



WHO CORONAVIRUS DISEASE 2019 (COVID-19) SITUATION REPORT-86

SITUATION IN NUMBERS

Total (new) cases in
last 24 hours

Globally

1 914 916 confirmed (70 082)

123 010 deaths (5989)

Western Pacific Region

124 204 confirmed (1399)

4201 deaths (40)

European Region

977 596 confirmed (34 324)

84 607 deaths (3895)

South-East Asia Region

20 287 confirmed (1624)

936 deaths (107)

Eastern Mediterranean Region

107 389 confirmed (3751)

5395 deaths (140)

Region of the Americas

673 361 confirmed (28 404)

27 336 deaths (1785)

African Region

11 367 confirmed (580)

523 deaths (22)



Laborers awaiting work as few businesses resume—AFP

Global News

- On-off social distancing may be needed until 2022: Harvard study.
- Russia reports nearly 28,000 coronavirus cases after new record daily rise.
- Developing world will take worst hit from virus crisis, says Qureshi.
- China reports 12 new domestic cases.
- Pandemic to bring Asia's 2020 growth to halt for first time in 60 years, says IMF.
- Trump to ease lockdown, saying virus cases have 'passed peak'.
- 'No child to fail the year because of virus': Spain minister.
- France Covid-19 death toll tops 17,000.
- Iran says virus deaths below 100 for second day.

Global Response

- WHO 'regrets' Trump's funding halt as COVID-19 cases soar past 2 million worldwide.
- 99-year-old Captain Tom completes walk raising \$15 million for UK health service.
- Pakistan included in G20 debt relief plan.
- People in Dubai now need an electronic move permit to step out of their homes.
- US retail sales suffer worst drop on record.
- China dismisses claim new coronavirus originated at Wuhan lab.
- Under India's caste system, Dalits are considered untouchable. The coronavirus is intensifying that slur.

Local News

- Coronavirus crisis: IMF agrees to give major debt relief to Pakistan.
- Balochistan reports 4 new coronavirus cases.
- 340 cases, 4 deaths reported in Sindh.
- Clashes between traders and police in GB over closure of shops.
- 199 recoveries reported in past 24 hours.
- Stipend distribution process enters second phase.
- Bringing back Pakistanis difficult due to lack of facilities, says Qureshi.



99-year-old former WWII combatant gestures as he leaves the hospital, after being treated for coronavirus and discharged—*Reuters*

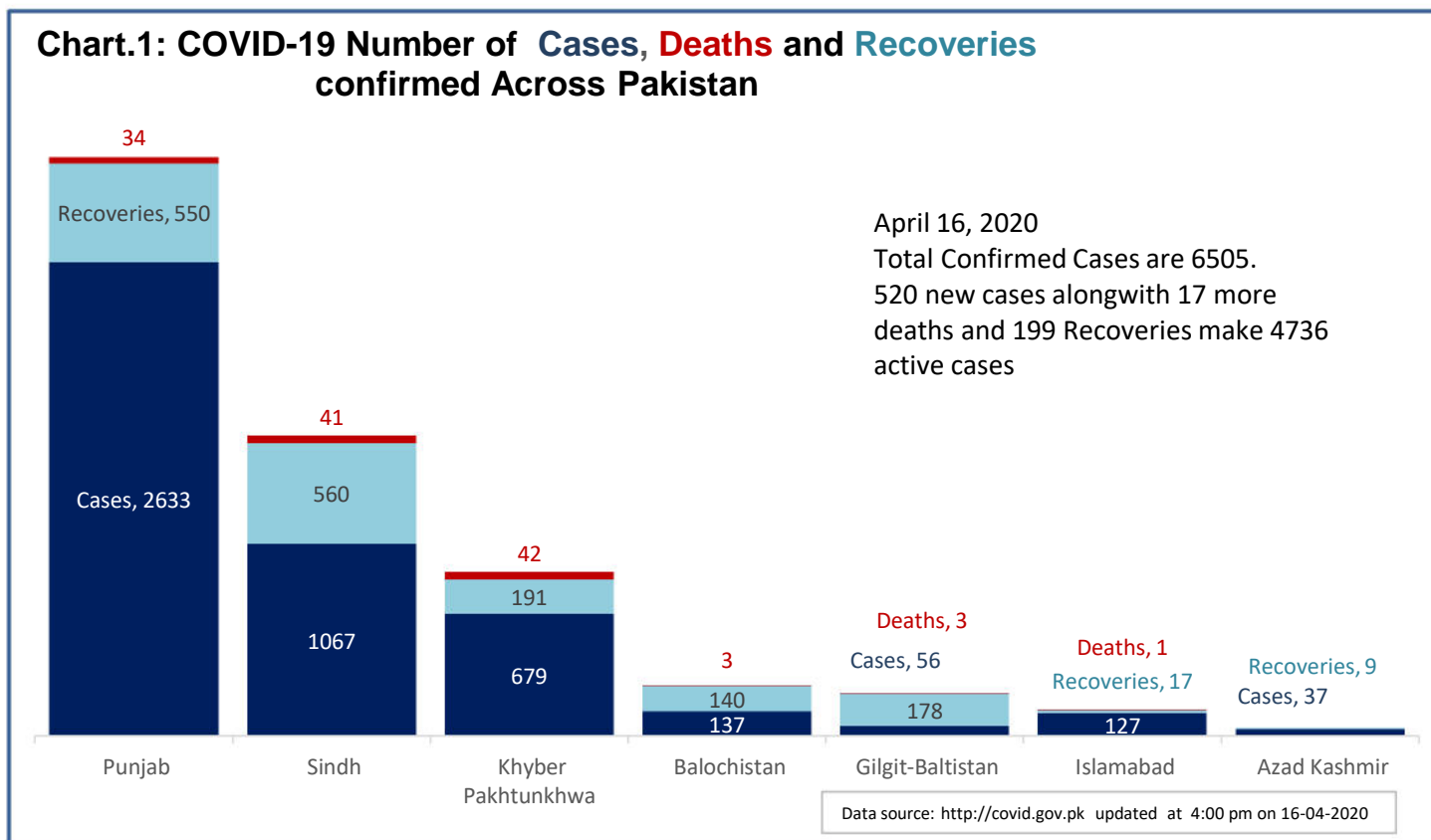
Local Response

- Govt. sent letters to world leaders after PM's debt relief appeal, says FM Qureshi.
- Senate deputy chairman demands all senators be tested for coronavirus.
- Edhi Foundation donates Rs10m to PM's Corona Relief Fund.
- Industrialists will undertake to follow lockdown SOPs before starting businesses.
- Punjab CM Buzdar aims for 10,000 Covid-19 tests per day.



Traffic on a bridge in Wuhan—*Getty Images*

During the last 24 hours, 520 new cases have been confirmed by different laboratories, bringing the national tally to 6505. Six deaths from Punjab and Sindh, four from KP and one from Balochistan have been reported in the last 24 hours. There are a total 124 deaths and 1645 recoveries across the country, see Chart.1.



Does the Lockdown Strategy paid-off: After about one month since the first case of COVID-19 reported in Pakistan on 27th Feb 2020, a provincial level lockdown was imposed on 24th March 2020. A comparative analysis of Pakistan with recently top ten COVID-19 infected countries is carried out, for comparison purpose data¹ is taken since the first COVID-19 case reported in each country, however, calendar dates are different. First forty nine days' available data is explored for sensible comparative analysis with Pakistan. The analysis revealed that in most of European countries under study and USA the number of COVID-19 infected cases was less than 20, except for Spain where it was 66 at the end of first month since the first COVID-19 case reported in these countries, see Chart.2a. In Pakistan the number of COVID-19 cases were about 1200 since the first case reported, in Italy the count was less than 1000, China

¹ Data source: ECDC: European Centre for Disease Prevention and Control (<https://www.ecdc.europa.eu/en/publications-data/download-todays-data-geographic-distribution-covid-19-cases-worldwide>)

reported about 6000 while Iran was at highest with more than 18000 COVID-19 cases since the first case reported, see Chart.2b.

Chart.2a. COVID-19 Cases during first thirty days, Europe and USA

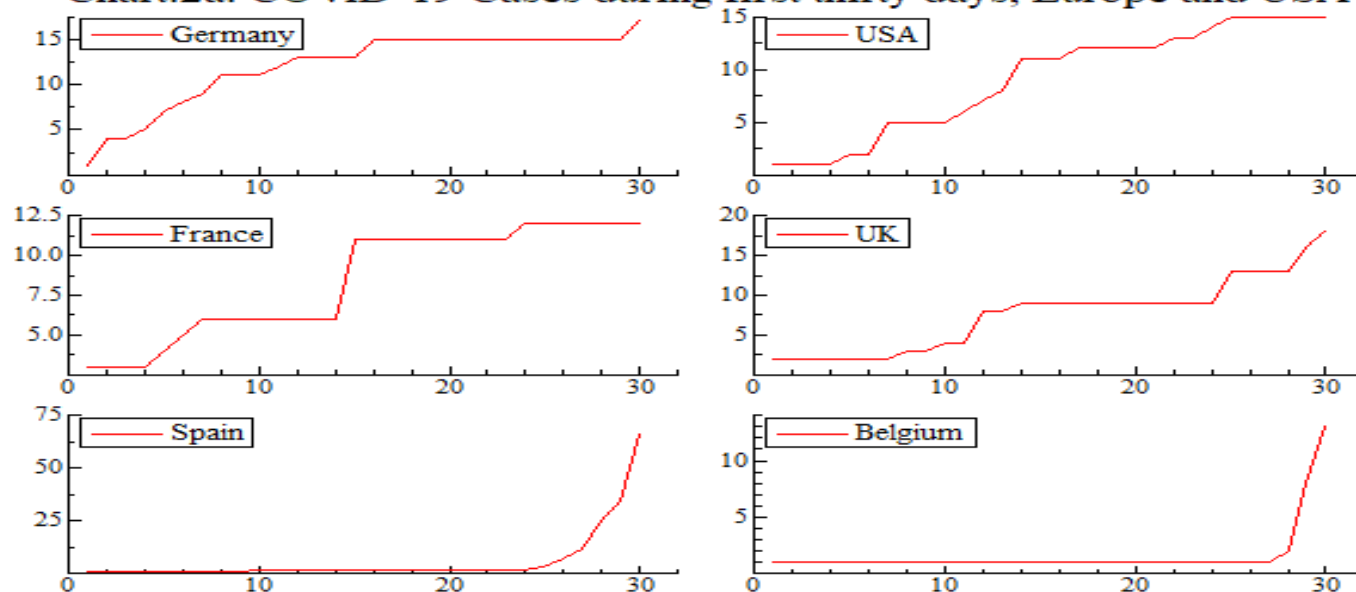
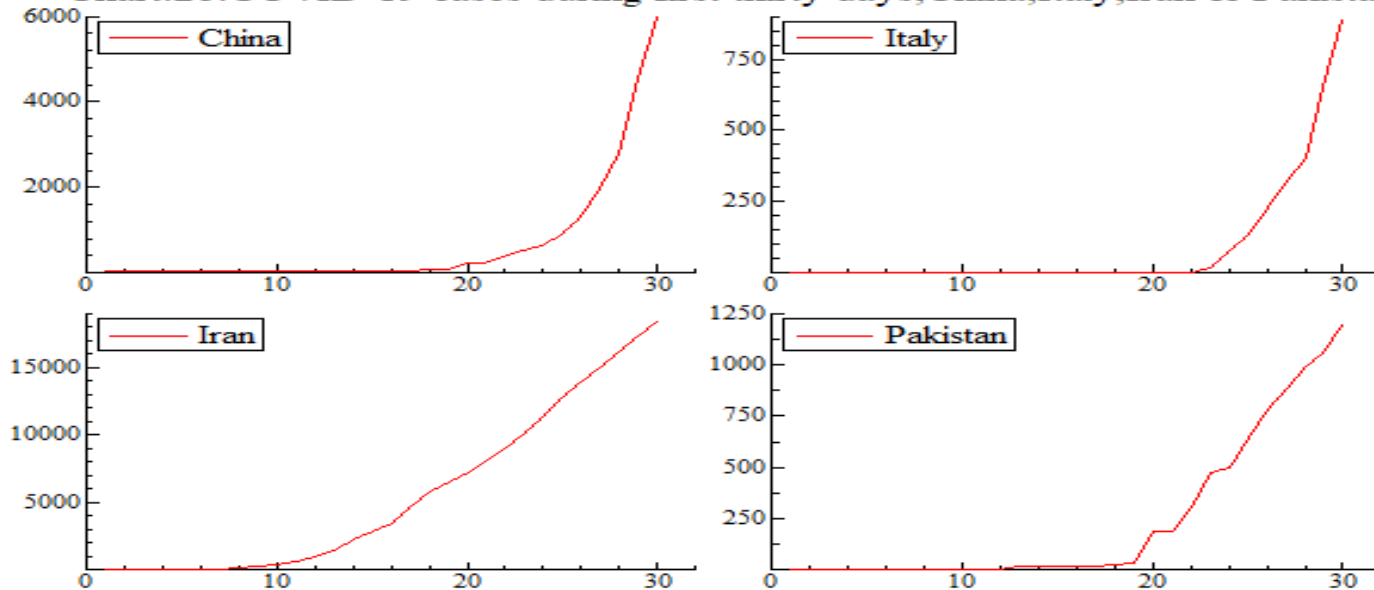


Chart.2b. COVID-19 cases during first thirty days, China, Italy, Iran & Pakistan



In the next nineteen days COVID-19 infected cases increased exponentially in European countries under study where Spain become the hardest hit country amongst with more that seventeen thousand cases; USA remained around 550 cases, see Chart.3a. Pakistan was in lockdown during next nineteen days, the number of COVID-19 cases remained around six thousand since the first COVID-19 case reported, see Chart.3b. In first thirty days Pakistan reported more COVID-19 cases than European

countries under study but during next 19 days when Pakistan exercise lockdown, all the European countries under study reported manifold cases than in Pakistan. Till 15th April 2020, Pakistan is way behind the top COVID-19 infected countries. Since the first case reported number of COVID-19 cases in Pakistan doesn't increase exponentially.

Chart.3a. COVID-19 cases, Europe and USA

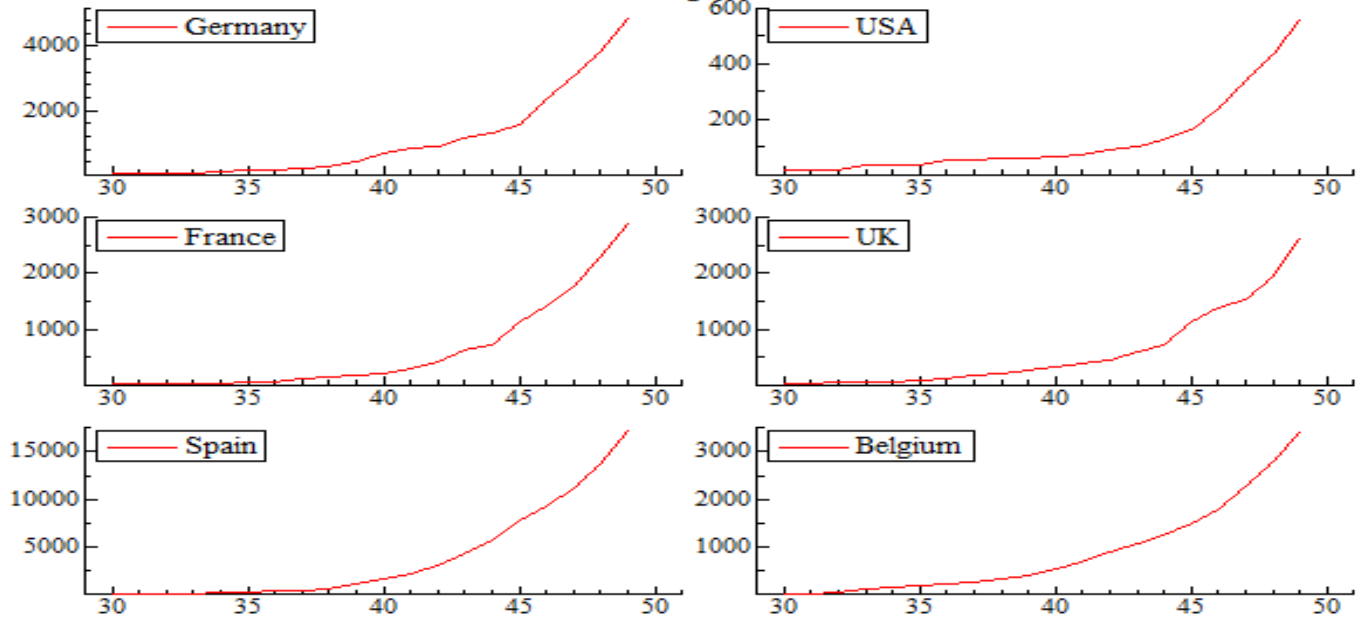
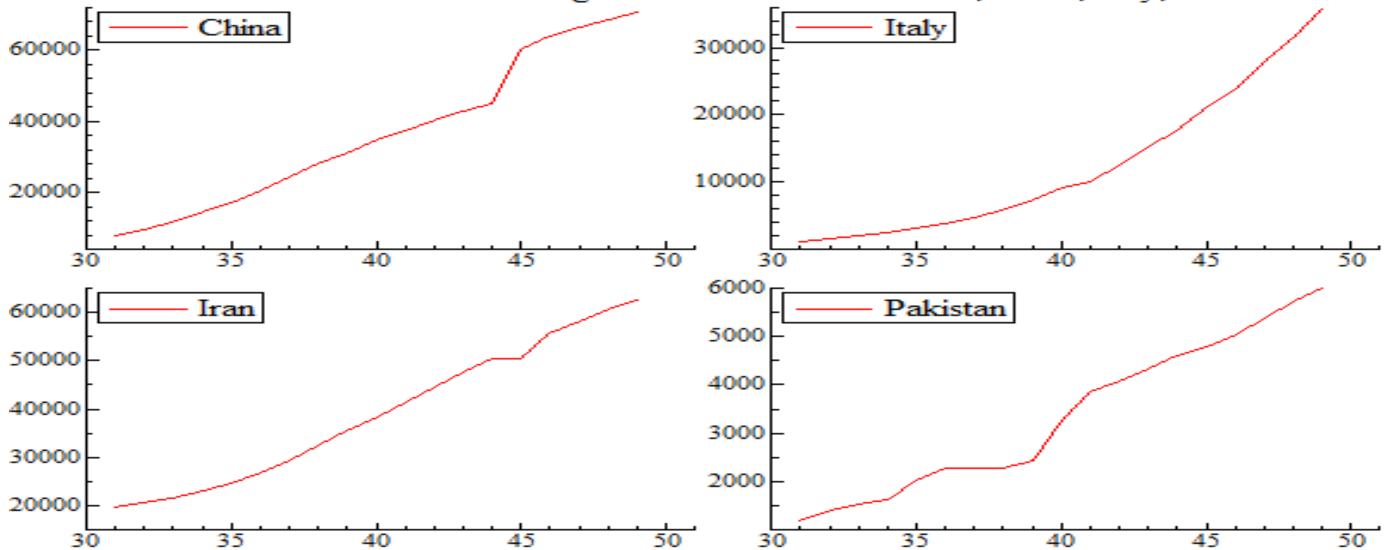


Chart.3b.COVID-19 cases during Lockdown in Pakistan;China,Italy,Iran & Pakistan



A simple analysis validates the effectiveness of timely taken decision in Pakistan; yes lockdown worked. COVID-19 is a contagious disease with no vaccine to date; the only cure is preventive measures. With controlled social contacts, Pakistan may control the spread of COVID-19 pandemic.

Mental Health and COVID-19 Outbreak

There is so much ambiguity in the world at the moment. It is easy to feel overwhelmed by fear and anxiety. Physical isolation and lockdown have led people to collective panic attack due to which they are experiencing anxiety and stress related disorders. In these circumstances we are advised to specially take care of that segment of the society which is more vulnerable and at-risk. Along with the older people and children, there is another invisible and most vulnerable section of the society which is suffering right now. These people are already suffering from pre-existing anxiety disorders such as Obsessive-Compulsive Disorder (OCD), Generalized Anxiety Disorder (GAD), Panic disorder, Hypochondria and Post-traumatic Stress disorder (PTSD). The pandemic COVID-19 is petrifying their feelings and it's overwhelming for them. Not only affecting them but their families and people around them.

Pakistan is not alone in facing this challenging issue. Many countries across the globe are standing under the same umbrella. Mental problems in Pakistan are widespread and seeking help for mental disorders is problematic as compared to the physical health. There are many myths about the mentally ill and fear of being labeled by the society.

No news regarding mental health asylums, rehabilitation centers and the psychiatric patients have been highlighted in the media and by any of government officials particularly from mental health authorities. Nobody is talking about them. How are they in Covid-19 outbreak? What safety measures are taken for them? What we heard is silence. According to experts individuals with severe mental illness are confronting with more intense issues during the Covid-19 pandemic due to their lifestyles and underlying health conditions.

24 million people in Pakistan require some kind of mental assistance and there are only 0.19 psychiatrists per 100,000 population, which according to the World Health Organization is the lowest numbers in the Eastern Mediterranean Region and in the entire world. The Pakistan Association for mental health has not published any report since 2017. No updates on the site particularly related to this pandemic Covid-19. They are not answering the calls on any of their helpline number. The Anxiety and Depression Association of America (ADAA) is updating their website with the information regarding Covid-19. They are sharing the tips related to Covid-19 as well

as how to cope with the anxiety in this situation. People suffering from mental and psychosocial illnesses are not only prone to anxiety but the healthy ones are also facing some degree of stress and depression during this outbreak. World Health Organization also issued a brief report related to different segments of the society which guides how to protect themselves during Covid-19 pandemic and be empathetic and kind to each other in this global crisis where all segments of the society are equally affected.

Since 2004, the mental health policy is not revised in Pakistan. A disaster or emergency preparedness plan for mental health was last revised in 2006. The current laws related to mental health do not meet the standard in relevance to the international conventions. People need to know about the current information regarding hotline and online help and awareness of people in their surrounding who are suffering from mental health issues. Government should take measures for significantly increasing the investment in mental health especially considering the pandemic situations. State mental health authorities can play more important role in creating and implementing policies regarding Covid-19 in mental health clinics and hospitals. Home services should be provided in this lockdown to relieve families with mental patients. The role of media is also very important as the hype created by media is fading the situation further among mental health patients who are exposed to social networks. **(Written by Nadia Khan, an alumna of Department of Development Studies, PIDE)**

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Let the Dust Settle!

In December 2019, the world saw an unprecedented, unrivaled entity that rendered the brightest minds of their fields helpless—be it the policymakers, medical professionals, or scientists. Since then, around 1,914,916 individuals have been affected while 123,010 succumbed to it across the globe. While the entire world is fighting against this stubborn, invisible enemy, some currents seem to be dealing with an imaginary foe. And that foe has arisen from none other than the so called conspiracy theories.

According to a Gallup poll, one in five Pakistanis believe that coronavirus has been deliberately spread by a foreign power.

That is the classic case of a siege mentality—the paranoia based on the belief that the world is out to get us. This mentality is deeply entrenched in Pakistan. The social media platforms are reeling with speculations with an underlying notion that Coronavirus is the conspiracy of major powers (the perceived conspirators differ according to the societal dynamics of people). Some are declaring this pandemic as the scheme to undermine China's prowess, while some believe China spread this virus deliberately. Some blame the US for it while some call out both. There is no apparent end to this debate.

While this spirited discussion is going on, people are dying as we speak. Apart from the mortality and morbidity rates, one thing that is rapidly increasing is poverty and unemployment. Pakistan decided to go on the lockdown in the third week of March, and the government has decided to extend a partial lockdown till April 30. Amid the slowed-down economy and restricted business activity, the already vulnerable employees, that form 56 percent of the workforce, stand at the risk of losing their livelihoods. According to an estimate, 12.5 million to 18.5 million people stand at the risk of losing their jobs in just three months amid coronavirus outbreak. The World Bank has projected Pakistan's economy to shrink up to 2.2 percent with a drastic decline in per capita income. The country may fall into a recession amid the slowdown.

The country is stuck between a rock and a hard place. If people are allowed to go out and earn, the cases will spike drastically. Or else, people will suffer from destitution. The government does not have enough funds to deal with an already dysfunctional healthcare system— now burdened immensely. Yet, it has to provide people relief packages while bearing the economic losses to an already crooked exchequer. The WHO has acknowledged this dilemma as well. Its Director General, Dr. Tedros Adhanom Ghebreyesus, has said that the lockdown is not a practical option for low-income countries.

However, the experts are short of any concrete solution to this paradox. While there is a lot to cope with, the conspiracy theories and misinformation tend to downplay the situation's gravity. Whether the virus was man-created or natural, intentional, or

unintentional, that can be revealed only when the chaos subsides. Even in this discovery, odds are few that we can play a role. For now, we should be concerned about the issues that need our utmost attention. Even the rumors of COVID19 being a farce can be lethal, as they spawn a strange sense of complacency. For the first time, our fear (caution) is going to be our savior, and nothing should jeopardize that. **(Written by Ambreen Shabbir; a student at PIDE School of Public Policy)**

WHO Advice to Public to Cope with Stress

**World Health Organization**

Coping with stress during the 2019-nCoV outbreak



It is normal to feel sad, stressed, confused, scared or angry during a crisis.

Talking to people you trust can help. Contact your friends and family.

If you must stay at home, maintain a healthy lifestyle - including proper diet, sleep, exercise and social contacts with loved ones at home and by email and phone with other family and friends.






Don't use smoking, alcohol or other drugs to deal with your emotions.

If you feel overwhelmed, talk to a health worker or counsellor. Have a plan, where to go to and how to seek help for physical and mental health needs if required.


Get the facts. Gather information that will help you accurately determine your risk so that you can take reasonable precautions. Find a credible source you can trust such as WHO website or, a local or state public health agency.





Limit worry and agitation by lessening the time you and your family spend watching or listening to media coverage that you perceive as upsetting.

Draw on skills you have used in the past that have helped you to manage previous life's adversities and use those skills to help you manage your emotions during the challenging time of this outbreak.



Frequently Asked Questions

How to put on, use, take off and dispose of a mask?

1. Remember, a mask should only be used by health workers, care takers, and individuals with respiratory symptoms, such as fever and cough.
2. Before touching the mask, clean hands with an alcohol-based hand rub or soap and water
3. Take the mask and inspect it for tears or holes.
4. Orient which side is the top side (where the metal strip is).
5. Ensure the proper side of the mask faces outwards (the coloured side).
6. Place the mask to your face. Pinch the metal strip or stiff edge of the mask so it moulds to the shape of your nose.
7. Pull down the mask's bottom so it covers your mouth and your chin.
8. After use, take off the mask; remove the elastic loops from behind the ears while keeping the mask away from your face and clothes, to avoid touching potentially contaminated surfaces of the mask.
9. Discard the mask in a closed bin immediately after use.
10. Perform hand hygiene after touching or discarding the mask – Use alcohol-based hand rub or, if visibly soiled, wash your hands with soap and water.

How long does the virus survive on surfaces?

It is not certain how long the virus that causes COVID-19 survives on surfaces, but it seems to behave like other coronaviruses. Studies suggest that coronaviruses (including preliminary information on the COVID-19 virus) may persist on surfaces for a few hours or up to several days. This may vary under different conditions (e.g. type of surface, temperature or humidity of the environment).

If you think a surface may be infected, clean it with simple disinfectant to kill the virus and protect yourself and others. Clean your hands with an alcohol-based hand rub or wash them with soap and water. Avoid touching your eyes, mouth, or nose.

Source: World Health Organization

COVID-19: Timeline of a Pandemic (Feb. 21, 2020 – Feb. 23, 2020)

Feb. 21— WHO says it is concerned about the rapid spread of COVID-19 in Iran, which has 18 cases and has seen four deaths in the past two days. The country reported its first cases on Feb. 19.

WHO appoints six special envoys on COVID-19 to "provide strategic advice and high-level political advocacy and engagement in different parts of the world."

Lebanon confirms its first case of COVID-19: A woman who arrived from Iran and is now quarantined at a hospital in Beirut.

Israel confirms its first case of COVID-19: A person who had been quarantined on the Diamond Princess cruise ship off Japan's coast.

"We are concerned about the number of cases with no clear epidemiological link, such as travel history to China or contact with a confirmed case," says WHO Director-General Tedros Adhanom Ghebreyesus during a press conference. He says that the window of opportunity to contain the outbreak is "narrowing."

While the number of cases in China's Hubei province — the epicenter of the outbreak — continues to decline, WHO says it is concerned about an increase in the number of cases in Shandong province.

Over 500 new cases of COVID-19 are traced to four prisons in China.

Feb. 22— WHO conducts a survey of African countries to assess their overall readiness for COVID-19 and finds the regional readiness level is at about 66%. "We need urgently to prioritize strengthening the capacities for countries to investigate alerts, treat patients in isolation facilities and improve infection, prevention and control in health facilities and in communities," says Dr. Matshidiso Moeti, WHO regional director for Africa, in a press release.

The African Union Commission hosts an emergency meeting on the COVID-19 outbreak with health ministers from across the continent.

Feb. 23— South Korean President Moon Jae-in announces the highest level of alert after the country surpasses 340 cases of COVID-19, the majority of which were discovered in the past few days. This empowers the government to take measures such as restricting public transportation and banning visitors from certain countries.

Cases of COVID-19 in Italy continue to rise in what has become the largest outbreak outside of Asia.

Neighboring countries close their borders with Iran, fearing a spread of the outbreak.

Source: <https://www.devex.com/>

Experts' View

In Wuhan and Iran, as the infection peaked in those countries, videos surfaced that showed people falling over dead or unconscious in the streets. That is where we are headed if we don't manage the lockdowns. The government is having a hard time performing the balancing act it has to, despite all that has been achieved. Somebody has to help them out now before their decisions take us to a point where we too start to see people falling dead or unconscious in the streets. (**Khurram Husain, DAWN**)

Some economists will invariably argue that writing off debts is not good tactics since it would invert incentives for lenders and discourage them from providing loans in the future. But good tactics seldom make good strategy. If developing nations, despite earnest efforts, are unable to break free from debt traps, year after year, then perhaps new thinking is required. Debt write-offs have a long history. Economic historian Michael Hudson shows that redeeming the poor from debt bondage moved alongside the spread of early Christianity. As recently as 1953, Pakistan and 20 other countries wrote off about 50pc of Germany's sovereign external debt in the London Debt Agreement. Not only was interest reduced on the remaining portion but Germany was given a grace period until 1957. Significantly, the agreement stipulated that Germany would only pay interest if it ran a trade surplus and that interest payments would be capped at 3pc of export earnings. These arrangements made interest payments manageable for Germany since it precluded the need for further borrowing just to pay interest on previous debt. Pakistan would have paid only \$727m instead of \$11.6bn towards debt servicing in 2019, if a Germany-like agreement was extended to it. (**Aqdas Afzal, DAWN**)

Experts' Opinion

Due to the distortions in the sugar supply chain, the domestic price of sugar tends to be much higher than its international price. As a result, the government subsidizes the export of sugar. Export subsidy, in turn, induces the millers to produce more sugar. Not only that, the sugar industry is also protected by high tariffs (to the tune of 20 percent) on the import of sugar. Here a question arises: If the subsidy can be an instrument of driving up output and export of sugar, or for that matter any other commodity, what's wrong with it? The answer is that the subsidy has both winners and losers. The major beneficiaries of price support are big growers, while the beneficiaries of subsidized exports are sugar mill owners. The losers are the consumers, as export of sugar raises its domestic price. The government may even have to import sugar to stabilize its domestic price, which, again, will create rents for sugar suppliers. In this way, they derive a double – and possibly a triple if they also happen to be sugar growers – benefit. (**Hussain H Zaidi, THE NEWS**)

The last thing we want to see is more fatalities among our doctors and support staff in hospitals and clinics. It is our health workers, from top to bottom, who need our unstinting support as they are the ones bearing the burden of caring for those afflicted with Covid-19 as well as for administering tests to the wider population. Besides, we don't want hospitals or test centers to become sources of Covid-19, as happened in Italy, which will be the case if medical personnel are not provided with high-quality PPE. Waiting for the infection curve to bend while under lockdown is akin to being on board a train that has just entered a tunnel and nobody knows how long the tunnel is and when the light on the other side will first appear. This is to say that we can only guess as to when the curve's inflection point will be reached in Pakistan so that the number of new infections ebbs. (**I. Hussain, THE NEWS**)

World Health Organization
Coronavirus disease (COVID-19) advice for the public

No. Regularly washing your bare hands offers more protection against catching COVID-19 than wearing rubber gloves.

You can still pick up COVID-19 contamination on rubber gloves. If you then touch your face, the contamination goes from your glove to your face and can infect you.

Is wearing rubber gloves while out in public effective in preventing the new coronavirus infection?



#Coronavirus #COVID19

9 March 2020



A little girl spreading colors on road with a message to stay strong—
Getty Images



Policemen getting the irrelevant shops closed to enforce lockdown which were opened after the announcement of ease in the lock down—*White Star*



An Iranian musician plays accordion at the yard of his house during self-isolation due to the new coronavirus outbreak, in Tehran, Iran.

(AP Photo/Ebrahim Noroozi)

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