims to get free vaccines to 20pc of the global population. It is co-led by the Coalition for Epidemic Preparedness Innovations, Gavi, and the WHO, alongside key delivery partner Unicef. Pakistan was one of the first countries to officially register our interest in receiving vaccines under this arrangement back in June 2020, and has been actively following it at all levels. More than 17 million doses of vaccines have been approved for Pakistan under this arrangement. While the first tranche was supposed to reach Pakistan in the first week of March, due to repeated delays, it is not yet clear when we will receive these vaccines. Once received, these vaccines will hardly help Pakistan vaccinate all people of the high-risk groups.

The third source is buying vaccines directly from manufacturers. In this connection, reportedly, 60,000 doses of Convitecia are expected to reach Pakistan from CanSino, China. Pakistan was one of the trial sites for this vaccine but did not insist for a right to access these vaccines once they were produced and approved. This was the first such trial in Pakistan. This anomaly should not be repeated with future trials. Our population should not act as guinea pigs, but instead receive a guaranteed fair share from the manufacturers once the trial is complete.

All the above sources of vaccines are for the government. However, there is a fourth source whereby the private sector in Pakistan is allowed to import vaccines and make it available to the people. Allowing the private sector actors to import vaccines and sell it during a health emergency is fraught with problems.

Notwithstanding the ongoing vaccine price controversy, there are more fundamental issues involved, both technical and ethical. In a context where over 17m high-risk people are to be vaccinated, making Covid vaccines commercially available changes the whole paradigm from public-health-need to ability-to-pay. If the price issue is resolved and the vaccine becomes available in the market, we may soon have a situation whereby an old person with multiple comorbidities is not yet vaccinated but young children of rich families

have received the jabs. On the one hand, it will not be an optimal use of available vaccines in the country and on the other hand it poses an ethical issue and a moral dilemma. This will further aggravate an acute sense of inequality in our society. Once again people will learn that the rich and powerful can get away with everything, be it unpaid hefty loans or access to life-saving vaccines.

Three suggestions can be made in a situation where there is a dearth of vaccines to help avoid the problems mentioned. Firstly, if some private companies have imported vaccines, then instead of allowing them to make these vaccines available in the private sector where they will be sold on a first-come-first-serve basis, regardless of risk consideration, the government should buy this vaccine from importers and supply it free to people according to its own policy of allocation according to risk determination. The federal cabinet had approved US\$150 million for buying vaccines in early December 2020. This will create a win-win solution and the act of goodwill on the part of the government will be a bonus.

Secondly, the government should develop a policy for the corporate sector to buy vaccines from importers and provide these to their employees free in accordance with the risk criteria laid down by the government. This will provide protection to workers, securing the continuity of businesses, again a win-win solution. Details of this policy can be developed by the National Command and Operation Centre with inputs from the relevant ministries.

Thirdly, the government may impose its national prioritisation policy of vaccination on private sales as well. This is possible if private selling is also monitored through a government-managed IT platform. This approach can also aid in reaching the targets set by the government for the high-risk population. This will also allow the monitoring of any side effects that may appear and remain unreported otherwise in private sales. Additionally, this will enable the government to monitor and evaluate the cold chain for the privately supplied vaccines, which is critical to ensure the efficacy.

Last but not the least, the government needs to redouble its effort to raise public awareness about the vaccines and registration mechanism in order to increase vaccination rate. Citizens have questions and misconceptions regarding the vaccines. It is imperative that these concerns are proactively addressed and not permitted to spread unabated.

(By Zafar Mirza Dawn, 03, 30/03/2021)

100 die in highest single-day toll this year

As Pakistan reported 100 deaths from coronavirus within just 24 hours, the current year's highest death toll in a single day, the number of critical patients in the country reached an all-time record of 3,749 with over 80pc oxygenated beds occupied in Peshawar, Swat and Gujranwala hospitals on Tuesday.

At least 4,084 more people, including the outgoing finance minister Dr Abdul Hafeez Shaikh, contracted the virus in the past one day, according to official sources, which also confirmed that the number of active cases across the country surged to 48,566.

Minister for Planning and Development Asad Umar claimed that the first batch of procured vaccine was on its way to Pakistan. As it seems that Pakistan may not get the Oxford-AstraZeneca from Covax for a few months, the minister also announced that the country would get three million doses, in the form of bulk vaccine, by the middle of April from a Chinese company, Cansino Bio.

Currently number of critical patients across Pakistan is far more than 3,300 recorded during the peak of the first wave of Covid-19 in June last year. According to the National Command and Operation Centre (NCOC) data, as many as 3,749 Covid patients are in critical condition.

In all, 413 ventilators allocated for coronavirus patients were occupied across the country. Of all the ventilators in Multan and Islamabad, 67pc were occupied, followed by Lahore's 63pc and Gujranwala's 60pc. Official data also confirms that more than 80 per cent oxygenated beds in Gujranwala, Swat and Peshawar were occupied, indicating that hospitals in Punjab and Khyber Pakhtunkhwa are near capacity.

The NCOC recorded 4,084 new cases and 100 deaths in the past one day. This is the highest death toll in a day since December 23, 2020, when 111 deaths were reported from across Pakistan.

Special Assistant to Prime Minister on Health Dr Faisal Sultan said the national positivity ratio was 8.83pc on Tuesday. While sharing details of positivity ratio in the federating units, the PM's aide said it was 12.31pc in Islamabad, 10.43pc in Punjab, 8.98pc in Azad Jammu and Kashmir, 8.55pc in KP, 2.98pc in Sindh, 2.33pc in GB and 2.15pc in Balochistan.

The outgoing finance minister, Dr Abdul Hafeez Shaikh, too, tested positive for Covid, the third senior government official to do so in 24 hours, a week after Prime Minister Imran Khan announced he himself had contracted the virus, as President Arif Alvi and Defence Minister Pervez Khattak on Monday announced they had both tested positive for coronavirus.

In a tweet, Minister for Industries and Production Hammad Azhar, who has been given the additional portfolio of finance minister, wrote: "Just found out that Dr Hafeez has tested positive for Covid-19. I pray for his swift recovery and good health."

Also on Tuesday, the minister for planning and special initiatives turned to Twitter to announce that the first consignment of procured vaccine was on the way to Pakistan. "First batch of Cansino vaccine procured being received today. This is the vaccine in which Pakistan participated in phase 3 trials, which was the first time ever that Pakistan had done so for any vaccine," wrote Mr Umar.

The minister had earlier revealed that the government had procured one million doses of Sinopharm and 60,000 doses of Cansino. Cansino is the only vaccine that has been administered to around 18,000 Pakistanis during the phase-3 clinical trial.

Equipment, training

"We will be getting bulk vaccine by mid April from Cansino from which 3 million vaccine doses can be made. The bulk vaccine received will be formulated, sterilized and packed in Pakistan. For this purpose special equipment has been procured and manpower is being trained," Mr Umar further tweeted.

Studies to vaccinate mothers-to-be

Just a day ago, a four-day-old baby contracted the deadly virus and shifted to oxygenated bed at the Pakistan Institute of Medical Sciences, Islamabad.

As a number of babies have been tested positive for Covid-19, experts have suggested that both parents and healthcare workers should strictly follow the standard operating procedures regarding babies.

Member of the Scientific Task Force on Covid-19 and Vice Chancellor of the University of Health Sciences Prof Dr Javed Akram confirmed to Dawn that babies contracted the virus from parents very frequently.

"That is why internationally three studies are being held in which vaccine is being given to pregnant women so that the antibodies would be developed in babies. Though infants recover from Covid-19 very fast, in some cases they die after three months due to Kawasaki Syndrome, in which symptoms are just like cardiac arrest," he explained.

In reply to a question, Dr Akram said that if a mother-to-be is found positive her baby should immediately be shifted to isolation ward after delivery. "Mother milk should be given to babies through breast pump as it is the only option to protect babies from deadly virus. Once mother is found negative, baby should be handed over to her," he said.

Covax, an international alliance that had pledged to provide free of cost doses for 20pc Pakistanis, had given assurance that the first consignment of the promised vaccine would reach by the end of March. However, the delivery has been delayed apparently due to high demand of vaccine in some other countries.

(By Ikram Junaidi Dawn, 01, 31/03/2021)

Women during the pandemic

ONE year ago, the world ran on different rules. The rhythm of day was different, the management of time was different, people behaved differently and were scared of different things. One custom of that bygone pre-pandemic world was the division of male and female work and space.



In Pakistan, where the number of females in the workforce is below 30 per cent, women mostly stayed at home and men went to work. When the men left in the morning, the women turned to the repetitive tasks of washing and cooking that make a household run efficiently.

All of this changed when the pandemic hit. Men began to stay at home either because they lost their job or because their employer wanted them to work from home. The small respite that their wives and mothers and sisters had during the day when men did not

dominate and demand this or that was taken away from the women. As men stayed home day after day, they required waiting on, a cup of tea now, a meal prepared fresh not just for dinner but also for lunch. They dirtied dishes and created a mess.

Schools also closed and the children too made their own demands, their own messes, trapped as they were in the home. Pakistani women thus were caught in a 24/7 cycle of work, trying to sate appetites, calm tempers and maintain harmony in an uncertain and constrained world.

The constant presence of men and the absence of any external outlet for women have created a pressure-cooker situation.

Women everywhere are the primary casualties of the coronavirus pandemic, having had to pay the price whether or not they were infected with the virus. Data from around the world substantiates this truth. In China, peer-reviewed studies reveal a 300pc increase in violence against women. In Lebanon, there has been a 45pc increase in violence against women. In the United Kingdom, violence against women has doubled from the 10-year average. Similar increases in violence have also been reported in Germany and Tunisia. Next door in India, the onset of the pandemic has led to at least a 21pc increase in violence against women.

The statistics quoted here are all from peer-reviewed studies in journals. It is very likely that the situation is far worse than what is being reported. In Pakistan, social workers and those who work in shelters and in other facilities that attend to abused women, report an exponential increase. The constant presence of men and the absence of any external outlet for women have created a pressure-cooker situation.

In much of the country, women have to ask male permission to leave the home even for essential tasks; now going out and getting any kind of respite from violence has become completely impossible. Visits from family members and meeting others at family occasions (which used to function as a means to ensure that women were not being maltreated) have ceased, giving abusive men carte blanche to do whatever they want to the women at home.

The situation of working women is just as bad. Those who have been told to work from home find that no one in the household seems to understand that they have to attend to work duties during work hours. These women find themselves forced to watch children and also be available for Zoom calls or other work interactions. Many others, like the 250,000 American women who were let go of by their

employers in January 2021, have just lost their jobs and their income. The pandemic has set them years behind their male counterparts in career advancement.

The meaning of all these statistics is that in the post-pandemic world women will be at an even greater disadvantage than they were before it started. Those Pakistani working women who have either been fired or have had to quit their jobs because of the pandemic may not be able to return to work after it is over. The ability to bring in an income plays a huge role in the power women wield in their households; the lost earning potential, therefore will reduce their ability to make decisions in the household and to protect their own rights. This resection of women from the workforce is likely to have society-wide effects where cultural mores that keep women out of the workplace will be strengthened.

None of these realities are being talked about in Pakistan. This past International Women's Day, a television channel hosted a conservative female social worker who could not stop talking about how the pandemic was a blessing in disguise because it permitted families to spend quality time with each other. Some in government have also propagated this kind of fantasy because very few, if any, efforts have been made to collect statistics about exactly how many women are being abused. Nor has there been any work done to provide additional resources to shelters and legal aid cells who are trying to help these women. Instead, the ludicrous fantasy that imagines families living together without any conflict and without women waiting on everyone else all the time, has been nursed and propagated.

Pakistan needs to wake up. The women of the country cannot be expected to shoulder all the burden of housekeeping, childcare, studies and work from home. Vaccinations are now available for the Covid-19 virus but no pre-emptive solution is present for a society and a world that has just been heaping the entire burden of a terrible and catastrophic event on its women. Men must be held answerable for the cruelty and selfishness they have exhibited this past year, attitudes that they have never questioned or considered. Absolute power corrupts absolutely, and indeed that is what has happened to many Pakistani males who stand and watch and live their lives, oblivious to the burdens and abuse they heap on Pakistani women.

(By Rafia Zakaria Dawn, 06, 31/03/2021)

Sindh bans all marriage functions from 6th

The provincial government on Wednesday notified a new set of restrictions and standard operating procedures (SOPs) for commercial, business and social activities, imposing a complete ban on indoor and outdoor marriage functions with effect from April 6 in view of the recent surge in Covid-19 cases.

A notification said that outdoor marriage functions with a limited number of participants were allowed to be held till April 5 as per the earlier order of March 15.

It said that all markets, shopping malls and marriage halls would remain open from 6am to 8pm, except essential services including restaurants, medical stores, clinics, hospitals, petrol pumps, bakeries and milk shops with immediate effect till April 11.

According to the order, broader lockdowns would be enforced in areas with more than eight per cent positivity rate with stringent enforcement protocols based on risk assessment and no mobility except emergency in disease hotspots would be allowed.

It said that no indoor dining would be allowed at restaurants, which could remain open till 10pm and thereafter only takeaway and home delivery would be allowed.

The order said that only 50pc staff's presence would be allowed in all public and private sector offices and courts till further orders.

Besides, amusement parks would be completely closed, while walking and jogging tracks would remain open with strict adherence to Covid-19 SOPs.

The notification said that wearing mask and observing social distancing was mandatory at all government and private offices and at public places.

It said that all kinds of indoor and outdoor gatherings, including social, cultural, political, sports, musical, religious, festivals and miscellaneous events were completely banned.

It said that the spread of Covid-19 would be reviewed further on April 7 at the National Command and Operation Centre forum for any further actions.

(By Newspaper's Staff Reporter Dawn, 13, 01/04/2021)

Private firm allowed to sell Covid vaccine temporarily

While temporarily allowing a private firm to sell Covid-19 vaccine, the Sindh High Court on Thursday observed that any restriction on the sale of Covid-19 vaccine at this stage would be against public interest since it was an urgent need due to the crisis being currently faced by the country.

The single-judge bench headed by Justice Nadeem Akhtar also extended its earlier interim stay order against withdrawal of exemption notification issued by the Drug Regulatory Authority of Pakistan (Drac) about Covid-19 vaccines' import by a private firm till April 12. The bench ruled that it would decide the question whether the exemption granted for Covid-19 vaccine import could be rescinded or not on April 12.

A pharmaceutical company filed a suit before the SHC and contended that the Drap had withdrawn its earlier notification issued on Feb 2, under which it exempted the import of Covid-19 vaccine for sale for a period of six months or till the market prices of those vaccines become available.

It was further argued that therefore the firm entered into a vaccine supply agreement with a foreign seller/exporter for the import of one million doses of Covid-19 vaccine (Sputnik-V) and the consignment had already arrived at Karachi Port, but the impugned notification was withdrawn by Drap.

SHC rules ban on sale of vaccine against public interest

When the bench took up an application of the firm seeking contempt proceedings against the authorities concerned for not releasing the vaccine from the port on Thursday, the alleged contemnor, a federal drug inspector Sindh, turned up and filed an explanation.

He contended that he was not the competent authority to release the consignment in question and thus such delay, if any, cannot be attributed to him.

However, the bench dismissed the contempt application after the lawyer for plaintiff firm said that the consignment had already been released and he did not want to press the application.

The counsel for the federal authorities, who were impleaded as defendants in the suit, informed the bench about the order of a two-judge bench issued on March 31 in the present matter and requested for time to place on record the price of Covid-19 vaccine to be fixed by the federal government on next hearing.

The lawyers for the federal authorities also sought a restraining order for the plaintiff firm not to sell the subject vaccine as the price had not been fixed yet.

However, the lawyer for the firm vehemently opposed it on the ground that the impugned notification of March 18 to withdraw the exemption was illegal.

The bench observed that the question whether the exemption granted to the Covid-19 vaccine could be rescinded or not will be decided when the main suit is to be taken up for hearing (on April 12).

"It may be observed that if the court comes to the conclusion that the subject vaccine ought to have been sold by the plaintiff at the price determined by the federal government, the excess amount, if any, received by the plaintiff can be recovered from the plaintiff as all the relevant details, such as, the number of ampules imported and sold by the plaintiff and price thereof can easily be sought from the plaintiff. Learned counsel for the plaintiff states that the plaintiff shall voluntarily place all such information before this court", it added.

"In view of the above, I am of the considered view that any restriction relating to the sale of the Covid-19 vaccine at this stage would be against the public interest because of its undisputed urgent need due to crisis being currently faced by the country," the bench in its order concluded.

(By Ishaq Tanoli Dawn, 13, 02/04/2021)

'If NCOC doesn't, we will take decisions ourselves,' says Murad on tightening Covid restrictions

Sindh Chief Minister Murad Ali Shah on Thursday said that if the National Command and Operation Centre (NCOC) did not take decisions on further tightening coronavirus restrictions, especially a two-week ban on inter-city transport, then "we will take decisions ourselves".

Speaking during the inauguration ceremony of the Institute of Animal Health in Korangi, Karachi, Shah said Pakistan was "saved" from a coronavirus wave as bad as India's last year because it shut down domestic travel through airplanes and trains.

He said he had recently recommended to the NCOC that inter-city transport be shut down for two weeks and the minister in charge of the forum — Asad Umar — assured him that it would be considered.

Referring to reports yesterday that Prime Minister Imran Khan had rejected the Sindh government's suggestion for a complete lockdown, Shah said the premier "has his own stance".

"I reminded him (Prime Minister Imran) that one year ago, the Sindh government had taken the initiative for which we had to listen to a lot [of criticism]. If it was such a bad idea, why did the other three provinces and Centre follow it?" he questioned.

He credited those "initial steps" for the country being "saved" from the coronavirus.

Referring to last year's [criticism of India's strict lockdown](#), he said the neighbouring country had not imposed a curfew initially.

"The mistake that India made was to tell everyone to go home. Millions of people went towards their villages in trains and buses," he said, adding that as a result, the people "infected each other and their villages".

However, Pakistan was saved from a similar situation because it shut down domestic travel, he said.

The chief minister said he gave the same recommendation to the NCOC this time as well, clarifying that his suggestion was not rejected.

"The NCOC said it will consider it."

Shah said he has called a meeting of the provincial task force on coronavirus. "If the NCOC does not take decisions, we will take them ourselves," he emphasised.

He said he had also recommended to the NCOC to open registrations for the Covid-19 vaccinations to people of all ages so the country's demand could be estimated.

"Unfortunately, our country is among the bottom-most in terms of vaccination in the region. Bangladesh, India, even Afghanistan — all are ahead of us," he claimed.

"I have asked them to make our vaccination campaign more aggressive," he said, adding that the NCOC "appreciated" the recommendation and said it would consider it.

Shah said there were areas in the country that had a positivity rate of 25 per cent while in other areas, the positivity rate was lower than 1pc. "If people gather [in areas with low positivity rates], it will not spread as much," he added.

However, inter-city travel could worsen the situation, Shah said.

Sindh to buy vaccines directly from China

Earlier this week, Sindh Health Minister Dr Azra Fazal Pechuho said the provincial government would buy Cansino's coronavirus vaccines directly from China after the federal government allowed provinces to purchase jabs independently.

She shared that Rs500 million had been allocated by the Sindh government for the purchase of the single-dose vaccine.

"We want the most number of people to be vaccinated but our vaccination process is slow because we are receiving too few doses. This is why we are trying to administer all the doses we are receiving," she said.

(By Hafeez Tunio The Express Tribune, 04, 02/04/2021)

Dangerous third wave and charter of unity against Covid-19

The third wave of Covid-19 is rising with a dangerous trend. Mass awareness campaigns by the government, media and private sector are important but insufficient to stop the violation of SOPs. The lives and livelihoods of millions of people are at risk and to prevent a catastrophic scenario Pakistan needs urgent reinvigoration at the national and local levels to persuade and motivate people to adhere to SOPs and to embrace the vaccination programme. Political parties exercise huge influence at the national and local levels. Although there are deep political differences, the pandemic situation stipulates political parties to come together for a national charter of unity against the coronavirus.

On March 27, the national positivity rate of tested samples reached over 10% with a total of 4,468 confirmed cases. The National Command and Operation Centre (NCOC) reported 2,842 patients in critical condition. Hospitals are already under pressure. With this trend left unchecked, the number of critical patients increased to over 3,300 in a week — the maximum number recorded in June 2020.

The most importance defence against this pandemic is adherence to SOPs such as wearing masks, social distancing, washing hands, avoid touching nose, mouth and eyes. Despite this life-threatening situation, people continue to disregard SOPs in the streets, markets, malls, and public gatherings. Besides, people show a weak response against the Covid-19 vaccination drive.

As part of the proposed national charter of unity against Covid-19, imagine all political leaders and spokespersons from the government and opposition parties agreeing to start their routine media talks and public speeches by pointing towards the seriousness of the coronavirus and the importance of wearing masks, observing social distancing, and embracing the vaccination drive. To further emphasise on these points, imagine if the message is repeated at the end of the speeches too. Needless to mention, leaders too have to demonstrate the practical adherence to SOPs.

Political and religious parties can play a significant role in convincing people to follow SOPs. In a democracy, political parties are supposed to have a close association with the common people. National and provincial leaders have a significant following and admiration. People respect them and listen to their words. After all, these representatives have received millions of votes and have millions of followers on their social media accounts.

According to a recent Covid-19 specific research published in BMG Global, public messages of political leaders from the government have practical implications for building trust and in creating an effective response within a country. This research has covered 20 developed and developing countries.

Political leaders also enjoy millions of followers on social media. As part of the proposed charter of unity against the coronavirus they may also agree to start their regular social media messages with coronavirus related reminders. A research revealed that the content shared by political leaders on Twitter exerts a high level of influence on the attitude of their followers.

In addition to the national level responsibilities of political leaders' local level substantiation is also crucial. Research shows that weak local implementation was a major challenge during the two major recent emergencies Pakistan faced in the form of the earthquake in 2005 and the historic floods of 2010.

International experiences also prove that the common people have an attitude of negligence even on matters that are extremely important for them, but the situation could be reversed through a persistent follow up at the personal level. In the United States, the government had introduced a tax credit scheme for poverty-stricken families. Nevertheless, many families had ignored claiming those tax benefits. Research led by the Noble laureate economist Professor Abhijit Banerji revealed the reason. The randomised control trials had discovered that reminders on a personal level, persuasion and encouragement increased the take-up of tax benefits by manifolds.

Therefore, the proposed charter of unity against coronavirus needs to go deep down to the local level. The local political leaders must demonstrate a practical example of following SOPs and undergoing vaccination to persuade the common people during daily interactions in their constituencies. Last year, a leaked phone call by Mr Nadeem Afzal Chan, the then spokesperson for Prime Minister Imran Khan, went viral and received national attention. Chan, in his local Punjabi dialect told his staff about the seriousness of the coronavirus and instructed him to stop all public movement and activities.

These local level efforts can also include imams of mosques who meet many people five times a day and enjoy significant respect and influence in the community. Additionally, teachers at the local level and staff of basic health units can be given responsibility to persuade people to save their lives and those of their loved ones. NGOs can also play a crucial role in awareness raising and implementation of SOPs.

Pakistan Day has been celebrated with national zeal and unity in the midst of a pandemic. Now we need to convert that zeal and unity into a national fight against the pandemic. The clock is ticking and the alarming trend of the third wave shows that this fight is a race against time.

(By Aftab Alam Khan The Express Tribune, 15, 03/04/2021)

How to deal with the third wave of the pandemic?

With around 15,000 deaths in the last one year and infection rate of more than 10%, the third wave of Covid-19 is causing lethal implications in Pakistan, particularly in Punjab and K-P. The National Command and Operation Center (NCOC) which acts as a watchdog on pandemic has released shocking figures reflecting 672,931 cases, 605,274 recovered patients and 3,303 critical cases with meager testing of 1,024,737 for 220 million people in the country. Likewise, the Ministry of National Health Services is also active in curbing the pandemic but has its own limitations.

Exactly a year ago, during the first wave of the pandemic in Pakistan, the government had to enforce lockdown all over the country by closing businesses, restaurants, hotels, railways, airlines, and inter-city and inter-provincial transport. As a result, millions of people were stranded and had to wait till June when they were able to gradually travel and other restrictions were removed. In order to help those who lost their jobs and had to suffer because of the closure of their businesses, the government paid billions of rupees as a relief measure. But, that was during the first wave which was not as lethal as the third one. This time, the PM has made it clear that despite the destructive nature of the third wave of Covid-19, it will not be possible to close businesses or provide financial support like it was done during the first wave. That the only way to save people from the raging wave of the pandemic is to wear the face mask and take precautions like maintaining social distance.

One needs to examine a few things critically: why are the people of Pakistan, to a large extent, not careful while dealing with the pandemic crisis? How can the elites of this country take the ownership of an issue which is critical to human lives? Why is it so that neither the government nor the people possess the right kind of skills to manage the crisis? Why did the NCOC and the Ministry of National Health Services fail to arrange sufficient quantum of vaccines? These are the questions that require plausible answers because at stake are the lives of the masses and the national economy. Chinese vaccines, which were provided free of cost, have almost depleted and despite claims made by those holding responsible positions, no serious effort was made to produce vaccine at the local level. As a result, the acute shortage of vaccines along with the alarming rise in the infection rate tends to further augment pandemic crisis.

How to deal with the pandemic's third wave would require a three-pronged strategy at the state and societal level.

First, a responsible attitude needs to be adopted by maintaining SOPs in the form of keeping adequate social distance and wearing the face mask. Unfortunately, a year has passed but there is no proper awareness nor is there responsibility on the part of people to defeat the deadly virus by bringing a change in their way of life. Paradoxically, like in some other countries, large numbers of people in Pakistan express their lack of faith in the very existence of the virus and call it a conspiracy hatched by multinational pharmaceutical companies to mint money. They also insist that in a population of 220 million, hardly a couple of hundred thousand people have been infected, and that too in an artificial manner with the sole aim to claim foreign funding. Those who deny the existence of the pandemic also blame state authorities for imposing unnecessary restrictions on the movement of people in order to prevent opposition parties to stage rallies and bring out processions. With such a mindset, it becomes very difficult to deal with the pandemic crisis. In view of the ground realities reflecting poverty and social backwardness, it becomes rather impossible to impose a total lockdown or enforce social distancing in areas which are thickly populated.

Second, unless a crisis management mechanism is established on a permanent basis, people will get panicky. When panic, lack of responsibility, planning and non-seriousness determine the mindset of those who matter, Pakistan will continue to face the kind of crisis that is happening today. Arrangements like NCOC can only be effective when there is skill and competence. A year was wasted and no effort was made to produce vaccine locally or arrange sufficient quantum of vaccine doses, ventilators and oxygen beds which

could have helped in effectively dealing with the third wave of the pandemic. Now, the situation on the ground is dangerous as even children are vulnerable to Covid-19 and they are infecting their elders. There are now 28 hotspots in different cities of Pakistan where the infection rate is more than 8% and the government is enforcing lockdown from April 1 for around two weeks. As a result, one fears a humanitarian crisis, particularly in Punjab, K-P and Islamabad, if the pandemic becomes deadlier.

Third, the political tug of war between the government and the opposition PDM and also within the PDM between reflects a total indifference on the part of our political class to formulate a joint strategy to deal with the third wave of the pandemic. With this indifference to the crisis, how can one blame others for the non-availability of a vaccine, ventilators and oxygen beds? Political parties, whether in the government or in the opposition, are least interested in focusing on how to effectively deal with the third wave that is causing havoc in major cities and towns of Pakistan. For them power politics and expediency seem to be more important than the lives of the people of Pakistan. In most cases, political parties are themselves least interested in complying with social distancing and asking their supporters to wear the face mask in various gatherings. Recently, a public meeting of the Jamaat-e-Islami was held in Liaquat Bagh Rawalpindi, in sheer disregard to the basic Covid prevention requirements. When the local district administration served a notice on the Jamaat, they pointed out that a while ago the PTI was allowed to hold a public meeting near the same place. It is yet to be seen whether or not the restrictions ordered by the NCOC in 28 cities with hotspots are taken seriously by people. The Deputy Commissioner of Islamabad the other day visited Sunday bazaar and other places where he reprimanded people for not wearing the face mask and maintaining necessary social distance. Some of the buyers were fined, but the absence of stricter measures also caused a surge in positive cases.

In the light of these facts, one hardly sees the likelihood of a change in the mindset of a vast majority of people in our country who continue to doubt the very existence of the coronavirus and call it a fraud or a conspiracy. It thus seems impossible for us to deal with the pandemic that rages on and on.

(By Mr Moonis Ahmar The Express Tribune, 15, 04/04/2021)

Sindh to recruit 900 health workers, revive isolation centres to meet third wave challenge

As the third wave of the coronavirus pandemic goes on the rampage in many parts of the country, authorities in Sindh are preparing themselves for the upcoming challenge in case of a rise in the number of Covid-19 patients in the province by recruiting some 900 health workers and putting isolation centres at standby, officials said on Saturday.

They said major isolation centres set up during the first wave of the pandemic were being revived and they could become operational on very short notice.

"The Sindh government in September 2020 decided to close its two field isolation centres, set up in the wake of Covid-19 emergency situation, at the Expo Centre and PAF Museum in the city," said an official. "These centres were closed as the number of Covid-19 patients had decreased and there was enough space available in the province's hospitals to treat the patients there."

"Now, keeping in view the likely impact of the third wave on Sindh, the provincial government has put these centres on standby so that these could be restored anytime on a two-day notice," the official added.

The provincial govt has ordered procurement of two million doses of Chinese vaccine Convidecia

The 1,200-bed Expo Centre field isolation facility was inaugurated in April 2020 aimed at serving as the cornerstone of the government's efforts against the spread of the coronavirus. However, only a fraction of the Expo Centre field isolation centre was utilised owing to a lower number of Covid-19 patients in the city requiring isolation at such dedicated makeshift facilities.

The official said the centre had a 240-bed high-dependency unit and the number of beds at the centre was increased gradually. The same measures, he said, were also decided for other major urban centres of the province.

"So far, no case of UK Covid-19 variant has been reported in Sindh this year. But, we are preparing for any upcoming challenge," he said, adding that the Sindh government had also enhanced the capacity of its existing human resources and some 1,000 health workers had been added to the system.

"Similarly, the medical superintendents of public hospitals in all Sindh districts have been authorised to recruit health workers on a contractual basis in case of any immediate requirement," he added.

Sindh orders 2m doses of Chinese vaccine

The Sindh government had decided to engage Chinese vaccine manufacturer for direct import and allocated a sum of Rs500 million after the federal government allowed the provinces for direct procurement.

On Friday, Sindh Information Minister Syed Nasir Hussain Shah had told a press conference that the provincial government had placed an order for two million doses of Chinese vaccine Convidecia.

He said that the government would buy the vaccine by slashing development and other expenditures in order to protect the people of Sindh from Covid-19.

(By Imran Ayub Dawn, 13, 04/04/2021)

WHO asks Sindh govt to enhance Covid-19 testing capacity

Although no case of UK Covid-19 variant has been reported so far this year in Sindh, which is conducting highest number of tests, the World Health Organisation has recommended the provincial health system to increase its testing capacity and also develop the capacity to test Variants of Concern (VoC) including the B.1.1.7, which are being reported in other parts of the country.

A WHO delegation led by its country representative in Pakistan Dr Palitha Mahipala Gunarathna and Dr Sara Salman had on Friday attended the meeting of the provincial Covid-19 task force at the Chief Minister's House in Karachi to review the cocoronavirus situation in the province.

The WHO representatives recommended that public health measures such as mask wearing, hand hygiene and social distancing should be strictly implemented in order to counter the third wave of the pandemic.

"The WHO is supporting federal and provincial governments for strengthening the emergency response and healthcare delivery system in response to the Covid-19 pandemic," said a WHO-Pakistan statement while extending its support to counter the disease.

The global health body assures its support at federal and provincial levels for detection of identified VOC

"In its recommendations to the stakeholders, WHO requested the provincial government to increase its testing capacity, develop capacity to test for VOC, and enforce public health measures such as mask wearing, hand hygiene, and social distancing in order to counter the third wave of the Covid-19," it added.

The Sindh health officials and sources, meanwhile, also shared the inputs of the WHO in Pakistan regarding the VOC including the UK variant that would spread rapidly if its chain was not broken.

"The WHO experts pointed out that from March 26 to this date on average 55 deaths per day have been recorded," said a health official while referring to the data shared by the WHO.

"They showed trust that Pakistan has the capacity for VOC detection through targeted polymerase chain reaction (PCR) for S gene or partial and whole genome sequencing methods. They referred to the Pakistan situation where the country has reported an increased number of VoC (B.1.1.7 of UK origin) since January 2021."

They further said the WHO delegation recommended a strategy for variant monitoring and tracking the disease and assured their support at national and provincial levels for detection of identified VOC and strengthening capacity for early identification of emerging new variants through whole genome sequencing (WGS).

Equipment given to five hospitals

Meanwhile, the WHO officials also handed over to the Sindh health department three state-of-the-art incinerators, a nutrition stabilisation centre (NSC), other equipment and supplies as part of its patient safety friendly hospital initiative.,

Dr Mahipala of the WHO gave the medical equipment to Health Minister Dr Azra Fazal Pechuho for five hospitals.

The hospitals include the Government Lyari General Hospital, Karachi, Liaquat Hospital, Jamshoro, Chandka Medical College Hospital, Larkana, District Headquarters Hospital, Mithi, Tharparkar and Khairpur Medical College.

The ceremony was attended by Qasim Soomro, parliamentary secretary of health, Sindh, Health Secretary Dr Kazim Jatoti, Dr Irshad Memon, director general of the health services, and Dr Sahib Jan Badar, programme coordinator of the accelerated action plan.

"WHO as part of its commitment to the people of Pakistan, supports the Health System Strengthening (HSS); Infection Prevention and Control (IPC); Waste Management, maternal newborn and child health services, nutrition services and patient safety friendly hospital framework in Sindh" said a WHO statement.

(By Imran Ayub Dawn, 13, 05/04/2021)

Traders vow to continue protest against Covid-related restrictions on Karachi markets

Traders and businessmen took to the streets and staged a protest demonstration outside the Karachi Press Club on Tuesday after their multiple meetings with the authorities failed to reach an agreement. They vowed to continue their campaign against the fresh restrictions on business hours imposed by the government amid growing cases of the coronavirus.

A large number of traders riding motorbikes, cars and vans took out a rally from Liaquatabad and staged a demonstration outside the KPC, demanding the withdrawal of fresh restrictions.

"The Sindh government had earlier issued a notification ordering all business centres to be closed by 8pm, effective from April 6, 2021," said Sharjeel Gopalani, head of the All City Tajir Ittehad. "The traders have unanimously rejected the Sindh government's coronavirus-related order to close markets by 8pm — in line with their stance last year when they protested against shutting the city's bazaars."

He said if the government wanted to keep businesses closed twice a week, it should allow round-the-clock trading during the five other days.

'Last year they suffered huge losses and many were forced to close shop forever'

"We would soon announce a comprehensive plan of protest across the city. The traders last year suffered huge losses and many were forced to close down forever. We cannot afford the same situation this year again," he added.

The Sindh government only on Monday had announced that the businesses across Sindh would remain closed on Fridays and Sundays following an increase in the country's coronavirus infections.

"Keeping in view the feedback from field formations on the implementation of two safe days per week where different businesses within the same locality/premises are observing different safe days in a week and, therefore, the need to avoid confusion Friday and Sunday are declared as safe days for all businesses except essential services," the notification said.

The traders appealed to the federal government as well to review its plan of restrictions on business hours and warned that the situation could turn ugly if the local administration continued to seal their businesses and thus deprive them of their livelihood.

Senior leader of the Muttahida Qaumi Movement-Pakistan Mohammad Hussain also attended the traders' protest and demanded that the Sindh government review its policy.

The traders urged the government to review the fresh restrictions after the first 10 days of the holy month of Ramazan, which is due to start next week.

"We have proposed to the government to lift that restriction [two-day weekly closure] after 10th Ramazan. We hope to hear positively from them soon. Otherwise, it would not be in our control to stop protests by the traders," said Atiq Meer of the Karachi Tajir Ittehad. (By Imran Ayub Dawn, 13, 07/04/2021)

Unequal vaccine distribution

It is in times of crisis that we often see the best — or worst — of humanity. In this regard, the pandemic has put the world's compassion to test. The rate at which rich nations are buying up vaccines from manufacturers that have a finite supply has been described by the WHO chief as "grotesque". This week, as the body missed its target of seeing vaccines being administered in every country on the 100th day of 2021, Tedros Adhanom once again called out the shocking imbalance in vaccine distribution between rich and poor countries. He also noted that most countries do not have enough vaccines to cover their health workers or vulnerable groups. Of the over 730m vaccines administered all over the world, some 49pc have been injected in rich countries. In contrast, a mere 0.1pc have been administered in the 29 lowest-income countries.

The fact that developing countries are struggling to vaccinate even at-risk segments of the population, while rich nations administer jabs to even young, low-risk citizens is unacceptable. Israel, which has been lauded for its efficient vaccine roll-out and marvellous Covid-19 recovery, has done so at the expense of the Palestinians, who were deprived of vaccinations simply because Prime Minister Benjamin Netanyahu wished to send doses to countries that had agreed to move their embassies to Jerusalem. Though inequalities have always existed, the pandemic has underscored how self-serving interests and discriminatory policies have further marginalised vulnerable segments. Without equitable vaccine distribution, those in poor countries will suffer greatly in the long run. In many of these countries, life expectancy is low and infant mortality high. These factors coupled with low vaccination rates mean these countries will take years to recover. Economically strong countries ought to aid vaccine procurement and disbursement. Though many leaders in countries with high vaccination rates are congratulating themselves for 'a job well done', they ought to realise they are creating a false sense of security. Covid-19 mutations will continue to be a threat, until the majority of the world is vaccinated. (By Editorial Dawn, 06, 11/04/2021)

'Govt in talks with WB, ADB to get Covid-19 jabs for 23.5m people'

The ministry of National Health Services has informed the Sindh High Court that a cabinet committee for Covid-19 vaccine procurement has been set up and an amount of \$150 million is also allocated.

In its reply filed in response to two petitions seeking vaccination of people, the ministry submitted that successful negotiations had also been conducted with the World Bank (WB) and Asian Development Bank (ADB) to manage resources for procurement of vaccines for 10 million and 13.5m people, respectively.

In the meanwhile, negotiations were also under way to initiate shared local production with a Chinese firm (CanSinoBio) through collaboration with the National Institute of Health, it maintained.

The ministry further submitted that 1.5m doses of Sinopharm vaccine had been received through a grant and 1m doses through procurement and 60,000 doses of CanSinoBio were also procured.

It said that 5m doses each of Sinopharm would be arriving during this month and 3m doses of CanSinoBio were likely to be received during the current month.

An independent expert committee, under the auspices of the Drug Regulatory Authority of Pakistan, would ensure that only safe and efficacious vaccines were imported for different age groups, it added.

The ministry further said that Pakistan was going to benefit from in-kind assistance from Gavi's Covax facility for vaccinating around 45m people.

The bench headed by Justice Mohammad Ali Mazhar adjourned the hearing for three weeks after an assistant attorney general sought time to file comments in the third petition about Covid-19 vaccination.

Restraining order issued

Another division bench issued a restraining order not to create any third-party interest in a housing scheme being reportedly planned on the premises of the Sir Henry Holland Mission Eye Hospital in Shikarpur.

The bench headed by Justice Syed Hasan Azhar Rizvi also directed the Church Missionary Trust Association (CMTA) to file comments and enclose the title documents, if any, in its possession within 15 days.

Petitioner Shahab Usto submitted that the hospital was built by missionaries in 1910 on land measuring 25,068 square yards and it had been providing high-quality free medical services not only to the locals but also to the people from other part of the province. However, the operation of the British-era health facility had been suspended a few years ago, he added.

He said that the CMTA had illegally transferred the land in question to a man allegedly on a fake general power of attorney to launch a housing scheme and the layout plan was also illegally approved by the Sindh Building Control Authority.
(By Ishaq Tanoli Dawn, 13, 08/04/2021)

Plan to vaccinate all citizens after Eid: minister

As the country recorded the highest number of coronavirus cases in a single day since June last year, Minister for Planning, Development and Special Initiatives Asad Umar said on Thursday that the government planned to open registration for Covid-19 vaccination for all citizens after Eid.

The number of Covid-19 cases, which had surpassed the figure of 5,000 last week, declined to around 4,000 a day for two days. However, data shared on Thursday showed that 5,329 cases were reported in a single day, the highest figure recorded in the last almost 10 months. In June 2020, about 5,325 cases were reported.

Speaking to senior journalists, Asad Umar termed the next five to six weeks critical for the ongoing third wave of the virus in Pakistan. He said that so far 14,000 people had received vaccine through the private sector, while 1.1 million were inoculated as part of the government campaign.

The minister said China was Pakistan's "primary source" for vaccines for now, adding that Cansino Covid-19 vaccine would also be available in the country after Eid. "We will be able to vaccinate more than 125,000 people per day after Eid."

Highest number of Covid-19 cases in a day since June last year

Mr Umar noted with concern that the current number of critical care patients in the country was higher than that during the first coronavirus wave. "Strict enforcement of SOPs (standard operating procedures) can bring down the rising rate of infection," he stressed.

According to data released by the National Command and Operation Centre (NCOC), 5,329 Covid-19 cases and 98 deaths were reported over the past 24 hours. The total number of active cases stood at 66,994 on Thursday. The data showed that 467 ventilators were in use across the country — 84 per cent of those in Gujranwala, 81pc in Multan, 75pc in Lahore and 58pc in Islamabad. About 85pc oxygenated beds were occupied in Gujranwala, 83pc in Peshawar, 73pc in Gujrat and 63pc in Swat.

100 countries get vaccine

International alliance Covax, which has pledged to provide free Covid-19 vaccine to 20 per cent population of Pakistan, said on Thursday that it had provided vaccines to 100 countries. Pakistan is not included in the list of 100 countries which have received more than 38 million doses of vaccines. However, Covax expects to deliver doses to all participating countries that have requested for vaccines, including Pakistan, in the first half of the year.

The World Health Organisation (WHO) in a statement said: "Covax has now delivered more than 38 million doses across six continents, supplied by three manufacturers, AstraZeneca, Pfizer-BioNTech and Serum Institute of India. Of the over 100 economies reached, 61 are among the 92 lower-income economies receiving vaccines funded through the Gavi/Covax Advance Market Commitment (AMC)," it stated.

Covax has been set up by the Global Alliance for Vaccines and Immunisation (Gavi), Coalition for Epidemic Preparedness Innovations (CEPI) and WHO in April last year.

In February, the NCOC had announced that Pakistan would receive 5.6m doses from Covax by the end of March, with 2.8m doses expected in the first week and another 2.8m doses by the second week of March. It had claimed that overall 17.1m doses would reach Pakistan by the end of June this year.

However, delivery was delayed due to high demand of vaccines in the countries where these were being produced.

"Despite reduced supply availability in March and April — the result of vaccine manufacturers scaling and optimising their production processes in the early phase of the rollout, as well as increased demand for Covid-19 vaccines in India — Covax expects to deliver doses to all participating economies that have requested vaccines in the first half of the year," the WHO statement said.
(By Ikram Junaidi Dawn, 09/04/2021)

Study finds Brazil, SA, UK variants of Covid-19 in Karachi

The United Kingdom, South Africa and Brazil variants of the coronavirus might be responsible for the current severe third wave of Covid-19 in Pakistan, says a recent study.

The study, which analysed 3,501 positive samples, found that these variants were responsible for causing 54 per cent of new Covid-19 infections reported from December 2020 to February 2021 in Karachi.

According to the study, the positivity ratio in the months of September to November 2020 was 1.538pc, which jumped to 7.6pc in December 2020 to February 2021.

This dramatic rise in cases, the study shows, clearly indicates importation of cases (to Pakistan) from the countries where these viral strains were spreading before and during November 2020.

"This is the most worrisome finding of the study. It means that our Covid-19-specific monitoring and screening system at the airports is highly flawed. In fact, it seems that no monitoring is being carried out at all to detect Covid-19 patients," said Dr Rafiq Khanani, a senior pathologist and president of the Infection Control Society of Pakistan.

'Our fight against the coronavirus will never end if we continue to import its new variants'

Dr Khanani conducted the study with colleagues Dr Muhammad Hanif and Dr Adnan Dinar, both molecular biologists. The study has been accepted for publication in an international journal.

"Unmonitored international flights and no quarantine on arrival in Pakistan from any country seemed to have led to a rapid introduction of the variants in Pakistan," Dr Khanani explained, adding that the spread of the pandemic globally provided an opportunity to variable strain types to thrive.

The analysis found the UK variant in 944 samples and Brazil and South Africa variants (together) in 934 samples. There were 1,623 cases of old viral infection.

Limited vaccine efficacy

He also raised concern over the situation in Punjab and Khyber Pakhtunkhwa, badly hit by the third wave of the coronavirus, and said the situation was likely to be more serious in those parts of the country (in terms of having more variant types) in coming days.

"This would have a direct impact on the vaccine's efficacy, particularly in the case of the South Africa variant. Vaccines haven't been found very effective against this specific variant. Second, our fight against the coronavirus will never end if we continue to import its new variants," he said, calling for stringent monitoring at airports and ensuring compliance with isolation and quarantine protocols in case of a positive case.

About Brazil, South Africa and UK variants, Dr Khanani said they were the cause of concern globally because of their ability to transmit rapidly, causing a more severe disease, involving younger age groups and relatively infecting more females, and they could also be responsible for escape from immune responses.

"Our study also showed that these variants affect women and younger age groups more, if their pattern is compared to the previous data of coronavirus outbreak," he said, adding that the team only analysed lab samples and could not comment on disease severity since it had no interaction with patients.

Meanwhile, experts at Karachi University's National Centre for Virology have also detected the South Africa variant with the UK variant in the samples tested at the facility.

"Around 50 per cent of the positive cases tested at the facility involved the UK variant while 25 per cent were the South Africa variant. There is a need for genomic surveillance of SARS-CoV-2 to timely identify and contain the rapidly emerging new strains of the virus," said Prof Mohammad Iqbal Choudhary, director of the International Centre for Chemical and Biological Sciences at the KU.
(By Faiza Ilyas Dawn, 13, 16/04/2021)

Street crimes register alarming rise in Karachi in Jan-March period

As law enforcement agencies count successes in operation against terrorists, banned outfits and militant wings of political and religious parties to restore peace in Karachi, the city is facing an alarming increase in the menace of street crime.

During the first quarter of the current year, all records of the same period last year stood broken; and more than 30 people were killed while resisting armed robberies and mugging attempts.

During the first three months of 2021, Karachiites lost millions of rupees in armed robberies and snatching at gunpoint with no district of the city remaining safe from the reach of criminals.

The data compiled by security administration and gathered by Dawn shows that despite a growing number of cases and widespread coverage of street crime by the mainstream media and rising number of people's complaints, such incidents witnessed an upward trend in all the three months.

5,982 cell phones, 1,055 motorbikes and 477 cars snatched in the city from January to March

Among other acts of robbery and mugging, a rise in the number of cell phone and motorbike snatching at gunpoint — key indicators of the street crime — shows the fast loosening grip of the police and law enforcement agencies when it comes to maintaining writ of the state.

The figures suggest that between January and March, 1,055 motorbikes were snatched at gunpoint in different areas of the city and another 10,916 two-wheelers were stolen in various neighbourhoods.

During the same period in 2020, 525 motorbikes were stanchd and 7,414 were stolen, showing a growth in the criminal trend at a staggering pace.

Similarly, 5,982 cell phones were snatched in different parts of the city during the first three months of 2021, breaking the record of the last year's first quarter when 5,105 people lost their mobile phones to armed robbers.

The number of snatching and theft of four-wheelers remained high during the first three months of 2021 as a total of 477 cases were reported compared to 472 during the same period last year.

Re-emergence of kidnapping for ransom

The data shows another dangerous criminal trend re-emerging in the city during the first three months of 2021 when the Karachi police registered five cases of kidnapping for ransom.

No such case was reported during the entire first quarter of the last year.

The first quarter of 2021 also witnessed a bank robbery when armed men stormed a private bank branch in New Karachi in March, held security guards at gunpoint and walked off with over Rs1 million.

34 killed by robbers upon resistance Amid the rise in street crime, there appeared no respite in the killing of innocent people during armed robberies and mugging attempts.

A total of 98 people were murdered during the first three months of 2021 and official data says 34 of them were killed while putting resistance to armed bandits.

In some neighbourhoods, street crime has become so regular a feature that it started testing patience of the area people.

Only a few days ago, in Orangi Town an armed mugging attempt led to the killing of a young man and enraged residents, who blamed the police for failing to establish its writ in the densely populated neighbourhood and took to the street to register a protest.

They said four armed men riding two motorbikes snatched cash and valuables from an elderly person, later identified as Qutubuddin, and when he tried to overpower one of them and shouted for help the muggers thrashed him badly and fired multiple shots randomly to keep onlookers people away. One of the bullets hit 38-year-old Rashid Ishtiaq in the chest and he died on the spot. The bandits rode away but the situation sparked anger among the area people who took to the street and blocked the main road chanting slogans against the police and local administration.

"It has become a routine in this area," said Shamsul Islam, an area shopkeeper. "The armed men almost daily rob people in broad daylight. The police have been approached several times and after every incident they increase patrolling for a day or two and then disappear. Not a single arrest has been made in this regard for months."

The key road link remained blocked for a couple of hours before the authorities intervened and managed to restore the traffic flow after dispersing the protesters assuring them of strong measures to curb street crime.

(By Newspaper's Staff Reporter 13, 19/04/2021)

Call for spurring corona vaccination to achieve target of 70pc inoculation

Amid growing number of coronavirus cases, doctors and health experts on Friday expressed serious reservation over slow pace of vaccination and urged the government to expedite the process, open the vaccination centres after iftar and involve private sector as well so that at least 70 per cent of the population could be inoculated against the virus to come out of the Covid-19 threat.

The senior doctors, health experts and medical scientists wondered over the attitude of the government and almost all segments of society in Pakistan as the country was being pushed to one of its worst health crisis because of the regulatory bodies' failure to implement the standard operating procedures (SOPs) and irresponsible behaviour being shown by the public despite the growing number of Covid-19 cases.

The experts warned that if the people from all walks of life and traders failed to follow SOPs and continue ignoring the warnings of health experts and health professionals, there would be no other option left but a complete lockdown to contain the spread of coronavirus and save the health system from total collapse.

The warning was issued by the health experts associated with the Pakistan Islamic Medical Association (PIMA), who claimed that hundreds of doctors and paramedics had lost their lives due to Covid-19 in the country and it would be almost impossible to convince the serving ones to continue their job amid serious ignorance and violation of SOPs by the people.

Lockdown imminent in the face of irresponsible public behaviour, health experts warn

"We need to understand that vaccination is the only and key exercise that can save our country to a large extent from this global challenge," said Dr Abdullah Muttaqi, president of the PIMA while addressing a press conference at the Karachi Press Club with his colleagues.

"We are facing another wave of Covid-19. We are running out of space and beds at our leading health facilities in other parts of the country. In this situation we need two-pronged strategy — fast-paced vaccination and implementation of SOPs."

Prof Sohail Akhtar, a prominent pulmonologist associated with Indus Health Network (IHN) and former president of PIMA said that the challenge of Covid-19 pandemic was so huge that countries like Pakistan could not take it up alone and ultimately they would have to take private sector on board to achieve the desired results.

"Science proves that we can feel safe from coronavirus only when 70 per cent of our population gets vaccinated," he said. "This is only possible through massive vaccination campaign. We have witnessed that the vaccination has slowed down in Ramazan but it should continue uninterrupted and the vaccination centres should be opened even after iftar. Similarly, the private sector should also be invited to assist in this regard. Several welfare organisations, including Al-Khidmat Foundation, have offered their services and the government must consider them seriously."

(By Newspaper's Staff Reporter Dawn, 14, 25/04/2021)

Sindh seeks deployment of army to ensure Covid SOPs' adherence

Following the National Coordination Committee's (NCC) decision, the Sindh government has written to the federal government, it emerged on Sunday, seeking the deployment of army personnel in the province to ensure adherence to Covid-19 precautionary SOPs.

"The services of armed forces of Pakistan in aid of civil power are required under Article 245 of the Constitution of Pakistan," read a letter penned by the home department to the federal interior ministry.

"Exact nature of deployment of troops and equipment will be communicated in due course of time after carrying out requisite assessment in consultation with [the] quarters concerned," the communique added.

The letter further stated that, "It is, therefore, requested to kindly accord approval for deployment of Armed Forces in aid of Civil Power in the Province of Sindh."

The Pakistan Army was called out on April 23 in aid of civil administration to ensure implementation of precautionary measures against the rampaging novel coronavirus as the prime minister warned the government might impose lockdown in major cities if the spread of the deadly contagion is not contained.

The ominous warning came as Covid-19 – the deadly respiratory disease caused by the novel coronavirus – appeared to have spiraled out of control in India where the healthcare system is staggering amid shortage of oxygen and medicines while crematoriums are being overwhelmed with deluges of bodies.

"If the situation worsens here like it has worsened in India, then we will have to impose lockdowns in cities – something we do not want and cannot afford because, in that case the poor – labourers and the daily-wagers – will suffer the most," the premier had said during the address to the nation. He added that he had been resisting calls from his aides who advised him to immediately impose lockdowns in the major cities.

The premier regretted growing disregard for the SOPs which, if followed in letter and spirit, would help the government contain the highly contagious virus. He called upon the nation to show the same resilience, commitment and sense of responsibility that it had shown during the first wave of the pandemic.

(By Newspaper's Staff Reporter The Express Tribune, 04, 26/04/2021)

Sindh unlikely to get first shipment of 2m CanSinoBio doses for several weeks

As 500,000 more doses of Sinopharm vaccine arrived from China, the Sindh government's plan to import 10 million doses from the neighbouring country may take another few weeks to materialise as first such shipment is likely to arrive in the third week of May, officials and sources said on Sunday.

A senior Sindh government official confirmed that the authorities had formally placed the order for 10m doses of the vaccine developed by CanSino Biologics but there were slim chances of an early delivery because of a huge demand.

In a recent communication between the two sides, it emerged that the order would be delivered in phases and the first shipment was not likely before the second or third week of the next month.

“The two sides are in constant touch with each other,” Sindh CM’s Adviser Barrister Murtaza Wahab, who is also the provincial government’s spokesman, told Dawn. “The Sindh government is committed to execute its plan and make the vaccine available at the earliest. But the matter is linked with so many other things. The global demand is huge and many orders from different parts of the world have already lined up. We have been informed recently that we would be able to get our first shipment by the second or third week of May. In the first phase, we expect the shipment of two million doses.”

‘Facility at Ojha campus of DUHS available to store 10m doses’

The Sindh government had earlier this month announced its plan to order 10m doses of Chinese company CanSino Biologics’ Covid-19 vaccine and in an immediate response it had sent a letter of intent to the AJM Pharma, which is the representative company for the Chinese vaccine in Pakistan, for its required doses of the vaccines.

Later, the Sindh government allocated Rs1.5 billion for the acquisition of the vaccine and a formal order was placed after the federal government allowed provinces to import the jabs independently.

Plan to store vaccines after import

Meanwhile, the provincial health department has taken up the task to preserve the huge quantity of the vaccines.

Health officials along with experts and medical scientists spotted several government facilities and few of them have been marked to undertake the job. An official sounded confident when asked about the province’s capacity and capability to properly store the stocks of the Covid-19 vaccine.

“We have a facility available to us on the Ojha campus of the Dow University of Health Sciences which can be used for this purpose,” said Qasim Soomro, a PPP MPA from Tharparkar, who is one of the members of the Provincial Vaccine Administration Cell headed by the Sindh health secretary.

“We are taking every possible step to accomplish this huge task and without any hiccups. With a team of experts and officials of the health department, a dedicated effort is being made to utilise all available resources for a successful vaccination programme in all Sindh districts.”

He said currently the vaccination centres in Sindh were operating successfully and with the passage of time the number of such facilities would be increased to cater to a maximum number of people.

“This is a national challenge and all of us need to put our contribution to meet it. Those engaged in the process – government, experts and professionals from public and private sectors as well as volunteers – are putting in their 100 per cent contribution. Their commitment and ambition give us belief that we will meet the challenge,” he said.

(By Imran Ayub Dawn, 13, 26/04/2021)

Six coronavirus patients die in Hyderabad since Saturday evening

Six Covid-19 patients died in Liaquat University Hospital’s city branch over the last 48 hours, it was stated on Monday evening.

Hyderabad Commissioner Mohammad Abbas Baloch, chairing a meeting in his office on Monday, asked all deputy commissioners and district health officers to identify each and every health facility within their respective area in the division. He told them to prepare a strategy in collaboration with the army in case the situation turned from bad to worse due to the third wave of the pandemic.

He also sought a contingency plan and directed that the shopkeepers found violating the prescribed SOPs be penalised and their business sealed.

The meeting was attended by DC Fuad Ghaffar Soomro, DIG Sharjeel Kharal, SSP Abdul Salam Sheikh, DHO Dr Lala Jaffar and others.

The commissioner noted that all beds at government hospitals in Hyderabad now stood occupied by patients. “Although, the situation has not become alarming, it may turn serious if the trend persists and could warrant securing administrative control of certain private hospitals,” he added.

(By Newspaper’s Staff Reporter Dawn, 13, 26/04/2021)

PMA urges govt to impose emergency, suspend flights to tackle Covid-19

The federal government’s “absolute failure” in preventing the spread of Covid-19 variants demands that it impose an emergency in the country and suspend international and domestic passenger flights, train and public transport services till it puts in place an effective Covid-19 screening and monitoring system at all entry points, especially airports.

This was stated by Dr S.M. Qaiser Sajjad, secretary general of Pakistan Medical Association (PMA)-Centre, while speaking to Dawn on Monday following a presser organised at the PMA House.

"The evidence emerging from testing samples and studies show that it's mainly the new Covid-19 variants largely responsible for the severe third wave in the country. It means that either we have a flawed monitoring system in place at airports or such a system doesn't exist at all," observed Dr Sajjad when asked about the reasons behind the current Covid-19 situation and the steps needed to prevent further escalation.

'This time it's also affecting children and the young population'

He was of the opinion that the government should learn from other countries with effective surveillance in place to detect Covid-19 cases. "They test all travellers on arrival and then they are required to undergo a 14-day quarantine period at designated hotels at their own cost. We need to have a similar system in place here."

The virus (the UK-variant), he warned, was more deadly and infectious than the previous one and spreading fast in Hyderabad and Karachi. "This time it's also affecting children and the young population and we are seeing patients developing sudden breathing problems following slight fever and cough. It's the government's responsibility to make people aware of the emerging situation and convince them to get vaccinated against the virus."

To another question about making the Expo Centre as a field hospital for Covid-19 patients, he said the government should first ensure maximum utilization of existing public and private hospitals by extending the number of beds and allied treatment facilities. "As done last year during the first coronavirus wave, the government should take private hospitals on board and allocate Covid-19 beds there."

Strict compliance with SOPs

At the press conference, health experts expressed deep concern over the increasing number of cases and deaths from Covid-19 and urged the government and all political parties to join hands, stop organising public events and save lives.

"They should demonstrate strict compliance to SOPs so the general public also feels inclined towards compliance. There should be a uniform policy to tackle coronavirus. Also, we request the Election Commission of Pakistan to ensure strict implementation of SOPs during the NA-249 election," said general secretary PMA-Karachi Dr Abdul Ghafoor Shoro.

Speaking through video link, Dr Salma Aslam Kundi, president PMA-Centre, urged the government to speed up the vaccination process. "The government must do it on a priority basis and explore the possibility of developing the vaccine locally. We need to understand that coronavirus is here to stay and the country should have ample resources of its own to tackle this health challenge every year."

Vaccination, she pointed out, was the most protective shield against Covid-19 and people must not pay attention to misunderstandings and myths related to Covid-19 vaccines.

The association called upon the government to increase vaccination facilities. At least 70-75 per cent of the population should be vaccinated as early as possible.

It also urged the government to make the vaccination process easier. People with a national identity card should be registered and vaccinated on the spot under a walk-in facility at the vaccination centres. The age limit on vaccination should be removed. If the vaccination process was not expedited it might take years to achieve the goals of the vaccination campaign and we could face a polio-like situation, they said.

Health experts also appealed to the public to adopt Covid-19 SOPs. "Wear mask whenever you go out. Maintain social distancing and wash or sanitize hands with proper intervals. By following these guidelines, we can continue with our trade and businesses otherwise the government will be compelled to impose a lockdown," they said.
(By Faiza Ilyas Dawn, 13, 27/04/2021)

Interprovincial transport banned, educational institutions shut to battle Covid threat

Keeping in view the fresh spike in coronavirus cases, the Sindh government on Monday banned interprovincial transport, closed all educational institutions and cut staff at government offices by 80 per cent.

"We have also decided to seek the services of armed forces to assist the district administration and police in implementing coronavirus-related standard operating procedures (SOPs) in the province," said Chief Minister Syed Murad Ali Shah.

Speaking at a press conference at the auditorium of the Sindh Assembly just after presiding over a meeting of the provincial task force on coronavirus, he said the situation was comparatively better in Sindh but the detection ratio of the new cases had shown a dangerous surge during the last 60 days.

Industries to work as usual; markets closure time unchanged; army called in to enforce SOPs

Accompanied by relevant provincial ministers and other officials, he said the number of daily cases on Feb 24 was 348 on April 25 the same number reached 952.

"This shows that the situation is aggravating," he said.

The CM said that there were 664 "ICU beds with ventilators" in the province; of them only 47 were currently occupied.

He added that there were 1,872 high-dependence unit (HDU) beds with oxygen facilities in the province; of them 296 were occupied.

"It still means we have enough facilities to deal with the patients but we have decided to upgrade and multiply our facilities," he said.

Sindh has three functional oxygen plants

Mr Shah said that the oxygen was available in enough quantities in the province.

"We have no issue with [oxygen] shortage — we have three oxygen plants installed in government facilities, one at Trauma Centre Karachi and other two at Dow University Ojha Campus and Gambat Institute of Health Sciences, Khairpur," he added.

The chief minister said that the provincial government had decided to purchase two more plants, one from Italy and another one from China.

"I am assessing ways and means to airlift one of the oxygen plants at the earliest," he added.

Mr Shah said that still the province of Sindh was in a comfortable position, but the situation could worsen, therefore, some important decisions were taken in the meeting of the task force.

Giving details of the decisions, he said all the schools, colleges and universities had been closed with immediate effect.

"All the provincial government offices have been directed to slash their staff by 80 per cent and the staff members would work from their homes," he said.

He added the offices of essential services would function as usual and the new office timings would be from 9am to 2pm.

Mr Shah said that all private offices would have to slash their 50pc staff and in case of failure the offices of such private companies would be sealed.

Talking about markets, the chief minister said that businesses and commercial centres were allowed to operate from early morning to 6pm, as decided by the National Command and Operation Centre (NCOC).

"We are sure traders would follow all the SOPs; otherwise the government would impose more restrictions," he warned.

He said that prison visits had been banned. "No visitor would be allowed to meet inmates in jail," he said categorically.

Intercity transport to be banned from 29th

The CM said that intercity bus transport would be banned from April 29. However, goods transport would operate as usual.

"I would take all the chief ministers into confidence about the decision of banning intercity transport so that passenger transport may not rush at our borders," he added.

The CM said that industrial units would operate as usual but with SOPs, adding that restaurants would only offer home delivery and takeaway services.

"Indoor and outdoor dining have been banned completely," he said.

He said that the provincial government had decided to seek the services of armed forces to assist the district administration and the police to enforce SOPs.

He added that a letter to the ministry of interior seeking the services of the armed forces would be written today [Monday] and its post-facto approval would be sought from the cabinet on Tuesday.

He clarified that all the hospitals, public and private, and medical stores had been exempted from all the restrictions. "They will operate as usual."

Sharing daily situation report, the chief minister said that six more patients died and 11,855 tests were conducted overnight with 727 new cases including 258 new cases in Karachi.

(By Tahir Siddiqui Dawn, 13, 27/04/2021)

Routine immunisation of children hit by Covid-19 situation in Sindh, say experts

The urgency of the safety measures taken for the Covid-19 pandemic has impacted routine immunisation of children in Sindh and it must be countered with a mass information campaign regarding vaccination safety and need, experts said at a webinar, debunking myths surrounding vaccination.

The event was organised by Jinnah Sindh Medical University (JSMU) with the Extended Programme on Immunisation, Sindh (EPI), says a statement.

The webinar titled 'Myths and facts about immunisation during the pandemic' was held as part of World Immunisation Week to address the myths and misconceptions about the Covid-19 vaccines.

“The earlier we achieve universal immunisation against Covid, the better it will be for our children who can then receive routine immunisation easily and safely,” said Prof Lubna Ansari Baig, chairperson of the APPNA Institute of Public Health (AIPH-JSMU). She drew the attention of the audience to the impact of Covid-19 on routine immunisation of children and discussed the vaccination record of the past five years compared to last year.

Stress the need to counter propaganda against vaccination

“Almost 40 million children missed the polio vaccine in Pakistan last year while BCG was the most missed vaccine,” she quoted a recent study. “One in two children missed routine immunisation during the lockdown in Sindh, therefore, there is an increasing risk of vaccine-preventable diseases outbreak,” she said.

Dr Mohammad Juman Bahoto, the newly appointed director of the EPI, Sindh, shared that the EPI focused on following deadly vaccine-preventable diseases. Currently, the EPI is providing 11 antigens against 11 diseases.

He said that World Immunisation Week is observed in Sindh to raise awareness of the importance of immunisation and vaccinations. “Currently, the EPI is providing 11 antigens against 11 diseases and many of the preventable diseases are on course to eradication from the country.”

Negative propaganda

Dr Naila Tariq, professor of pathology, noted the prevalence of negative propaganda against Covid vaccination and explained that people could still contract the virus but through mutation, and not because of the vaccination. She recommended exercising complete transparency and extensive sharing of information with the public about the testing, development of vaccines and their adverse effects.

“Sharing data about Covid vaccines and mass information campaign presenting true results are essential to building the public’s trust and confidence in vaccination,” she said. “Governments must set timelines for achieving mass immunity and work towards that goal with all available resources, including public information.”

Dr Shiraz Shaikh, associate professor at AIPH-JSMU, explained how the pandemic had interrupted the childhood immunisation programmes in 70 countries and said that immunisation was among the top interventions of the sustainable development goals 1, 2, and 3.

Dr Zaeema Ahmer, assistant professor at AIPH-JSMU, highlighted some of the most commonly quoted myths about the Covid-19 antigens by the public and clarified that there had been no safety issues to date in the people who had received the vaccination.

Dr Saima Ibad, lecturer at AIPH-JSMU, moderated the session.

(From the Newspaper’s Dawn, 13, 29/04/2021)

200-plus deaths

Pakistan’s single-day death toll from Covid-19 has crossed the 200 mark for the first time since the lethal virus set foot in the country on February 26, 2020. The NCOC on Tuesday confirmed that 201 people died of the novel infection across the country during the previous 24 hours amid a Covid-positivity rate of 10.77 per cent. In the beginning of March, the rate of Covid-positive cases in the country was hovering around 3.5% with the number of daily deaths less than 50. But the numbers started soaring from then onwards, indicating the feared third strike of the virus. And, for the past two weeks or so, the Covid-positivity rate has climbed past 10 per cent and the number of daily deaths has gone in excess of 100, with spikes of 150-plus on certain days.

Concerned about avoiding an India-like emergency, the government is seriously considering a total lockdown of cities that show worrying Covid-infestation rate – something that the government has resisted all along, despite pressure from the opposition and the medical fraternity. The NCOC has, through a letter, informed the administrations of as many as 20 cities to be prepared for a possible lockdown from May 2/3. The cities that may be put under a lockdown include Islamabad, Rawalpindi, Lahore, Multan, Faisalabad, Gujranwala, Bahawalpur, Hyderabad, Peshawar, Lower Dir, Mardan, Nowshera, Malakand, Charsadda, Swat, Swabi, Muzaffarabad, Sudhnuti, Poonch and Bagh.

Also, the federal education ministry has announced the cancellation of all exams under local education boards until June 15 and those of Cambridge until October, with the exception of A2 exams for students who want to take them for the purpose of applying to foreign universities. The decision has been widely welcomed by parents who were not comfortable with the thought of sending their children to presumably cramped examination halls with a big waiting population outside. However, the belated decision – coming after A Level students had sit exams on Monday and Tuesday – has also drawn criticism from many students and their parents.

The tightening of the curbs and use of armed forces to ensure public compliance with the SOPs are steps in the right direction. The public must also cooperate with the authorities so that the nation could ride past the reigning third wave of the virus less scathed.

(By Editorial The Express Tribune, 14, 29/04/2021)

South African, Brazilian strands found

Sindh Health Minister Dr Azra Fazl Pechuho has confirmed the detection of the South African and Brazilian variants of the coronavirus in Karachi. Dr Pechuho said on Friday that the variants, which were more lethal than the original Wuhan variant, were detected in samples collected by Aga Khan University Hospital (AKUH).

In a video message, the health minister said AKUH had collected 13 samples for a genomic study and of those, 10 were found infected with the United Kingdom variant of the coronavirus - the presence of which was confirmed in Karachi in an earlier genomic study - two were found infected with the South African variant and the one remaining was infected with the Brazilian variant.

She expressed fear that the two strands had the potential to bring healthcare facilities to the brink of collapse.

Stating that the fatality rate of all three strands was higher than the Wuhan variant, she warned, "This is an emergency as vaccines do not offer protection against these [South African and Brazilian] variants." "Therefore, it is important for everyone to take all necessary precautionary measures and take this seriously," she emphasised.

The minister appealed to citizens not to arrange parties and gatherings at homes, avoid going for Eid shopping and not travel unnecessarily. "If necessary precaution is not taken, the country can face a humanitarian crisis, as has been the case in India," she sounded alarm. Pechuho hinted that the government might impose a lockdown in the coming days

'Frightening ratio'

Parliamentary secretary for health in the Sindh Assembly Qasim Soomro pointed out that the UK, South African and Brazilian variants were detected in a small pool of just 13 samples. "This is frightening. The detection in a small pool of samples indicates the widescale community spread of these highly contagious variants," he remarked.

Soomro reiterated Pechuho's call for taking strict measures to ensure the implementation of pandemic-related standard operating procedures. "Or else, [those] careless [among the masses] may create a disaster-like situation in the coming days."

First or not?

Earlier media reports had warned of the presence of the South African and Brazilian variants in the metropolis, citing a study conducted by Infection Control Society of Pakistan president Dr Khanani and molecular biologists Dr Muhammad Hanif and Dr Adnan Dinar.

However, a senior official of the Sindh Health Department, who requested anonymity, claimed that it was for the first that the two variants were detected in Sindh in the study conducted by AKUH. "Not a single case had been reported before these," he maintained.

The official further told The Express Tribune that all 13 persons whose samples had been collected for the AKUH study had been compelled to isolate themselves.

"As soon as AKUH information about the detection of the two variants with the provincial health department, medical contacted the 13 persons [to ensure that they isolate themselves]," he said, adding that those who came in contact with them would also be tested and isolated. When asked about the health condition of the 13 individuals, the health authorities evaded the question

Vaccination

Meanwhile, data shared by the health department showed that total 18,026 persons, including 2,942 health workers and 15,084 senior citizens, had been vaccinated across Sindh on Thursday. Among the senior citizens, 4,515 were administered the second dose of the vaccine on the day.

(By Sameer Mandhro The Express Tribune, 04, 01/05/2021)

Govt-civil society drive works to immunise children in 'super risk' UC in Karachi

"We have to work in partnership and join hands to achieve results," says Tasneem Fatima, Team Lead CHIP, Karachi. Fatima has been working with CHIP (Civil Society Human and Institutional Development Programme) since 2015. At present she is working to encourage and motivate parents to get their children immunised. Her target area is UC-2 in Baldia Town, district West Karachi.

"There are eight super risk union councils in Karachi and UC-2 Baldia (Ittehad Town) is one of them," she says. "People belonging to various communities live there but most are Pakhtuns. There are multiple problems, such as lack of awareness, illiteracy, and poverty, due to which immunisation rate is very low," says Fatima.

People are not aware of the need for immunisation or if some of them are, they don't know where to go for it. A large number of children in this area are not in the net and have not been vaccinated even once (zero dose) at one year of age, or have been dropped out after the first dose which means there is a high rate of vaccination dropout.

"There are 36,000 houses in the union council but the whole area is an illegal settlement, hence there is no hospital. Two dispensaries have been opened only last month. This adds to the problem as if a child experiences any medicinal reaction or side-effect to the vaccine, there is no hospital to go to," she says. Due to a lack of awareness, even minor fever or pain that is often experienced after immunisation, is considered a big deal and often results in parents refusing the second dose.

"Refusal rate is around 10-15 percent in the case of polio, while it is higher in the routine immunisation, since for polio teams pay door-to-door visits whereas for routine immunisation the child has to be brought to the vaccination centre," says Ghulam Ali, DSV West Karachi.

Given the sad state of affairs, the civil society and EPI have joined hands to bring about a change in this super risk union council.

During the World Immunisation Week — April 24-30 — various activities such as awareness walks and mass mobilisation campaigns were held in the city. As part of a similar campaign, a ceremony was held at the DHO office, Karachi, in collaboration with CHIP, Unicef and WHO on April 27 to acknowledge the work of those vaccinators whose efforts are bringing about a change.

In all, seven shields and three prizes were awarded to the meritorious ones. The chief guest at the ceremony was Dr Attiq ur Rehman Quraishi, Additional DHO (Admin), who gave away the prizes and shields.

Given the level of illiteracy and lack of awareness, it needed a lot of work to mobilise people to get their children vaccinated. “We work for the young generation; to mobilise people but not in isolation; we have to ensure that children are vaccinated,” says Fatima.

For this, outreach centres for vaccinators were established where vaccinators are available once in a week to undertake vaccination. “This is important as demand and supply go hand in hand. If parents visit a centre and find no one present there, the drive could upset them,” she adds.

Months of hard work — which involved a mobilisation drive, door-to-door visits, creation of mohalla committees and lining up of community resource persons, both male and female — is now paying off.

According to Fatima, in the three months of field work, which followed months of background work, more than 50 per cent of zero dose and about 30 per cent of dropout children have been vaccinated in the Ittehad Town UC.

“It’s a great example of how civil society organisations and government can work together and share the workload,” she said.
(By Rizwana Naqvi Dawn, 13, 03/05/2021)

Projecting school dropout and learning loss amid Covid-19

The global health crisis amid Covid-19 has adversely affected the education sector, particularly for school-age children. The Covid-19 crisis has resulted in lockdowns, quarantines, and social distancing to combat disease transmission. To date, the lockdown strategies have been proven effective to slow the transmission of disease, but complete lockdowns might not be efficient in the long run. Instead, the government should prioritise and expedite the implementation of the nationwide Covid-19 vaccination programme. To put into perspective, the Covid-19 related school closures have affected 55.3 million children in Pakistan between five and 16 years of age (pre-primary up to higher secondary).



The government’s initial response during school closures has been primarily related to remote learning, such as online lectures via Zoom and Microsoft Teams or televised broadcasting to ensure continued learning for children. Despite different attempts to continue education, the damaging effects due to school closures will be highly heterogeneous, as children of poor households are more vulnerable due to inadequate digital gadgets, internet connectivity, and — on top of all — lower parental education.

Using data on school closures, remote learning effectiveness, children attendance and household income, we quantified how school closure amid the pandemic may impact the learning and dropout of schoolchildren in Pakistan. Firstly, to understand the likely change in Learning Adjusted Years of Schooling (LAYS) after school closure using the scenario-based analysis. Secondly, to simulate the potential effect on children’s school attendance of a reduction in household income (i.e., by 10, 25, and 50%) of an average household in Pakistan to know the effect of the Covid-19 pandemic on child school attendance.

The likely effect of Covid-19 school closures on learning loss would be more significant among students attending public and low-cost private schools with fewer resources or students from poor backgrounds. Besides, the adverse effect would exacerbate as school support has been reduced, and the increase in demand for students’ independent tasks. Similarly, digital inequality and teacher inexperience in providing high-quality remote learning adversely affect the students’ learning opportunities.

In Pakistan, the Expected Years of Schooling (EYS) and LAYS differ by about four years. For instance, children in Pakistan can expect to complete 9.4 years of pre-primary, primary, and secondary school by age 18. However, when adjusted for quality of learning, it is only equivalent to 5.1 years: a learning gap of 4.3 years exhibiting the low quality of the education system.

Factoring in the effect of Covid-19, this decreases to 4.80 years in the optimistic scenario. In the moderate scenario, school closures due to the pandemic could bring the average learning that students achieve during their lifetime to 4.40 learning-adjusted years (a decrease of 13.73%). In the pessimistic scenario, the loss is 0.9 years, with a reduction in LAYS of 17.65%. However, the impact on learning loss is more pronounced for girls than boys. The learning loss and the subsequent increase in dropout rates — are not likely to be temporary shocks but could continue to accumulate learning deficit even after children return to school.

Therefore, a significant concern is that short-term losses in learning due to school closure could continue to accumulate after children return to school. Subsequently, the closures could cause disproportionate learning losses and lead more of them to drop out of school in the long run.

Concerning the dropout, our predictions show that 10% reduction in income decreases children’s enrolment by about 1.659 million children. A 50% reduction in per capita expenditure decreases enrollment by 7.2 million.

Similarly, regarding different level of schooling, the decrease in the probability of child school attendance is larger for primary and secondary school children relative to pre-primary and middle school-age children. Also, it is evident that the adverse effect of the reduction in household expenditure would be for older rather than younger children, as the opportunity cost of going to school increases with the age of these children. This suggests that the older children would not go back to school after the forced interruption.

It is clear that the reduction in human capital due to the pandemic could have negative implications for social development and economic potential of the next generation. The policymakers should devise effective responses which can mitigate the adverse effects of the pandemic cum school closure in Pakistan.

First, for safe reopening of the schools the identification and mapping of the affected areas will help raise the school closure in a targeted area, thereby minimising the potential negative impact of the disruptions on students learning and dropout. Second, in the long-term, the government should prioritise and expedite the implementation of the nationwide vaccination programme, so that all students can safely return to in-person instruction as soon as possible. Third, the government's priority should be to stimulate economic activities and the initiatives needed to cushion the economic impact on marginalised families to discourage child labour and school dropout. Forth, the curriculum should be adjusted in a way to accommodate extra lessons for the worst-affected students. In this context, the focus should be to strengthen our capacity through consistent investment in the infrastructure to develop a resilient education system of futuristic orientation.

(By Muhammad Jehangir Khan & Junaid Ahmed 15, 04/05/2021)

CM orders stricter SOPs as virus hits new highs in Karachi-East

Sindh Chief Minister Syed Murad Ali Shah has directed the administration to strictly implement the SOPs announced by the government in view of fast spread of the coronavirus.

Presiding over a meeting of the task force on the coronavirus here at CM House on Monday, he observed that during the past seven days, the virus had hit new highs in Karachi-East where detection rate reached 22 per cent.

He said the detection rate was 13 per cent in South and 10 per cent in Central districts.

Sharing district-wise weekly data of positive cases from April 26 to May 2, it was disclosed that of the 5,609 samples tested in Karachi-East 1,257 were found positive that constituted a 22 per cent detection rate.

In Hyderabad 1,336 cases were detected against 6,962 tests that came to 19 per cent. Karachi-South showed 13 per cent positive cases where 732 cases were detected against 5,842 tests.

In Karachi-Central, 4,255 tests were conducted which diagnosed 414 cases that constituted 10 per cent.

Similarly, Korangi has seven per cent cases, Malir, Sukkur and Khairpur have six per cent each, Karachi-West, Shaheed Benazirabad, Naushehro Feroze, Matiari and Larkana have five per cent cases each.

The CM directed provincial ministers Saeed Ghani, Jam Ikram Dharejo, Nasir Hussain Shah and Adviser Murtaza Wahab to keep visiting the badly-affected districts to ensure implementation of SOPs in true spirit. "The district administration and the police must take coercive action against the business units defying the government orders in respect of working hours and enforcement of SOPs," he said.

It was pointed out that the last 15 days (April 19 to May 3) comparative analyses showed that death rate per million in Sindh was recorded at two, 11 in AJK, one Balochistan, three Gilgit Baltistan, 25 Islamabad, 14 Khyber Pakhtunkhwa and 10 Punjab 10. Similarly, 420 cases per million were detected in AJK, 136 in Balochistan, 97 Gilgit Baltistan, 3,065 Islamabad, 382 Khyber Pakhtunkhwa, 333 Punjab and 269 in Sindh.

(By Newspaper's Staff Reporter Dawn, 13, 04/05/2021)

Universities and transmission of knowledge a Covid challenge

Universities, high centers of excellence and institutes the world over are considered to be the repository of knowledge and vehicles for transmission of such knowledge. Community colleges also impart knowledge but the major difference between the two is that while colleges usually pass instructions in the form of lectures, universities, centres and institutes are known for their research and introduction of new products.



Most of the countries in the world benefit from the research carried out in various fields. The new discoveries and inventions are, later on, patented and are registered under a trademark. This also then becomes a source of earning not only for such institutions but also trading for the country.

In this context, Covid-19 posed a challenge to human intellect all over the globe. This reminds us that throughout history, only those species that are able to adapt to the changing environment survive. Those failing to adapt eventually become extinct.

Accepting the challenge, universities, institutes and their laboratories, in conjunction with drug companies, dashed to develop coronavirus vaccines and medications. Universities were keys to fast Covid vaccine development. The University of Oxford's Jenner Institute and Oxford Vaccine Group, University of Pittsburg, University of Texas at Austin, Washington University in St Louis, Colorado State University and Baylor College of Medicine, the National Institute of Allergy and Infectious Diseases United States, the Sechenov

First Moscow State Medical University, Sinovac Biotech and the Wuhan Institute of Biological Products China, became world leaders in vaccine development.

In a pandemic they acted not only as educational institutions but also as scientific and technological research centres that were able to participate in the creation of such important and complex products. Their hard labour was crowned with success in the form of preventive vaccines.

Illustrations of the aforementioned facts are manifests of the role of universities and research institutes in accepting the daunting challenges and offering solutions to the problems, providing relief and ensuring progress.

Contrary to this, universities and institutes in Pakistan, in particular Khyber-Pakhtunkhwa, mushrooming both in the public and private sector, lagged behind. Not a single institution can boast of its invention or a new theory in any field. One can hardly differentiate between a college and a university or research institute.

At least Rs4 billion are required to raise a public sector university at the initial stage and Rs1 billion as recurring annual expenditure. While the teaching and administrative staffs have been observed stressing for allowances and other expenditures, rare voice have been heard for the allocation of funds for research, libraries and quality journals.

As a contrast to this, a survey of the best universities in the world revealed that such universities accord the highest priority to research, student satisfaction, peer ratings, the quality of library, impact factor journals and publication of books. This is why universities like Harvard and Oxford stand at the top of the pedestal. Universities in Pakistan are also required to set aside at least 10% of the institutional budget for research, but it is hardly done. Very few universities in Pakistan even have 'Y' category journals.

The Covid-19 pandemic could have been changed into an opportunity, by revitalising departments within universities, medical colleges and institutes, such as biology, microbiology, biotechnology, molecular medicine, chemistry, biochemistry and pharmacy. But unfortunately, most institutions remained dormant.

Apart from that, outstanding work was expected from the International Center for Chemical and Biological Sciences (HEJ Research Institute of Chemistry and Dr Panjwani Center for Molecular Medicine and Drug Research) at the University of Karachi. However, no worthwhile product has come to light. The former chairman of the Higher Education Commission (HEC), Dr Tariq Banuri, also lamented that despite being given billions of grants, HEJ refused to share its progress and declined accountability.

The current situation demanded optimum utilisation of resources by tasking these institutions to undertake research related to Covid-19. But, what to say of that, they could not even offer PCR tests, therefore the burden was on the National Institute and medical universities. Consequently, results of the PCR tests would take a couple of days. If it is so then what good is a university or a research institute?

Seen in this backdrop, the challenge of Covid-19 also provides us the opportunity to conduct case studies of universities and institutes and find out the reasons for them not being innovative. Having said this, the case studies can then set a minimum benchmark for accreditation of certain disciplines and make it mandatory to have a quality journal. Besides, the maximum percentage of the budget should be earmarked for research.

It is high time universities were converted into research centres in the true sense of the term.
(By Dr Syed Akhter Ali Shah The Express Tribune, 15, 05/05/2021)

Karachi markets yet to see oxygen shortage, panic buying

Despite a sudden and rapid increase in coronavirus cases in the city over the last couple of weeks, the demand for oxygen cylinders — essentially required for Covid-19 patients in critical condition — appeared normal so far as the main medical market of vital medical supplies has not witness panic buying of oxygen.

"The Lucky Star medical market would have run out of oxygen cylinder stocks and the prices would have hit the ceiling had there been an unprecedented demand. A wide gap between demand and supply would definitely have caused shortage of oxygen, hence panic," shopkeepers said, adding that no panic among suppliers and stockists of oxygen cylinders in the market was being witnessed either. On the other hand, people of almost all ages have started making a beeline at various hospitals and different community centres for coronavirus vaccination.

A number of shopkeepers have put on display oxygen cylinders of various capacities inside and outside their shops, but the outlets lacked any hustle and bustle of buyers.

Refuting media reports regarding increase in prices by Rs2,000-4,000 for a five-litre oxygen cylinder, the shopkeepers said that the price of a small cylinder had risen by just Rs200 whereas that of 10 litre by Rs500.

Demand in Punjab

"Coronavirus crisis does not loom in Karachi. An upward trend in the prices is being witnessed in Punjab. Oxygen cylinders in large numbers find their way into the biggest province from Karachi," the shopkeepers said adding that even the refilling rates there had gone up.

"I have shipped 400 cylinders of five-litre capacity last week to a buyer in Punjab and further demand is coming up," a shopkeeper told Dawn.

Punjab has so far been the worst-hit province owing to rising coronavirus cases which forced the Punjab government on Wednesday to impose a complete lockdown from May 8-16.

119 deaths in a day

According to the National Command and Operation Centre (NCOC), the country reported 4,113 coronavirus cases in the past 24 hours taking total cases to 841,636 so far.

With 119 deaths within the last 24 hours, the total fatalities so far have reached 18,429, it was stated on Wednesday.

With 310,616 virus cases in Punjab, the total number of deaths in the biggest province was put at 8,741.

Cases in Sindh stands at 287,643 followed by 121,099 in Khyber Pakhtunkhwa, 76,696 in Islamabad, 22,776 in Balochistan, 17,397 in Azad Kashmir, and 5,341 in Gilgit-Baltistan.

A total of 4,687 people in Sindh lost their lives followed by 3,466 in Khyber Pakhtunkhwa, 239 in Balochistan, 698 in Islamabad, 491 in Azad Kashmir, and 107 in Gilgit-Baltistan.

Cylinder rates and quality

Coming back to the Lucky Star market, another shopkeeper said a five-litre brand new Chinese cylinder costs Rs8,000-8,500 while a used one sells at Rs6,500-7,000.

A 10-litre used cylinder costs Rs9,500 while a new Chinese one is priced at Rs14,000.

The refilling charges for each five-litre and 10-litre cylinder are Rs400 and Rs500, respectively, he added.

The new Chinese cylinders carry production date while many cylinders are available with no date, the shopkeeper said, and advised that consumers must see the date before purchasing a cylinder.

Some unscrupulous elements were also repainting old cylinders to give them a fresh look and selling it in the market at new one's price, he warned.

Oxygen production in Pakistan

Pakistan produces around 800 tonnes of oxygen every day and some 550 tonnes of the total production is currently being consumed by the country's healthcare system.

Officials and industry sources said that five major producers in Pakistan enjoyed the monopoly with more than 95 per cent of the total oxygen production and all of them were mainly supplying their product to healthcare facilities across the country.

"Currently hospitals are consuming a huge chunk of the total oxygen production," said a source privy to the industry.

"However, we are comfortable at this point of time. We are meeting the demand and have capacity to face the current challenge. But obviously if the cases continue to rise, there can be a shortage or you can say we may face a crisis. The producers at the same time are trying to increase their production capacity, but that process requires time and investment."

Steel Mill oxygen plant

The Pakistan Medical Association (PMA), meanwhile, has asked the government to explore alternative options and expedite its efforts towards increasing oxygen production in the wake of increase in the number of Covid-19 cases.

"The government should immediately intervene to revive the oxygen plant at the Pakistan Steel Mill," said PMA secretary general Dr Qaiser Sajjad.

"Our health system is on the edge and we can't afford any delay."

(By Aamir Shafaat Khan Dawn, 13, 06/05/2021)

Fresh restrictions to control Covid-19 pandemic cripple life in Karachi

All commercial and business activities, government and private offices as well as passenger transport services in Karachi remained suspended on Sunday as part of the National Command and Operation Centre's 'stay home-stay safe' restrictions that would remain in place till May 16 to stop further spread of Covid-19 pandemic.

It was the first day of the lockdown in Karachi when all major thoroughfares wore a deserted look during the first half of the day amid hot and humid weather.

Only grocery, meat and vegetable shops, medical stores, bakeries, milk shops, fuel stations were open. Fruit vendors were also allowed to work and so did food outlets, eateries and restaurants which remained open only for home deliveries.

Ports and vaccination centres remained operational on Sunday.

Vendors found playing hide-and-seek with police, LEA personnel

While all shops were previously allowed to open from 5am to 7pm, the home department issued another notification through which it extended the timing for only bakeries and milk shops from 5am to 12noon.

The government has allowed only essential travel by private vehicles with half seating capacity, but a rush of cars and motorcycles on city roads was witnessed after Iftar as people in good numbers were seen heading towards different mosques to pray on the occasion of Shab-i-Qadr (27th Ramadan).

The government has made it clear that everyone needed to follow standard operating procedures (SOPs) that include wearing of face mask. However, the number of people wearing face masks was much a little.

A number of shops were sealed for violating SOPs and in some cases shopkeepers were fined. However, police and local administration were also accused of taking bribes to turn a blind eye to the commercial activities going on in some thickly populated areas.

In some areas, makeshift stalls were set up to sell clothes, jewellery, shoes, etc as part of Eid shopping. Shoes and sandals were being sold on pushcarts in many localities, including Saddar. Vendors stopped their activity wherever they saw police and other law enforcement agencies personnel coming to them but resumed the same as soon as they left.

The government has already imposed a ban on passenger transport vehicles within cities as well as on intercity and interprovincial routes. Therefore, no buses, coasters and other such vehicles were seen plying on roads. There were people who wanted to go to their hometowns to celebrate Eid but found no transport means and had to go to railway stations to catch a train.

In compliance with NCOC directives, the Sindh government has recently introduced a new set of restrictions, banned all passenger transport services and asked traders to keep markets, malls and shopping centres till May 16.

However, it allowed some essential services to continue their operation while following defined rules. These establishments include hospitals and medical clinic, stand-alone pharmacies, medical centres, vaccination centres, utility services offices, essential municipal services, petrol pumps, e-commerce, home delivery, postal and courier services with properly trained, uniformed and identity carrying delivery persons.

Staffs of welfare organisations, call centres, customer support centres for essential services, technical staff of cellular companies, internet service providers, journalists and other media workers, government essential services, offices and staff and their field operations including port operations, customs, postal and railways have also been allowed movement during the restriction period. There is also no ban on goods transport.

(By Azfar-ul-Ashfaq Dawn, 13, 10/05/2021)

Sindh to vaccinate 100,000 people daily

Restricting people to their houses is not enough to contain Covid-19, warned Sindh Chief Minister Murad Ali Shah. He ordered the health department to increase vaccination its capacity to 100,000 people a day.

Chairing a meeting of the provincial taskforce on coronavirus, he said mass inoculation was the need of the hour. He directed the health department to increase vaccination capacity to 50,000 jabs a day at the Expo Centre.

Besides, he said mass inoculation centres must be set up in other districts. He directed all Covid vaccination centres in Sindh to remain operational during Eidul Fitr holidays.

The provincial health department was further directed to install oxygen plants at five tertiary care hospitals. The meeting noted that the Eid holidays were critical as the situation may be aggravated if large gatherings and socialising occur on the festive occasion.

Mass inoculation

The health department has revealed that anti-Covid jabs will be available for citizens under 40 years of age from May 16 onwards.

Sindh Health Minister Dr Azra Pechuho informed the meeting that a vaccination centre has been set up for this purpose at the Expo Centre where the provincial government will be providing the Covax, Cansino, Oxford AstraZeneca and Sinopharm vaccines. The facility has been equipped to vaccinate 25,000 to 30,000 people a day.

Earlier, speaking at the inauguration on Sunday, Dr Pechuho advised citizens to approach the centre if there was any confusion regarding registrations. "There, a trained member of staff will administer the vaccine to you," she said.

She added that her department was vying for the speedy procurement of anti-Covid jabs so that the maximum number of people could be vaccinated. According to Dr Pechuho, the National Command and Operation Centre has stated that it would be procuring 70 million vaccination doses by the year's end for the entire country.

"We are ready to give money to the federal government so that it may procure the vaccines at fixed prices and provide them to Sindh," added the provincial health minister.

The Sindh government had earlier allocated funds worth Rs1.5 billion to procure anti-Covid jabs independently. Meanwhile, at the meeting on Monday, Sindh Health Secretary Kazim Jatoi told the meeting that the provincial government has received 862,000 doses of the Sinopharm vaccine out of which 633,402 have been utilised. Besides, 11,000 doses of the single-dose Cansino vaccine, 80,000 of Sinovac and 107,500 doses of the Oxford-AstraZeneca vaccine have also been utilised.

All of the Cansino doses have been utilised, he said, adding that 61,200 Sinovac jabs and 1,480 Oxford-AstraZeneca shots have been administered thus far.

The CM directed the health department to increase the Expo Centre's vaccination capacity to 50,000 shots a day. Moreover, he issued directives for a mass vaccination centre to be established in Hyderabad. Similar arrangements may be made in Sukkur, Mirpurkhas and Larkana, the meeting was told.

The health department was also directed to keep the vaccination centres open during the Eid holidays.

Third wave

The meeting was informed that the third wave of the coronavirus began in Sindh on April 9 when 314 new infections were detected. Infections peaked on May 5 with the emergence of 1,110 fresh cases and now there appears to be a downward trend of positive cases - 911 new cases were detected on May 7 and 976 on May 9, it was said.

Talking of the Covid trend in Sindh over the past month, the health secretary said coronavirus-related deaths increased from two on April 9 to 24 on May 5. Now a decline in fatalities has been observed with 16 deaths reported on May 9, he said.

The CM was informed that 52 out of 536 ICU beds are occupied and 278 out of 1,453 HDU beds are occupied. Besides, 38 of the 442 other hospital beds are occupied.

"The Eid holidays are critical. If people fail to follow SOPs, it would aggravate [the situation] further," said the CM. He urged people to avoid large gatherings and mingling with friends and family on Eid. Instead, he advised citizens to celebrate Eid with simplicity and avoid socialising.

Moreover, the meeting was apprised that the daily oxygen production in Sindh is at 798MT per day while the demand for it is 724.6 MT per day. These figures include 534.8 MT for health care, 113.8 for industries and 69.85 for distributors.
(By Newspaper's Staff Reporter The Express Tribune, 04, 11/05/2021)

SOP violations

ON Monday, Sindh Police officials were given a well-deserved slap on the wrist by a judicial magistrate in Karachi for not following government-mandated Covid SOPs. This happened when the police presented in court some 300 people, arrested for flouting SOPs over the weekend, to seek their physical remand. The judge first admonished the officers for not providing the 'suspects' with face masks, thus exposing them to unnecessary risk, and then told the police officers that they themselves were liable to be arrested for flouting SOPs. The detainees were released and the judge also sought a reply from those who had ordered the registration of FIRs against them.

There is no doubt that the 'stay home-stay safe' restrictions are more than justified at a time when the Covid numbers look threatening. But it is unfortunate that, ever since the pandemic began, both the federal and provincial governments have undermined their own authority by delaying tough decisions or taking them and then easing them partially or fully, or turning a blind eye to violators. The messaging has been very faulty and inconsistent — encouraging the public to think that there would be no consequences for not following the rules. For instance, although in the initial months the Sindh government took the lead in emphasising SOPs and imposing lockdowns, it has since been unable to effectively restrict the movement of people. Having said that, an arresting spree by the police is not the way to persuade the public to stay at home. For one, little is known about the circumstances under which the arrests took place. And for law-enforcement authorities to lock people up to save them from imminent danger and then exposing them to it anyway, and flouting the SOPs themselves, is simply absurd. For its part, the public has also been careless in following government directives which have been issued for their own protection. We will only be able to see the end of the pandemic if each and every one of us plays their part.

(By Editorial Dawn, 06, 12/05/2021)

City observes second Eid in lockdown

Eid without warm embraces, without going out to meet family and friends and without eagerly wearing new sets of clothes — for the second year in a row; this is distressing, to say the least. Who would have thought that in their lifetimes there would be celebratory occasions minus the joyousness, the beaming smiles?

The virus is still here, and it appears that it will not go away anytime soon. Lockdown of sorts is but inevitable. The inevitability is also felt because of the harrowing Covid-related reports coming out of India. So, the wise thing would be to celebrate Eid in a simple manner.

All important decisions in life have costs. When the first lockdown took effect in Karachi last year, it was a foreign idea for our citizens. Many did not even understand the gravity of the situation. For them, it was just another disease; there was also a group that thought it's a conspiracy hatched by global powers to deprive us of something. The undeniable fact is: the danger is clear and present. Now the reality seems to have dawned on a majority of the Pakistani population, if not on all of them.

The state needs to protect daily wage earners amid ongoing stricter lockdown

Naturally, the costs are high. First and foremost: mental health. It's important to remain mentally alert and not give in to the asphyxiating effects of lockdown. There are studies that have revealed that depression is on the rise and anxiety has got the better of many youngsters who find themselves unable to step out of their homes. (A survey has also suggested a spike in breakups.) This is the time to talk to each other and be good listeners.

Then there is the vital aspect of economic well-being, especially of those who belong to the low-income groups. Daily wage earners are in trouble — make no mistake. No less in discomfort are those whose lives depend on monthly salaries. The uncertainty is deafening.

While commuting to work in online cabs, this writer has come across drivers who have stopped sleeping or taking rest for long hours, simply because there isn't enough work and therefore aren't enough opportunities to earn as much as they want to. Talking to one of them, when the argument was made that lack of sleep or rest could hurt his health, the driver replied, "But no money will hurt my whole family." This is a genuine dilemma.

In the UK, these days, the term 'furlough' is in vogue. It basically means temporary leave of employees. The good thing is that they get their salaries sitting back at home in order to evade the virus. There is nothing complex about it: it is the state's duty to look after its citizens. If they're required to stay put in their homes for a larger national cause, the state must look after them.

Obviously, Pakistan is not as economically free a country as many in the West. There is not much that the state can do. This was one of the reasons why, when the virus first hit the country (2020), the government did not opt for a complete shutdown in order to protect daily wages workers. The strategy worked to a reasonable extent. This time around, though, the lockdown is stricter. So, spare a thought for those who, as per an Urdu expression, dig a well for themselves on a daily basis to fetch water.
(By Peerzada Salman Dawn, 13, 13/05/2021)

Karachi experiences jump in oxygen demand

As coronavirus cases continue to balloon in the provincial capital, the demand for oxygen has also taken flight, climbing upwards of 30 to 40 per cent in time for Eidul Fitr holidays. This is due to growing oxygen shortage fears, which have resulted in citizens not only piling oxygen cylinders for relatives showing symptom but also more assumptively, just in case a need arises.

As per Aga Khan University Hospital (AKUH) Pulmonary Medicine Professor Javed Khan, the human body needs about six millilitres of oxygen per minute, which amounts to about eight to nine litres of oxygen a day. Although oxygen is naturally present in the air, some pulmonary diseases like Covid-19 affect the lungs, making it difficult for patients to naturally swap oxygen and carbon dioxide. Thus they are then required to receive artificial oxygen, the cost of which can be exuberant. "The cost of artificial oxygen if given 24/7 to the patient is around Rs5000 a day," he told The Express Tribune.

According to Muhammad Kashif, an oxygen cylinder supplier in Karachi, a cylinder of oxygen is currently available for anywhere between Rs1, 200 to Rs1, 500 in the market and offers 24 to 27 hours of continuous usage. "There are some 70 oxygen suppliers in the city. And although there is no concrete evidence so far, there are alleged reports of some such dealers being involved in black-marketing of oxygen, which is likely to further surge the prices," asserted the dealer.

On the other hand however, speaking on the matter International Industrial Gases (IIG) Director Sarfaraz Khan clarified that there is no oxygen shortage in Karachi at the moment. Per the director's estimates, some 60 per cent of the 750 metric tonnes of oxygen produced daily, is being uninterruptedly supplied to all hospitals and will continue during the entire span of Eid holidays as well," he assured.

Referring to the production capacity of the private sector, Khan said that 750 metric tonnes of oxygen is produced daily in the country, from which 350 metric tonnes is produced in Karachi and a similar production comes from Punjab. While about eight metric tons of oxygen is being produced in Balochistan. "Altogether, six plants are being set up in the private sector in Karachi, six in Punjab and two in Balochistan for oxygen production," the IIG chief added.

Due to the third wave of Covid-19, 60 per cent of the oxygen produced in the private sector is being supplied to hospitals across the country, while the rest is still being supplied to industrial establishments. Per Sarfaraz Khan, in case of any possible emergency due to Covid-19, the supply of oxygen to the industrial sector will be temporarily suspended and all supply will be redirected to hospitals, in a bid to save human lives.

Speaking further, Khan shared that while Karachi is so far faring well in terms of oxygen demand, here has been a recent upsurge in coronavirus cases in the Punjab province, meriting a higher oxygen supply in chief cities. "Thus, the oxygen being produced in Karachi is currently being siphoned to Lahore, where the demand is relatively higher," he informed.
(By Tufail Ahmed The Express Tribune, 05, 16/05/2021)

Experts say Covid-19 survivors may face psychological, physical issues

Survivors of the coronavirus experience many different kinds of effects even after recovering. These include both psychological and physical effects. Many doctors are still in the process of learning about this virus and sometimes they do not have the knowledge to deal with many things linked to Covid-19.

AH is a 55-year-old survivor of the coronavirus. After recovery, he faced many health problems which at first he did not think were related to his illness. However, he asked his doctor who said people were facing many adverse things after recovering from the virus.

"I sleep with my eyes open now," said AH, making everyone laugh. The laughter tapered off when they realised he was serious.

"After I got better I felt body aches and fatigue but that faded. However, I soon realised I was sleeping with my eyes open. It happened one day that I woke up and realised my eyes were already open. My body sleeps but my eyes are open. It is very weird."

'I soon realised I was sleeping with my eyes open'

Different people are experiencing different things. Homemaker Sheema, a 48-years-old woman, lives with her family in a posh area of Karachi. She had Covid-19 last year and recovered but only after being ravaged by the virus.

Initially, she was extremely weak. Even six or seven months later, she complained of pains in her limbs. "My body aches if I do extra work. After the coronavirus, I have found that my left elbow and my back hurt. I feel shooting pain up the arm; I am unable to pick up anything," she said while talking to this writer. "I am now feeling stronger, but the pain is still there."

Fatigue is a common complaint. A 64-year-old office worker, Najma, still feels quite tired and has bouts of sleeplessness. She is also experiencing a lot of pain in her lower back and legs but she thinks she is still weak from Covid-19.

There are times when her legs can barely hold her body weight. But Najma is more concerned about her sleeping pattern. "My sleep pattern has also gone crazy. I am feeling sleepy at times, and at others I am alert," she added.

All over the world, people have complained of many post-Covid conditions that include loss of taste and smell; of headache; dizziness on standing; difficulty in breathing or shortness of breath, cough and fever; difficulty in thinking or concentrating (sometimes referred to as "brain fog"); fast-beating or pounding of the heart (also known as heart palpitations); chest pain and tiredness or fatigue and joint or muscle pain similar to that of Sheema and Najma.

However, there are chances that the bodily pains and aches are not caused by Covid, but have only been aggravated after one falls ill as says Dr Anjali Batra — a doctor of physical therapy at The Doctor's Plaza, Physical Therapy & Rehabilitation Centre, Karachi.

Diet and exercise

Dr Batra thinks that the best way to decrease the chances of falling ill is by improving diet. Focusing on basic things regarding health Covid-19 survivors not only have different complaints after recovering but different symptoms, too, she adds.

"This is why I am not focusing on anything specific. People need to improve their intake of vitamins C & D, calcium, increase water intake for normal electrolyte balance (like salt and sugar intake)," says Dr Batra. "The basic inner deficiency can be improved by walk, exercise, fresh air and medication to balance stress level. Exercise will help overall body muscles and improve blood circulation. When we go outdoors, our happy hormones decrease the stress."

Commenting on the pains on recovery from Covid, Dr Batra says: "We have heard of people complaining of knee and back pains aggravation after recovery from Covid. But it is hard to say that these pains are due to the virus. Many people may already have had these pains and these are only aggravated after they fall ill and weakened. It is possible that many of them already had developed these conditions but were not feeling any pain so didn't seek treatment. These pains became noticeable post-Covid."

She adds: "We cannot say with surety that these pains are due to the coronavirus." She suggests that people over 40 need to get monthly medical check-ups or assessments. Younger people should also get these done because the coronavirus is ruthless and attacks everyone."

Through these assessments and tests, doctors can find out what treatment is needed to help them to recover faster, said Dr Batra.

Many people are facing psychological issues — stress and depression — post-Covid.

Bilal Ahmed, 38, drives a van for a local factory. He works long shifts. He was infected in March 2020, when the virus was new here and there was not enough information about it. "I was all alone in my room during the quarantine. Life seemed to have stopped for me, except for when the food was placed outside the door of my room."

Bilal still feels anxious and lonely, and he has become more paranoid. "I often dream that I am alone in the house and the lights are all off. It is like there is no one else....like a horror movie," he laughs lightly. "I'd rather be paranoid than vulnerable."

Many have been diagnosed with post-Covid conditions that include anxiety, depression and post-Covid stress disorder, a kind of PTSD, which "can happen after a deeply threatening or scary event". Its symptoms include insomnia, flashbacks, low self-esteem, and painful and unpleasant emotions.

Speaking about the Covid-19 pandemic, Dr Sana Zubairi, a holistic health practitioner, running her own private practice, says: "It's taken everyone by surprise though reaction to it has been all over the spectrum. People have responded in many ways: anxiety, fear, paranoia, responsibility or complete denial. When the virus took over, a lot of lives were lost. And that gave rise to a lot of grief, more fear, more anxiety and paranoia. There are still some who are practising quarantine in their homes and not venturing too far, while some choose to go about as if it had never happened."

She says: "Mandatory quarantine, whether at home or in an assigned quarantine zone, has been nerve-wracking. Not knowing when one will be able to go home or come out of their room has been a nightmare. On top of this, one also had no way of knowing if the others in their home have been infected, especially senior citizens.

"Anxiety, depression, fear, paranoia, fear of getting the virus and dying or being debilitated, fear of losing loved ones, being laid off, losing financial security are just some issues that have been seen during this time."

Dr Zubairi says: "Support for mental and emotional health is key! Counsellors, psychiatrists and psychologists are having to increase their capacity due to the overwhelming numbers turning to them for support. Reaching out to mental health specialists is providing individuals space and support. Having to not only manage themselves and their families, they have to bear painful moments and provide consistent support week after week. Decrease in physical and emotional strength, stamina, resilience is being witnessed."

She further says: "Building resources is essential! Speaking to mental health specialists, indulging in hobbies, looking after one's fitness and nutrition are just some of the many resources needed for us to get through these troubling times."
(By Lubna Jerar Naqvi Dawn, 13, 17/05/2021)

34 Covid-19 cases reported among international travellers in two weeks at Karachi airport

Five more Covid-19 positive cases were detected among international travellers arriving at the Jinnah International Airport, Karachi, on Wednesday, bringing the total number of such cases in two weeks to 34, health department sources told *Dawn*.

Most of these passengers arriving from the UAE, Saudi Arabia and Iraq had been quarantined at the isolation centre in Bhitaiabad, the rest at the Airport Hotel while one of them had been shifted to the Jinnah Postgraduate Medical Centre.

Seven of the passengers were deportees.

"The health department is conducting genomic sequence studies of the Covid-19 samples (collected from these travellers) to see which variant is involved," said Sindh Health Minister Dr Azra Fazal Pechuho during a meeting with the National Command Operation Centre (NCOC) members in which she participated via video link on Wednesday.

The minister also observed that international travel was exacerbating the spread of infections, calling for more stringent measures at airports with rapid antigen testing as well as PCR (Polymerase chain reaction) and ensuring that positive travellers were quarantined. "International travellers may not exhibit symptoms till a week or so after landing and become a source of transmission within their communities as quarantine on international travellers is not being implemented."

She expressed the fear that there would be a spike in Covid-19 cases as happened last year when there was a three-fold increase in infections after Eid holidays. "People are travelling back and forth for Eid holidays. The risk of spreading infections is high as we are already seeing an increase in Covid positive cases."

The minister suggested that the railway operations should be curtailed for at least the next seven to 10 days and the permission for 70 per cent occupancy in rail carriages reconsidered.

She also emphasised that non-pharmaceutical interventions (the actions apart from getting vaccinated and taking medicines that people can take to help slow the spread of illnesses) should be maintained as not doing would make things worse with regard to the Covid-19 situation.

Secretary of health Dr Kazim Jatoi and deputy secretary Dr Mansoor Wassan were also present in the meeting.

Meanwhile, more than 2,000 cases were reported for the first time in Sindh since Nov 2020.

According to the health department, the province has reported 2,076 new coronavirus cases over the past 24 hours, a significant jump from yesterday's 1,334, and marking the first time the province recorded more than 2,000 daily infections since November 2020.

Sindh had reported 2,003 coronavirus infections on Nov 9, 2020.

The provincial tally of cases has reached 303,323 while the death toll has risen to 4,854 after 19 more people succumbed to the virus, according to a statement by the Chief Minister House.

In the same 24-hour period, 611 people recovered from Covid-19 while 20,421 tests were conducted.
(By Faiza Ilyas Dawn, 13, 20/05/2021)

Restrictions to stay amid Covid surge

The Sindh government decided on Thursday to maintain the coronavirus-related restrictions currently in place given the surge of infections observed post Eidul Fitr. Chairing a meeting of the Provincial Task Force on Coronavirus to review the situation, Sindh Chief Minister Syed Murad Ali Shah expressed alarm at the spike in coronavirus cases.

On Eidul Fitr, May 13, there were 1,232 cases and after six days of Eid 2,076 infections were detected in a single-day, the meeting was apprised. "A record 20,421 coronavirus tests were conducted yesterday [Wednesday] out of which 9,000 were in Karachi," he said, adding that 2,076 persons had tested positive. This indicated a positivity rate of 10.2 per cent, noted the CM, adding that the positivity rate for Karachi stood at 16.82 per cent.

The meeting was apprised that data from May 13 to 19, the metropolis saw a 28 per cent positivity rate and 16 fatalities in East district, 17 per cent positivity rate and six deaths in South district, 14 per cent and eight fatalities in Central and 11 and 10 per cent positivity rates in West and Korangi districts, respectively.

Meanwhile, Hyderabad reported 10 per cent positivity rate and 21 deaths, Sukkur 14 per cent positivity rate and one death, in the same duration. A total of 7,837 coronavirus cases were detected and 67 persons succumbed to the pandemic in the past one week, the meeting was told. "This shows that the cases are on the rise in Sindh, and we are finding it hard to ease the restrictions in the province," said Shah.

Members of the taskforce and others present at the meeting, including provincial ministers, chief secretary, law enforcers and representatives from the World Health Organisation, advised that current restrictions be upheld and tougher measures be taken if necessary. The Sindh government's decision comes on the heels of the National Command and Operation Centre's announcement to lift a number of restrictions imposed to curb the spread of the virus.

These included the reopening of educational institutions in districts with a positivity ratio lower than five per cent and the resumption of outdoor dining. At the NCOC meeting on Wednesday, Sindh Health Minister Dr Azra Fazl Pechuho had apprised that the rate of infections in Sindh had increased three folds last year after Eid.

This year, she had said, the pattern is expected to hold. But as the baseline is higher this time, the number of positive cases will also likely be higher, she added. The health minister had further noted that people travelling during and after Eid holidays increased the risk of the infection spreading further. She had recommended that railway operations be curtailed for another week at least.

Earlier this week, the Sindh government did, however, begin relaxing some non-pharmaceutical interventions (NPIs) - public transport has resumed, bakeries and milk shops may remain open till midnight and restaurants may offer takeaway and drivethrough services past 6pm. The provincial taskforce is to meet again on Saturday (tomorrow) to review the situation further.
(By Newspaper's Staff Reporter The Express Tribune, 04, 21/05/2021)

PMA opposes NCOC decision to relax Covid-related restrictions

The Pakistan Medical Association (PMA) on Thursday opposed the NCOC (National Command and Operation Centre) decision to relax Covid-related restrictions on commercial activities, schools, offices and other workplaces.

"The PMA believes that the decision to lift the coronavirus-related restrictions is a bit early. This hasty decision can take us towards the resurgence of Covid-19 given the growing number of cases after Eid holidays," said a statement released by the association. The decision should have been taken in the next week after a detailed review of the situation in the country, it added.

The association reminded the government of its "ill-advised decision" taken a few weeks back with absolute disregard to experts' opinion and led to a steep rise in coronavirus cases, particularly in Punjab, Islamabad and Khyber Pakhtunkhwa.

"We regretfully say that the resurgence of the coronavirus always takes place due to the government's flexible attitude in implementing the standard operating procedures. We cannot overcome the situation with this attitude. Whichever sector is opened, there should be strict implementation of precautionary measures."

'Decisions should be taken in consultation with provinces and stakeholders'

The association expressed concern over the coronavirus situation in Sindh and said:

"The positivity ratio is rapidly increasing and hospital beds are getting short. If the situation is not controlled, the increasing burden of disease will further rise and might lead to a Punjab-like situation."

It suggested to the Sindh government to closely monitor the situation and take the decision of lifting coronavirus-related restrictions according to its own circumstances. "Although we have been calling for a uniform policy across the country, decisions should be taken in consultation with provinces and stakeholders."

According to the NCOC, till Thursday, 890,391 people had been affected by the coronavirus and 19,987 had died. During the last 24 hours, 4,207 cases were reported positive and 131 people died of Covid-19. Our testing capacity is low which should be enhanced to 50,000 daily in each province.

Age relaxation for vaccination

Meanwhile, the provincial health department has announced that all Pakistanis aged 18 years and above, who hold a valid passport and a visa for studying or working abroad, can get vaccinated from Friday (today) from any Covid-19 vaccination centre near them.

"There has been a country-wide decision to register all those who hold valid work and student visas abroad as many countries require proof of vaccination upon entry," said a health department spokesperson. The vaccination facility at the Expo Centre is open for 24/7, he said.

"We urge all medical staff, including general practitioners at private hospitals, to get vaccinated as soon as possible. Refusal to do so will put the community at large at risk and will result in strict administrative action," he added.
(By Newspaper's Staff Reporter Dawn, 13, 21/05/2021)

Sindh govt extends Covid-related restrictions by two more weeks

The Provincial Task Force on coronavirus, keeping in view the rising trend of new cases and increasing death rate, on Saturday decided to continue with the ongoing restrictions for the next two weeks with strict standard operating procedures (SOPs) across the province.

The meeting, presided over by Chief Minister Syed Murad Ali Shah at CM House here, was attended by Provincial Ministers Dr Azra Fazal Pechuho and Saeed Ghani, Adviser on Law Murtaza Wahab, Chief Secretary Mumtaz Shah, IG Mushtaq Maher, Commissioner Karachi Naveed Shaikh, Additional IG Karachi Imran Minhas, Dr Abdul Bari, Dr Faisal, representatives of the Corps-5 and Rangers and other stakeholders.

The meeting was told that a record number (24,299) tests were conducted on May 21 against which 2,136 cases were diagnosed to be positive, constituting 8.8 per cent detection rate, and 22 patients died on May 21 alone which was a dangerous trend. It was disclosed that 17,197 travelers landed at Jinnah Terminal from May 5 to 21 and their rapid antigen tests were conducted there and then, as a result 38 or 0.22 percent of them came positive.

Reviewing the post Eidul Fitr scenario, it was revealed that on Eid day (May 13), there were 1,232 cases which went on abnormally increasing to 2,136 on May 21.

At this the chief minister said that it meant 904 cases increased within eight days since Eid.

The meeting was told that during the last seven days, from May 15 to 21, the number of cases in Karachi East had shown a 27 per cent detection rate, South 15 per cent, Central 13 per cent, Korangi, and West and Malir 10 per cent.

During the said week Hyderabad and Dadu showed 11 per cent detection rate.

The chief minister was told that during the last 30 days 232 Covid-19 patients died, of them 164 or 71 per cent in hospitals on ventilators and 42 or 18 per cent off ventilators and 26 or 11 per cent at their homes.

At this the chief minister said that there were 154 deaths in April and during three weeks of 232 deaths were reported. "It means the situation is worsening," he added. Keeping in view the serious situation of the cases and growing number of deaths, the chief minister decided to continue the ongoing restrictions for next two weeks and review it again on June 6/7. He also decided that all the recreational places, including Seaview, Hawkesbay, amusement parks etc, would remain closed, however walking tracks in the parks would remain open only for walking/jogging purposes.

It was decided that the business hours would be from 6am to 6pm. All shops and supermarkets would close their business activities at 6pm. "The educational institutions in the province would be opened when the Covid-19 situation would improve," the chief minister said, and directed the education minister to take necessary measures to vaccinate the teachers at all the educational institutions.

The meeting decided that intercity transport would operate at 50 per cent of their seating capacity. In case of violation, the transporters would be fined heavily.

(By Newspaper's Staff Reporter Dawn, 14, 23/05/2021)

Sindh restricts 'unnecessary movement' past 8pm

With 261 fatalities recorded in the province this month, the Sindh government further tighten Covid-19 restrictions on Monday. Among other measures, a ban has been imposed on unnecessary movement after 8pm from today (Tuesday) onwards.

Those who have to avail medical services or are out for a necessary task would be permitted to travel, however.

Chairing a meeting of the Provincial Task Force on the Coronavirus, Sindh Chief Minister Syed Murad Ali Shah observed that nearly half of the active cases in the country are in Sindh alone.

Current trend

As the third wave of the pandemic sweeps through Sindh, the meeting was apprised that 261 coronavirus-related fatalities have been reported in May thus far.

The past week - May 17 to 23 - saw 19 deaths in Karachi' East district alone, nine in South and 12 in Central district. At least 22 deaths were recorded in Hyderabad, where a positivity ratio of over 10 per cent was over, the meeting was briefed.

With 154 fatalities reported in April and 151 in March, May's death toll stands much higher, the meeting was told.

Between Sunday and Monday, Sindh detected 1,529 fresh infections, Punjab detected 802, Khyber Pakhtunkhwa 470, Islamabad 106, Gilgit Baltistan 18, Balochistan 66 and Azad Jammu and Kashmir 69, told officials.

Ban on movement

Hearing these figures the CM remarked that the province has the highest number of cases.

Warning of further restrictions, he stressed on the implementation of coronavirus-mandated standard operating procedures (SOPs). He directed the district administrations to ensure implementation of SOPs and the related restrictions. "I'll personally pay surprise visits around the city to inspect implementation."

Commercial activity has been restricted to 6pm, citizens will have two hours to return to their homes, said Shah.

"After 8pm the police will place barriers on roads to discourage unnecessary public movement," he added, directing district administrations to switch off lights in jogging parks by 8pm.

Only people heading out for medical needs or for necessary tasks will be permitted to travel past 8pm, said the CM, urging citizens to stay home.

If people cooperate and cases reduce in two weeks, restrictions may be eased, he added.

Daily count

Meanwhile, Sindh reported 16 more fatalities and over 900 fresh infections on Monday.

According to a statement issued by the Chief Minister's House, 910 more persons were diagnosed with Covid when 11,388 samples were tested.

The pandemic has claimed at least 4,936 lives in the province thus far and a total of 310,540 infections have been recorded.

As many as 282,410 persons, including 814 between Sunday and Monday, have also recovered from the infection, said the CM.

At least 23,194 persons are under treatment for Covid, he elaborated further. Of these, 22,229 are in home isolation, 22 at isolation centres and 943 are admitted at different hospitals. The condition of 897 patients is critical, with at least 68 shifted to ventilators, added Shah.

Of the 910 new cases, 502 were detected in Karachi - 241 from East district, 1,174 from Central, 85 from South, 38 from Korangi, 16 from West and eight from Malir district.

Meanwhile, Hyderabad reported 116 new cases, Tando Allahyar 29, Badin 27, Shaheed Benazirabad 26, Dadu and Larkana 23 each, Jamshore 18, Kashmore reported as many, Khairpur and Mirpurkhas each reported 17, Thatta 16, Naushero Feroze 15, Ghotki 12, Matiari 11, Jacobabad 10, Sanghar nine, Umerkot eight, Sukkur three and Tando Muhammad Khan reported one new case.

Covid restrictions currently in place

Commercial activities permitted from 5am to 6pm, including pharmacies and super stores. Bakeries and milk shops may remain open till midnight

Movement of citizens, barring medical and other emergencies, past 8pm has been restricted Public transport - intercity, intracity and interprovincial - permitted but at 50 per cent occupancy and with Covid-related SOPs Both indoor and outdoor dining has been banned. However, delivery, takeaway and drive-through services are allowed Create strong passwords All educational institutions, including schools, colleges and varsities, are to remain closed for another two weeks Fridays and Sunday businesses will remain closed across the province, except in Hyderabad, which will observe Fridays and Saturdays as closed days instead.

(By Newspaper's Staff Reporter The Express Tribune, 04, 25/05/2021)

Vaccinators' strike hits inoculation drive in rural areas

The drive of Covid-19 vaccination in rural Sindh suffered a blow on Wednesday when more than 1,300 vaccinators went on strike following the government plan to re-examine their recruitments in line with court orders, sources and officials said.

They said the health department had recently issued letters to 1,302 vaccinators recruited in 2019, informing them about the process which had been initiated in line with court orders that their merit and ability would be rechecked for their current jobs.

"This is not fair," said one of the vaccinators wishing not to be named. "The Sindh government is presenting a wrong interpretation of the court orders. It's only to deprive hundreds of qualified vaccinators to replace them with blue-eyed persons and create job opportunities which would lead to bribery and other financial corruption."

Industrialists warned to get their workers vaccinated or face closure

He said the vaccinators were appointed after they cleared National Testing Services exams and multiple interviews. In a protest, he said, these vaccinators had gone on strike in 23 Sindh districts where vaccination programmes for prevention of 11 different diseases in children would also suffer.

Workers' vaccination

Meanwhile, an important meeting was held under the chairmanship of Chief Secretary of Sindh Syed Mumtaz Ali Shah at Sindh Secretariat that asked the industrialists and traders to vaccinate their workers against the coronavirus, warning that the sectors which did not follow such directives would face closure.

"The meeting was briefed on implementation of coronavirus SOPs, vaccination campaign and control over prices of essential commodities," said a statement issued after the meeting. "The meeting was attended by all the divisional commissioners and deputy commissioners and Senior Member Board of Revenue Allamuddin Bullo."

Briefing the meeting, health department officials said 285 centres for coronavirus vaccination had been set up in the province. So far, 11,06,384 people had been vaccinated against the coronavirus.

The chief secretary directed that the number of vaccines be increased and more vaccination centres be set up in the province.

"All industrialists and traders should vaccinate their workers against the coronavirus and the government is also setting up vaccination centres in industrial areas. The sectors which do not vaccinate the workers will be closed," the statement quoted the chief secretary as saying.

The chief secretary, the statement said, directed all the commissioners and deputy commissioners to strictly implement the SOPs and said that the orders issued by the home department should be strictly followed and action be taken against violators.

He also directed the commissioners of Karachi and Hyderabad to strictly enforce the prices of essential commodities as fixed by the government, including prices of poultry. He directed them to take strict action against profiteers and hoarders. He said that all the assistant commissioners and mukhtarkars use their judicial powers to enforce the SOPs and prices.

(By Newspaper's Staff Reporter Dawn, 13, 27/05/2021)

People urged to get crucial second dose of Covid-19 vaccine

Over 100,000 people, who received their first dose of Covid-19 vaccine, have not reported back to the government-run adult vaccination centres for their second vaccine dose, leaving them very vulnerable to the disease, health department officials stated on Thursday.

According to health department sources, a total of 405,673 people have been scheduled for the second vaccine dose till date since the vaccination process started in February this year. Of them, 300,949 have got the second dose whereas 104,724 have not returned for their second dose. These individuals included health workers.

"We got contact details of all absent individuals and are reminding them for their second dose through text messages as well as by calling them. I think some of them might have thought that a single dose was sufficient or must have been discouraged by myths and fabricated reports on social media," said Dr Samreen Ashraf Qureshi, provincial focal person for Covid-19 vaccination, emphasising that all vaccines were safe and effective.

So far, the government has granted approval to five Covid-19 vaccines — Sinopharm, Sinovac, Sputnik, AstraZeneca and CanSino. Except the CanSino vaccine, whose administration has recently been initiated at government-run facilities, all three vaccines are double-dose. The Sputnik vaccine was being administered at private facilities.

'Getting only one dose doesn't provide a person with full protection against the disease'

Explaining why it's important to get the second vaccine dose, Dr Qureshi said getting only one dose didn't provide a person with full protection (against the disease) and didn't give him or her full effectiveness of the vaccine. The gap between the first and second doses for the Sinopharm vaccine is 21 days, 28 days for Sinovac and four to 12 weeks for AstraZeneca. The efficacy of AstraZeneca increases a lot if its second dose is administered with a gap of 12 weeks.

"If a person has lost more than the required time, he or she must not waste more time and get the second dose.

"Second, the department also ensures that an individual gets his or her second dose from the same vaccine. It's true that people can still fall ill with Covid-19 even after getting vaccinated, but the vaccine reduces disease severity and the need for hospitalisation."

Dr Qureshi described the feedback at the Expo Centre vaccination facility as very encouraging and said currently 5,000 to 6,000 people were getting the vaccine jab daily and the department was prepared to handle a greater number of people as its vaccinating capacity was 25,000 to 30,000 persons daily.

Health department sources said the provincial government was setting up vaccination centres in industrial areas, press clubs and educational institutes to facilitate mass vaccination to restore normal business, trade and industrial activities.

According to the health department, 285 adult vaccination centres have been set up in the province and 1,106,384 persons have received the anti-Covid jabs thus far.

(By Faiza Ilyas Dawn, 13, 28/05/2021)

Karachi University gets Covid vaccination centre

The University of Karachi in collaboration with the Sindh Health Department established a Covid-19 Vaccination Centre at CBSCR Research Institute, International Centre for Chemical and Biological Sciences, University of Karachi. CM's Advisor Barrister Murtaza Wahab on Saturday inaugurated the vaccination centre which would provide free of cost vaccinations to teaching and non-teaching staff and students.

"We all need to eradicate the negative propaganda regarding vaccination through our actions and we must get the vaccination at the earliest," Wahab said.

The adviser said that he was grateful to the management of the University of Karachi for recognising the need to set up a vaccination centre on the campus through which the faculty and administrative staff of Karachi University, as well as thousands of students coming from all over the country, would be able to get free vaccinations.

Meanwhile inaugurating the Botanical Garden at Karachi University Wahab said: "as a nation, we need to plant trees to improve the environment as plants will benefit future generations for decades to come."

The Botanical Garden and Herbarium was named after varsity's former vice chancellor Professor Dr Syed Irtafaq Ali. The university of Karachi has more than 43,000 students and if every student takes responsibility for taking care of a plant, the campus would present a beautiful look.

Pandemic claims 11 lives

As many as 11 more patients of novel coronavirus disease died overnight lifting the death toll to 5,014 and 1,342 new cases emerged when 18,340 tests were conducted.

According to a statement issued on Saturday, the fresh fatalities have put the death rate from the pandemic at 1.6 per cent death, whereas the current detection rate was 7.3 per cent current.

The statement said that currently 25,963 patients were under treatment, of them 24,931 were in home isolation, 1,010 at different hospitals and 22 patients in isolation centres. Condition of 962 patients was stated to be critical, including 79 shifted to ventilators.

According to the statement, among the 1,342 new cases, 781 have been detected from Karachi, 72 Hyderabad, 36 Sukkur, 34 Ghotki, and 32 Kashmore-Kandhkot.

(By Newspaper's Staff Reporter The Express Tribune, 05, 30/05/2021)

An engineer counters pandemic blues with stories

The pandemic brought life as we know it to a standstill. Loneliness and boredom engulfed many people as they were confined to their homes and restricted from engaging in social activities. Sanjay Raja saw the bustling metropolis enveloped in silence and found a way to bring adventures to people's door steps in the form of books.

Sanjay has a long list of friends whom he has never met but he knows which stories will enthrall them. From Sargodha to Islamabad, from Quetta to Khairpur, this Karachiite has sent over 400 books to people across the country.

Some he entertained with the joy of fiction while to others he would send informative books on a variety of subjects, including science and politics. Often, people would ask him to send books they could not easily find in their area and Sanjay would happily comply.

The joy of reading

Sanjay, who is an engineer by profession, had launched with his peers a unique SMS campaign called 'Knowledge is Power'. They had a network of students across 34 varsities in Pakistan and would share excerpts and aphorisms. "We used to send a couple of messages on different topics and attracted thousands of students."

Building on the SMS campaign during the lockdown last year Sanjay initiated a drive to get books to bookworms across the country.

Initially, he reached out to his friends and followers on Twitter and sought donations of books. This did not gain much traction in the beginning, he tells The Express Tribune. He spent roughly Rs20,000 buying books out of his own pocket.

"But [then], a girl from Gulshan-e-Maymar sent me over a 100 books," he shared gleefully.

As the drive grew bigger, Sanjay was soon sending books to public libraries. The first such request he received was from Quetta's Shaheed Baz Muhammad Kakar Library. He was then connected to a library in Balochistan's Wadh, Khuzdar district, through a doctor employed at Dr Ruth Pfau Civil Hospital. He sent piles of books there.

Another 50 books were packaged and delivered to a library in Khairpur. "Soon I was receiving requests from different cities across the country. I have over two dozen requests currently pending," he told The Express Tribune.

On his own bookshelf, Sanjay has only six books for he can't stop giving them away. "I love reading. A book can change someone's life forever."

At your doorstep

The majority of individuals who contact Sanjay for books are those who can easily afford them. "But it is not so easy to find the book of your choice at your doorstep," he said, adding that a lot of his time is spent hunting down the particular book someone has asked for.

The lockdown made this harder. Major bookstores had their inventories impacted because books could not be imported and deliveries within the country were interrupted due to coronavirus-related restrictions.

"There was one request that I could not fulfil," he lamented. A medical student from Jamshoro wanted a few books that he could not arrange. "For those books I even tried Lahore and Islamabad markets but failed."

For his own deliveries, Sanjay relied on a private courier service at first but soon turned to the Pakistan Post, which he found to be the better option.

Booklover's gift

For Sanjay the joy of reading is only superseded by sharing a good story with another person. He will frequently knock on the doors of friends and acquaintances and drop off a book he has just finished while en route to home or work.

"The most difficult thing for anyone is to give away a book they like. But I request everyone to not keep your favourite books to yourself but to share them with others."

Laughingly he shared that his wife is at times perplexed by his insistence on giving away books. She questioned why he would spend so much money purchasing them for other people. "But she knows my happiness lies here," he added, lovingly.

The idea of sharing and gifting books has been appreciated, he said, adding that people in his circle have started sharing books among each other.

A female school teacher in Jamshoro has recently started a similar drive, said Sanjay, beaming. He dreams of setting up a book corner near Teen Talwar, where "anyone can find a book they like and can leave behind the books they have read for others".

This story is part of a weekly series that seeks to bring to light the unsung heroes of Karachi - the hawkers, traders, doctors, teachers, engineers, lawyers and daily-wage labourers. It is they who make Karachi the city of lights.
(By Sameer Mandhro The Express Tribune, 05, 31/05/2021)

\$130m okayed to buy 10m doses by June 30

As the National Command and Operation Centre (NCOC) opened vaccination for people over 18 years of age from Thursday, the government on Monday approved a \$130 million grant (about Rs20 billion) to purchase 10m doses of Covid-19 vaccine before June 30.

The estimated amount required to inoculate the target population of 72m against coronavirus is \$1.5bn.

Meanwhile, Minister for Planning, Development and Special Initiatives Asad Umar said the government was aiming to vaccinate maximum number of people before Eidul Azha to avoid imposing lockdown.

According to an official statement, the Economic Coordination Committee (ECC) of the Cabinet was specially called to provide technical supplementary grant of \$130 million (Rs20 billion) to the National Disaster Management Fund to ensure timely procurement of vaccines for effective national response to the Covid-19 pandemic. The funds will be utilised for the procurement of 10m doses during June.

The decision was taken at a hurriedly-called single point ECC meeting presided over by Finance Minister Shaukat Tarin and attended by three, out of 14, other members.

The meeting decided to review the need for additional funds during the new financial year and make further allocations if required in the budget.

The administration of vaccine will be the responsibility of the Ministry of National Health Services (NHS) and provincial health departments.

The meeting was told that Pakistan was currently managing the third wave of Covid-19, which was more challenging than the previous waves, whereas the situation in neighbouring countries, particularly in India, was alarming where the average death rate exceeded 3,500 per day.

Besides, since the arrival of vaccines, most governments were primarily focusing on vaccinating their population as the principal instrument of their preventive strategy against the pandemic.

The NHS ministry was initially made responsible to procure vaccine for which it was allocated \$150 million, and which had already been expended and committed on account of finalised contracts for purchasing the vaccine.

However, the National Coordination Committee (NCC) on Covid-19 led by Prime Minister Imran Khan on April 23, 2021 assigned the responsibility of vaccine procurement to the NDMA, which had been given the target of arranging doses for a population of 70 million by December 2021.

The ECC was also informed that the NDMA had established a Vaccine Procurement Cell to purchase the vaccine from international market and governments.

The authority would procure the vaccine and hand over the consignments to the NHS ministry at airports or ports for further handling, storage, transportation and delivery in various parts of the country.

The meeting also advised the NDMA to explore the possibility of purchasing vaccine from external financial resources through the Economic Affairs Division. The option to reimburse the expenditure related to procurement of doses through development partners may also be explored.

On the other hand, the decision to start vaccination of people over 18 years was announced by Asad Umar.

In a tweet, Mr Umar, who also heads the NCOC, said: "In today's NCOC meeting it was decided to start scheduling vaccination of registered 18 plus from Thursday the 3rd of June. With this step the vaccination of all eligible age groups would be carried out. Please register as soon as possible."

Almost 100 per cent of the population that can be inoculated has become eligible to receive the vaccine as a result of this decision and 39 million people in the age bracket of 18 to 30 years will benefit.

An NHS ministry official, who is not authorised to speak to media, said the number of people over 50 years of age was 27 million, around 12 million fell in the age bracket of 40 to 50 years while 22 million people were in the age group of 30 to 40 years. The official said though 100pc population eligible for vaccination would be able to get the jabs from June 3, so far less than five million people had been partially or fully vaccinated.

"People should get inoculated at the earliest as the government has been using all possible resources to ensure uninterrupted supply of the vaccine," he said.

On the other hand, the NCOC data reported 2,117 new cases and 43 deaths in the last 24 hours, with the positivity ratio recorded at 4.05pc.

As many as 448 patients were on ventilators while the number of active cases was 59,033. Besides, 4,280 patients were being treated in hospitals across the country.

Meanwhile, Asad Umar said lockdowns were no more solution to contain the virus.

Briefing media after attending the meeting of the National Coordination Committee (NCC), the minister said vaccination was the only way the pandemic could be tackled, which was why the government had decided to run a massive drive to achieve the target of inoculating 70 million people, adds APP.

Mr Umar said the NCC meeting, which was presided over by Prime Minister Imran Khan, endorsed the vaccination drive strategy prepared by the NCOC.

"We want to administer vaccines to a maximum number of people in June and July before Eidul Azha to avoid imposing lockdown during the festival," the minister said.

He said the forum took some difficult decisions during the last 10 days of Ramazan and Eid but they proved beneficial as the positivity ratio came down from around 11 per cent to 4pc.

However, in Sindh the pandemic was still spreading, he said, adding that Covid-19 had not ended yet and people should still follow SOPs.

The minister said positive results were seen in countries where the rate of vaccination was high, adding that in Pakistan, so far, about 5.3 million people had been inoculated.

He said there was no issue of vaccine availability as the government had already arranged 10 million doses while 10m more would become available in June and another 10m in July.

He said to make the drive successful the government would engage various stakeholders, including media, bar councils, religious scholars and trade bodies.

(By Kahleeq Kiani & Ikram Junaidi Dawn, 01, 01/06/2021)

PakVac launched

THE news on the vaccine front in the country is adding to a cautious optimism that the worst of the third wave is over, or at least it is headed in that direction. Tuesday saw the inauguration of an antisera processing plant and the launch of 120,000 doses of

PakVac produced locally from the Cansino vaccine concentrate under the fill-finish operation, which is the final step in the overall manufacturing process.

Meanwhile, concentrate for another 900,000 doses has been procured for processing.

According to the National Institute of Health, the aim is to produce 3m doses per month as well as the raw material for the vaccine. That would be sufficient for 3m people on a monthly basis to be fully inoculated as it is a single-dose vaccine.

Despite being the fifth largest internal market, Pakistan lags far behind in the biopharmaceutical industry that comprises vaccines and high-cost recombinant biological drugs. It imports all its vaccines, and produces only a few antisera such as for rabies and snake venom, based on simple technology that has been around for decades. No modern vaccines or any other biological products are produced from scratch in this country.

Until a few years ago, the measles vaccine was being processed here under the fill-finish function. The same facilities at the National Institute of Health have been revived for processing PakVac from the Cansino concentrate. The fill-finish step is a critical one that requires quality assurance and proper cold chain management for which CanSinoBio experts from China are lending their technological assistance.

The Covid-19 pandemic has led to a shifting of priorities in the health sector: one of them is the importance of funding vaccine research. International organisations, such as the WHO, and Gavi the vaccine alliance are also promoting the idea of helping countries operationalise their existing unutilised capacity to produce vaccines. Similarly, there is now a global will to assist with technology facilitation and transfer that can enable developing countries to produce their own vaccines and recombinant biological drugs. Pakistan must seize the moment to make up for lost time. The government should open up the biopharmaceutical sector to public-private partnership, or even to the private sector independently, to develop the latest mRNA class of vaccines. It can incentivise such ventures by offering tax holidays, facilitating the import of machinery, etc. A window of opportunity is beckoning Pakistan, and the country must not squander it.

(By Editorial, Dawn, 06, 03/06/2021)

PakVac rollout

In a bid to inoculate a significant portion of the population amid a lethal, third wave of the pandemic, *Pakistan* has begun rolling out its first locally-processed coronavirus vaccine. This PakVac vaccine has been developed with considerable help from China's state-run pharmaceutical company CanSino. Their CanSino Bio vaccine is being imported in a concentrated form — and formulated, sterilised and packaged as PakVac at the National Institute of Health in Islamabad. Health officials claim that the vaccine, which was one of the first to undergo clinical trials in Pakistan, has a 74.8% efficacy at preventing symptomatic cases and 100% at preventing severe disease.

While the initiative is laudable, this is nowhere close to a “revolution” from any stretch of the imagination. Politicians, as usual, seem to be gloating excessively about it without mentioning a single significant reason as to how this would help with the overall vaccination drive — will it help produce more vaccines in a shorter period of time or will it cost us considerably less? Regardless, the vaccination drive, which has now opened up to all above the age of 18, is going rather well as 1.99 million people have been fully vaccinated. Citizens are surprisingly impressed and quite satisfied with the whole process that is seamlessly being carried out across the country. If somehow PakVac can add to this then all the more appreciable.

However, while we must be steadfast in our goal at achieving herd immunity, we must not lose the overarching plot. The raging pandemic has unveiled the true nature of our healthcare sector and more importantly who has access to it. We should thank our lucky stars that what unfolded in India has not yet happened here. There is tremendous hope that things may go back to normal in the coming years but we seriously need to learn from what has happened. Just like they have with the inoculation drive, the authorities soon need to focus on rebuilding the tattered healthcare system.

(By Editorial, The Express Tribune, 14, 03/06/2021)

Sindh declares vaccination mandatory for all citizens

While the Sindh government has declared vaccination against Covid-19 mandatory for all citizens, authorities in Islamabad have decided that Pfizer vaccine will be administered only to pilgrims and other people going abroad.

Sindh Chief Minister Syed Murad Ali Shah, presiding over a meeting of the Provincial Task Force on Coronavirus at CM House on Thursday, announced the decision to declare vaccination mandatory for all citizens in the province.

He directed the chief secretary to give a month to government/semi-government/local government employees for getting themselves vaccinated and stop payment of salaries to those who failed to get themselves vaccinated by the end of June.

“We have to secure our citizens by taking some drastic measures,” Mr Shah said.

He directed the health department to establish vaccination facilities in every nook and corner of the province. “I want at least 300 basic health units to be declared vaccination centres in rural areas with a target of vaccinating 30,000 people per day,” he said.

Giving another target to the health department, the CM said five mobile vaccination teams should be established in every taluka. “We have 605 talukas and they must vaccinate at least 60,000 people per day,” he ordered.

The CM also directed the health department to give a target of vaccinating 10,000 people to 90 private hospitals already allowed to vaccinate people.

He also directed the health department to register more private hospitals for vaccination.

Pfizer vaccine

While a large number of people have been utilising their “contacts” to get Pfizer vaccine, which has arrived in the country in a limited number i.e. 100,000 doses through Covax, the authorities have decided that the vaccine would be administered only to those who intend to travel abroad.

Ministry of National Health Services spokesperson Sajid Shah told Dawn that Pfizer vaccine would be administered only to pilgrims and other people going abroad.

Different countries have allowed vaccines of their choice to waive of the quarantine period. However, majority of countries have included Pfizer vaccine in the list.

Sajid Shah said a large number of people, who had received their first jab and intended to travel abroad, were facing problem as to how they would prove that they had got first jab as vaccination certificates were issued after completion of vaccination.

“It has been decided that they will be issued partial vaccination certificates so that they can get second jab in the country where they want to travel,” he said.

Implementation of SOPs

After observing a downwards trend in implementation of coronavirus-related standard operating procedures (SOPs), the National Command and Operation Centre (NCOC) has directed the provinces to take action and curb the possible spread of disease in the country.

The forum has observed maximum compliance with the SOPs at hospitals and minimum compliance at businesses. Among the federating and administrative units, Islamabad has shown maximum and Balochistan has reported lowest compliance level.

A document of the NCOC, available with Dawn, shows that overall 50 per cent compliance level has been observed at airports, bus stands and railway stations. Islamabad remains on top in this regard with 74pc compliance level, followed by Gilgit Baltistan 65pc, Khyber Pakhtunkhwa 50pc, Punjab 49pc, Sindh 39pc and Balochistan 34pc.

Compliance level in public transport remains at 40pc, with maximum 66pc compliance level in GB, 52pc in Islamabad, 23pc in Sindh and 19pc in Balochistan.

In industry 38pc compliance level has been observed with 51pc in AJK, 40pc in Punjab and 31pc in Sindh.

In businesses, which observe minimum compliance, compliance level is 40.28pc with 56pc in Islamabad, 40pc in Punjab and 18pc in Sindh. Compliance level at 41pc has been observed at mosques and imambargahs with 51pc in Punjab, 39pc in KP and 22pc in Sindh.

Hospitals have reported 70pc compliance level with maximum 81pc in Islamabad and minimum 59pc in AJK.

At public places 66pc compliance level has been observed in GB and minimum 21pc in Sindh.

According to a statement, a NCOC session, chaired by its chairman Asad Umar, reviewed the implementation of the SOPs across the country.

“Forum expressed concerns over down trend on non compliance of SOPs. The Forum decided to take all possible steps to ensure implementation of SOPs along with pursuing the mass vaccination campaign. All federating units have been directed to check the growing trend of non implementation of SOPs to mitigate the possible spread of disease in the country,” it said.

Meanwhile, Mr Umar announced that the number of vaccination centres in the country would be increased from 1,700 to 4,000.

While inaugurating a vaccination centre at a shopping mall in Islamabad, he said because of the move crowd would decrease at other vaccination centres such as one at the Pakistan Institute of Medical Sciences.

“Islamabad is at the top in terms of vaccination and we want other cities to follow it so that herd immunity would be achieved at the earliest,” Mr Umar said.

“The acceleration of vaccination drive in the country being made possible by huge investment by the federal govt. So far the procurement of vaccine has reached nearly quarter of a billion dollars. Much more to be spent next year for the vaccines procurement,” he tweeted.

According to data of the NCOC, as many as 2,028 Covid-19 cases and 92 deaths were reported in a single day. The number of active cases was 53,099 as of Thursday and 3,927 of those patients were admitted to hospitals across the country.

(By Tahir Siddiqui & Ikram Junaidi Dawn, 01, 04/06/2021)

Covid-19 & education

EDUCATION and learning have suffered substantial, and in some ways permanent, setbacks in Pakistan during the pandemic. Schools were intermittently closed due to rising cases and ensuing restrictions, and though private, high fee-paying schools managed to take teaching online so students were not totally left behind, public and low fee-paying schools missed out in a huge way. For these schools, digital learning was and is simply not an option. For millions of students, not only did learning and teaching not take place during the closure period, there was also the serious problem of lost learning that occurs when students disengage from school. When students return to schools after each closure, teachers confront lower levels of retention and have to reassess their expectations of how much a student can catch up given how badly schooling was affected.

Compounding the problem, a World Bank estimate suggests that around 1m children will drop out of school as a result of income losses during the pandemic. Given that 22m children in Pakistan are already out of school, the additional dropout figure represents an increase of almost 4.2pc. A study conducted on the disruption of schooling during the 2005 earthquake in the northern areas showed that an entire cohort of students from three to 15 years of age at the time of the disaster had lower academic scores four years later, despite substantial remediation efforts. The pandemic-induced school closures – which have coincided with the three waves of Covid-19 – have brought similar, if not worse, disruptions.

When it comes to decisions on education, the role of the government leaves much to be desired. Aside from the hue and cry over university and college examinations, there has been no conversation about or support extended to the millions of children who have been pushed out of the education process during the pandemic. Reopening schools when cases are low is simply not enough, given how high the dropout rate is. What efforts are being made to re-engage students who have permanently left school? With households reporting a fall in income during the past year, what is the government doing to persuade poverty and hunger-stricken families that education is a priority?

The government has some serious work to do. As schools reopen, officials must acknowledge the terrible setbacks to education and devise a long-term plan. This strategy must address the digital divide as well as the huge blow to girls' education, already regarded as being of secondary importance in families where incomes are strained. Interventions must be planned around these challenges, given that with new variants and low vaccine coverage, a fourth and fifth wave are very real possibilities. As the government mulls its next steps for the educational sector, mass vaccinations and testing must be rolled out to ensure that future disruptions do not push learning towards an irrecoverable collapse.

(By Editorial, Dawn, 06, 04/06/2021)

Outdoor dining till midnight, commercial activities till 8pm allowed in Sindh

Chief Minister Syed Murad Ali Shah, presiding over the meeting of provincial task force on coronavirus, on Sunday allowed shopkeepers to continue their business activities from 5am to 8pm and also allowed restaurants to resume outdoor dining service till midnight from Monday (today) with strict standard operating procedures.

The meeting was told that the ratio of Covid-19 positive cases in Karachi had come down from 12.45 per cent on June 1 to 8.25pc on June 5. But it was observed that the death rate was still 1.6pc.

After discussion and deliberation, the meeting decided to relax some Covid-19 related restrictions so that people could start their business activities but simultaneously it must be linked to vaccination.

The chief minister decided to allow shops to do their business activities from 5am to 8pm. Earlier, the shops were allowed to operate till 6pm.

"This has been allowed on the condition that the shopkeeper and restaurant owners would vaccinate their staff members within the next two weeks," he said and added that after two weeks the government would start random checking of their staff.

Corona-related restrictions on physical classes also eased, marriage halls to reopen after two weeks

He hoped that the traders and the public would follow the SOPs.

Physical classes allowed

The meeting decided to open educational institutions for face-to-face classes from Class-IX and above with 50pc attendance from Monday (today).

The chief minister directed the education minister to start mass vaccination of teaching staff in all the educational institutions.

The meeting was attended by Dr Azra Fazal Pechuho, Saeed Ghani, Nasir Shah, Jam Ikramullah Dharejo, Murtaza Wahab, Qasim Siraj Soomro, Chief Secretary Mumtaz Shah, Inspector General of Police Mushtaq Maher and others.

Mr Shah directed the commissioner to open the Seaview and other beaches to the public but inform visitors through signboards/banners/media to follow SOPs.

Saloons would also operate under Covid-19 SOPs.

The meeting also allowed marriage halls to start holding marriage functions in open spaces after two weeks.

1.3m vaccinated so far

The chief minister inaugurated another Covid-19 centre at Expo Centre Hall-3.

Speaking on the occasion, he said that the vaccination drive was started on Feb 3 in Sindh and till today over 1.3 million people had been vaccinated in the province.

He said almost 90pc of the front-line health workers and 75pc policemen had been vaccinated in the province.

Talking about Karachi, the CM said that 800,000 people had so far been vaccinated in the city. "We have established 380 Covid-19 vaccination centres across the province, of them 115 are in Karachi," he said.

He added that Sindh had the capacity to vaccinate 200,000 people per day including 100,000 in Karachi.

"Today, we are starting Hall-3 of Expo Centre to vaccinate 15,000 people per day," he said.

He said that 250 mobile vaccination units had been activated in the province, including 157 in Karachi, to vaccinate people in the areas such as shopping malls, industrial areas, banking sector, bedridden and handicapped people.

"The objective is to establish five mobile units at every taluka level and for the purpose 630 mobile units would start operation very soon," he said.

He urged the people to avail home vaccination facility calling through four-digit helpline 9123.

CM insists on linking salaries with vaccination

Talking to the media, the CM reiterated his stance that the salaries of those government employees would be stopped who failed to get vaccinated during June.

"I am sure the private sector would also take similar steps," he said and added: "This is the only way to protect oneself and others."

Mr Shah said that vaccination had been declared mandatory for shopkeepers, transport workers, schoolteachers and for everyone. He said that the restrictions imposed to contain Covid-19 had produced positive results.

He said that the death rate in the province was lowest and the recovery rate highest.

Replying to a question, Mr Shah said that ever since the federal government came into power it was treating Sindh with abject bias.

"If the number of schemes and their allocation [for provincially executed projects for Sindh] in the public sector development programme (PSDP) for the past four years and the proposals for next year are taken into account, the PTI government's injustice with the people of Sindh will stand exposed," he said.

Giving details of the PSDP schemes, he said that in 2017-18 there were 27 schemes in the PSDP with an allocation of Rs27.38 billion, in 2018-19 the number of schemes was reduced to 22 with an allocation of Rs14.266bn.

In 2019-20 again schemes were reduced to 13 and allocation came down to Rs8.5bn. "In 2020-21 only 10 schemes of Rs8.3bn were given to Sindh and for 2021-22 only six schemes of Rs5bn have been proposed," he added.

He said that the federal government was financing the construction of provincial roads in Punjab but had completely ignored Sindh. (By Newspaper's Staff Reporter Dawn, 13, 07/06/2021)

Addressing vaccine hesitancy

The Punjab government decision to block the SIM cards of people avoiding anti-Covid jabs indicates that vaccine hesitancy is still widespread. Conspiracy theories as well as the fear of serious side-effects have created an air of paranoia. This seems to be the single biggest factor that is constantly hampering the inoculation drive. About 30,000 people across the country have failed to receive a second dose while millions more have yet to get the first. In such a situation, is it ethical to force the masses into getting the vaccine by imposing restrictions onto them?

Considering the aftermath in India, the devastating toll on the economy and healthcare sector in Pakistan, and the fact that people continue to blatantly flout SOPs, a considerable push in the form of incentives is needed since lives are increasingly at risk with each new wave. Even though the NIH has denied rumours that the government will "forcibly" administer the vaccine, the overall system should encourage and urge those who remain skeptical.

The Punjab government's decision has its pros and cons. Blocking SIM cards may be the easiest and cheapest way to coerce the lower- and middle-class in rural and high populated areas of Punjab to get vaccinated. However, it may not fare well for those who could face a sudden emergency situation. It is the job of the government to reach out to the people, not vice versa. Merely setting up 356 vaccination centres in 36 different districts will not do the job. These centres need to become pivot points from which information and awareness are perpetuated. These centres need to work within a considerable radius and reach out to people who haven't received their doses.

Measures taken by the Centre and the Sindh government, such as allowing only vaccinated people into malls and cinemas and threatening to suspend the salaries of government employees, seem to be less radical but equally effective. However, the absence of uniformity in the measures taken shows the lack of communication between the provinces, which is equally essential in times of crisis. If the authorities had enough foresight, a rigorous awareness campaign would have been devised from the get-go. Now that hesitancy has set in, monetary and other incentives should be provided to alleviate the paranoia. (By Editorial, The Express Tribune, 14, 14/06/2021)

Vaccine hesitancy



MY mother was excited to hear about discounted fares on PIA for over-50s who were vaccinated. Here's the rub: she's still too anxious to get on a plane because she doesn't trust the level of protection offered by the vaccine she received. Her conundrum highlights the flaws in carrot-and-stick approaches to public vaccination. We are not the first to think of incentives. From gold nose studs in Rajkot to cows in Thai villages, creative efforts to accelerate the pace of vaccination are underway. But there are mixed views on the extent to which incentives work. A Boston University study found that cash incentives boosted uptake among rich and poor alike, but that higher amounts of cash did not further increase take up. Additionally, those who were reluctant at the outset were not noticeably swayed by cash. States may be emptying their coffers to reward members of the public who would have come forward for a jab anyway.

True vaccine sceptics are unlikely to be incentivised. They may see rewards as cynical ploys or outright bribes. The challenge is greater in countries like Pakistan where vaccine hesitancy predates the Covid-19 pandemic. A recent study by Monica Martinez-Bravo and Andreas Stegmann showed that after the CIA ploy to find Osama bin Laden using health workers pretending to carry out vaccinations, child vaccination rates decreased by between 23 per cent and 39pc in areas with support for religious groups (used as an indicator of exposure to anti-vaccine extremist narratives).

And that's where the stick comes in. Punjab plans to suspend the SIM cards of the unvaccinated; Sindh plans to pause the salaries of government employees until they're jabbed. People will be held economically hostage until they relent. This may prove more effective than incentives, but how much more?

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There is a lively global debate underway about the human rights implications of mandating vaccinations. Some argue that getting vaccinated is a personal decision, and people have rights to liberty, privacy, protections against discrimination (different treatment for the unvaccinated), and freedoms of thought, conscience and religion (drivers of vaccine refusal). Others argue that these rights can be infringed upon for the public good. And what about the rights to health and safety for those who must mingle with the unvaccinated? Pakistan is unlikely to engage in a profound debate about such rights implications. But the government will have to deliberate the pros and cons of different approaches if vaccine take up stalls even after supply issues begin to be addressed.

In an LSE blog, Saher Asad, Javaeria Qureshi, Mariam Raheem, Taimur Shah and Basit Zafar cite a December 2020/January 2021 Economic Vulnerability Assessment survey run by the Centre for Economic Research in Pakistan in which one-third of respondents said they would not get vaccinated. The authors' analysis of this and other surveys did not find any correlation between vaccine hesitancy and respondents' socioeconomic status, location (urban or rural), or level of education. The analysis found that most hesitancy was driven by concerns about vaccines' safety.

This suggests that rather than push rewards or penalties, the government should double down on efforts to get broad public buy-in for a national vaccination programme. Existing plans for a billion-rupee awareness campaign are a good start, as are plans to 'push' vaccinations to people, for example, outside shrines.

But more is needed. Asad et al's finding that fear is a key driver for slow take up emphasises the need for awareness. This means more transparency (and less politics) about the efficacy of different vaccines. Credible interlocutors — not only doctors and scientists but also well-briefed community leaders such as imams — should also be tasked with promoting vaccination. Info sessions about vaccines should be planned at diverse locations: factories, mosques, construction sites. Simple explanations about how vaccines work, and why they matter, should be broadcast relentlessly on television and radio.

Asad et al also recommend that the government devise ways for people to publicise their vaccination. Social media hashtags would work for an online audience, but something with wider public appeal — a badge or reusable water bottle — would be more effective. This is important because the researchers found a significant discrepancy between the number of people willing to get vaccinated, and respondents' perceptions of how many will go for a jab. What better motivator could there be than a hearty recommendation by a cousin, colleague or co-congregant?

Finally, the government must clamp down on any risk of corruption or favouritism in the vaccine roll-out. Fears that a vaccine is expired, or that certain brands will only be available to 'first-class' citizens, will undermine the initiative's credibility. That's not a risk Pakistan can take.

(By Huma Yousaf Dawn, 07, 14/06/2021)

More vaccines needed

THE vaccination rate in the country has slowed in recent days and could result in a crisis if not addressed efficiently. After hitting the 130,000 mark for doses earlier this week, vaccine centres across the country on Thursday inoculated only 55,728 people, which includes 46,113 individuals who received their second shots. Less than 10,000 received their first jab that day. Though SAPM Dr Faisal Sultan initially dismissed concerns of a shortage, a special meeting of key federal government figures held later indicated otherwise. A press release issued after the meeting suggests measures are being taken to start the process of availing credit lines with the country's development partners so that timely payments can be made to vendors for a smooth supply of vaccines. Importing the vaccine requires liquidity, a requirement Pakistan can only partially address through domestic financing. There have been significant challenges for the government in approaching creditors such as the World Bank and ADB. Foremost is the fact that neither lender would approve financing for vaccines that are not WHO-approved — a reality that up until a month ago complicated matters for vaccine supply in the country. Only recently has the WHO approved two vaccines from China, which is where Pakistan hopes to get the majority of its vaccine supply from. These lenders also have stringent procurement rules regarding transparency and tenders which the National Disaster Management Authority, which has been tasked with procurement, must fulfil.

As the government approaches creditors and suppliers, it must ensure transparency in vaccine delivery and timelines so that members of the public do not find themselves groping in the dark. The most vulnerable and elderly must be prioritised for first and second doses, and at the same time, through awareness-building measures, the public must be kept engaged to make sure that interest in getting vaccinated does not wane. The time between when creditors are approached and the final financing is disbursed can often be a period of months, so the government needs to factor these realities in when it utilises its resources to expand vaccine operations and distribution.

It is a pity that Pakistan has as yet managed to administer only 12.7m doses in total, with just over 3m people fully vaccinated. With a target vaccine population of 70m, the total doses required are 140m — a figure that means that the road ahead for Covid-19 inoculation will be a long one strewn with several challenges. Many developing countries were dealt a blow when Covax vaccine delivery grounded to a halt earlier in the year, and most are still struggling to secure supplies as manufacturers fulfil commitments to richer countries that were the first to place orders and pay for them. As the economically weaker countries struggle with vaccinating their large populations, richer nations should know that the failure to curb Covid-19 will result in economic damage for everyone.
(By Editorial, Dawn, 06, 20/06/2021)

Vaccination hold-up

The government needs to take swift actions to make up for the gap in supply of anti-Covid19 vaccines in the country. Many vaccinations centres, including those in major cities of Karachi, Lahore and Rawalpindi, had to be closed towards the end of the last week after the vaccine doses ran out of stock. People approaching the various vaccination centres were sent back. While some of them were disappointed, some were vocally angry. In Lahore and Islamabad, people swarmed the Expo Centre demanding the provision of AstraZeneca jabs after the inoculations were halted due to a shortage. These people were the ones who intend to travel abroad and want to get vaccinated before the expiry of their visas.

While the vaccination drive has resumed with the government securing 1.55 million doses of SinoVac, the supply is small enough to last longer. The government has also signed an agreement with Pfizer Pakistan for supply of 13 million doses, but according to Dr Faisal Sultan, the de facto health minister, the delivery will be made towards the end of the ongoing year. There are reports of another 2 to 3 million vaccine doses coming up from China. The government needs to step up efforts for vaccine procurement from China and elsewhere so that the vaccination drive could continue without any more interruptions.

According to officials, at least 13,484,364 doses of the various vaccines have been administered in Pakistan so far. Assuming that every person needs two doses, more than 6.7 million people, or around 3% of the total population, have been completely vaccinated in the country. Coupled with smart lockdown measures and enforcement of SOPs, the vaccination drive is by and large paying dividends. The number of deaths from Covid has come down to 30 during the last 24 hours as against 201 on April 28. The number of new cases has also fallen to 907 from more than 5,000 during much of April. The government must try and ensure there is no further hold-up in the vaccination process.

(By Editorial, The Express Tribune, 14, 23/06/2021)