Assessing Pakistan’s Responses towards Covid-19: A Policy Appraisal

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Abstract

Covid-19 is an unprecedented phenomenon in human history that has drastically altered the global socioeconomic and strategic landscape with far-reaching political effects. In absence of a security paradigm capable of accommodating this massive health catastrophe, developing states like Pakistan were affected badly as its socioeconomic fabric nearly withered away, and health infrastructure's deficiencies were severely exposed. It dented its health sector, slashed the economy, worsened unemployment, caused supply chain bottlenecks, and hampered inter/intranational travel. The additional inflationary pressures triggered protracted recessions and exposed the state’s (lack of) preparedness and efficacy of institutional structures against non-traditional security (NTS) threats. This further augmented the dire need for the human-centric ideation of security which poses an urgency to equip Pakistan with the necessary tools and strategies for a wide range of future non-traditional threats. In absence of a pre-defined policy framework for dealing with non-traditional security threats, central and provincial governments along with other relevant stakeholders joined hands to make a holistic preventive effort that led to the adaptation of innovative practices such as smart lockdown and Ehsaas relief programme due to which Pakistan attained a high recovery rate of 99.13%. This article attempts to theorize the Covid-19 puzzle from a human security standpoint at the outset, evaluating Pakistan’s strategy, measures taken to combat it effectively, charts the future course of human security in Pakistan, and offers future actionable policy options

Keywords: Covid-19, Socio-economic, Non-traditional Security, Policy Framework, Ehsaas Program, Pakistan.

Introduction

Covid-19 has impacted unprecedentedly socio-economic and political structures globally so as Pakistan. This has drastically altered policy measures, transformed strategic thinking, and expanded security landscape with significant focus on non-traditional threats. The traditional security apparatus in Pakistan has revolved around military threats that have historically disregarded non-traditional security concerns, thus, Pakistan initially, was unable to react swiftly and effectively to this non-traditional threat. Following containment measures like smart lockdowns and tightened curfews, closely knitted Pakistani society faced several issues related to the economy and physical and mental health that disturbed the country’s entire social fabric. Pakistan’s markets experienced financial losses and negative growth while policymakers wrangled over whether to impose lockdowns or maintain the country's economies. Consequently, Covid-19 caused more deaths in Pakistan than in any war since the country’s independence (Saif, 2020). The Covid-19 virus has so far infected an estimated 1.6 million individuals in Pakistan, of whom roughly
40,000 have died. The country’s GDP dropped to -1.5% while the unemployment rate skyrocketed to an alarming 6.3% (Statista, 2023).

In the absence of health security, inadequate human and financial resources, outdated healthcare infrastructure, insufficient investment in the health sector, and poor resource management, Pakistan faced problems to proactively deal with the Covid-19 issue (Sherin, 2020). Thus, innovative choices and novel practices had to be adopted to make up for the strategic limitations and resource shortages.

**Purpose**

The purpose of this paper is to gauge preparedness of Pakistan’s health system, its strategies adopted against Covid-19 to contain, initiatives taken for effective control and better institutional collaboration among government organs, health units and involvement of multiple actors including civil society, media, and global community.

**Methodology**

For this paper, a detailed literature review of secondary sources that includes policy documents and briefs, research articles and health commentaries, reports on socio-economic and political effects by global institutions and media has been done. This offered a better, comparative understanding of approaches employed by other developing countries to assess Pakistan’s covid responses and identify institutional lags, inherent and lingering structural lacunas in health system...

**Findings**

Covid-19 with its multifaced impacts to create societal inequality, hike in poverty and inflation causing more vulnerable groups and in absence of digitalized structures, compelled Pakistan to forcefully adopt the human-centric non-traditional security (NTS) paradigm. Therefore, the strategic thought process needs to be updated to achieve comprehensive security necessitating a unique synergy on economic, social, political, military, and environmental fronts, in state reaction. The human-centric security concept can be better positioned to provide Pakistan with the essential tools and methods to respond to a wide range of future non-traditional threats and utter a multifaceted response if required.

**Securitizing Covid-19 and Human Security**

Hard power has always been the main subject of security in world politics, but the Covid-19 outbreak exposed some limitations of the traditional strategic thinking and operational conduct. Although with the rise of neo-liberal thought in the realm of political economy, non-traditional security became a subject of debate among theorists for years, unfortunately, world leaders failed to realize and create an efficient system to address human security threats. Because of this prior exposure to the concept and significance of non-traditional security, the world was able to quickly adopt new techniques to tackle the pandemic.

Securitization theory played a critical role in Pakistan’s pandemic response. Following global security trends, Pakistan has traditionally conducted threat assessment from a state-centric perspective, with the resulting policy choices and strategic responses relying solely on the military component. This is why Pakistan as a unit and policymakers as a strategic wing had to suffer initial losses when the pandemic struck because policymakers faced an acute dilemma of theorizing a crisis’s non-traditional dimension i.e., health. Pakistan’s initial losses were substantial as its health
infrastructure and the economy appeared to be rapidly deteriorating, but a multifaceted non-traditional security response was quickly prepared and implemented, saving the country from chaos. Since then, the non-traditional security paradigm has been incorporated as a permanent component into Pakistan's security regime. Pakistan's success and rapid socioeconomic recovery can be attributed to the dynamic combination of traditional and non-traditional security paradigms working in tandem to address any type of security threat.

With the emergence of an important human security threat, policymakers need to rethink the whole security paradigm by keeping two important aspects in mind; firstly, state-centric security should give way to the security of human individuals, and secondly, armaments cannot provide human security, thus, sustainable development must be prioritized (Haq, 1994).

Strategic Co-relation between Human Security and National Security

The nature of security threats has drastically changed; states are faced with novel threats including (but not limited to) diseases, environmental calamities, climate crises, resource depreciation, social strife, etc. Humans find themselves at war with forces of nature, such forces that have been aggrieved by anthropogenic activities. This warrants crucial adaptation by states to provide human security against threats from a plethora of sources where causal relations are often blurred and hurt people, indiscriminately.

French President Emmanuel Macron while addressing the nation on counter-Covid measures on 16 March 2020 announced: “We are at war” (Rose & Lough, 2020). This also Displays the limitations of conventional social contract in the face of non-traditional security threats. Advanced democracies faced resistance in virus containment efforts put up by groups from across the political spectrum (Babar & Malik, 2022). Nascent democracies with a history of internal conflicts saw the socio-economic, ethnic, racial, and religious fault lines emerge yet again while some reverted to varying levels of authoritarianism. This has highlighted one important aspect of human security: non-traditional threats cannot be responded to by the state alone. Thus, effective non-traditional security response must bring civil society, private stakeholders, and citizens on board with state authorities. Since democracy can provide such inclusivity, the social contract needs an overhaul. A human-centric approach can strengthen democracy in face of Covid-19 and the rising tide of authoritarianism.

Mapping Pakistan’s Covid-19 Responses

Pakistan is the fifth most populous country in the world with a rapidly growing population of approximately 235 million people. Yet Pakistan’s public healthcare system is inefficient due to the over-prioritization of hard components of security for the policymakers. Other than lacking in functional/operational capacity, corruption mars most meaningful reform attempts. Moreover, it barely caters to the needs of 20% of the population that is unable to bear the expenses themselves. Covid-19 was additional pressure on the already poor-performing healthcare system. Yet surprisingly, Pakistan’s healthcare system outperformed many in the region, thanks to a multifaceted policy response.

More than a year since Pakistan saw its fifth wave of Covid-19, the pandemic has been reduced to a mere bad memory. The spread-prevention standard operating procedures (SOP), once vigorously enforced by federal and provincial governments in Pakistan are no longer observed. It is critical to take stock of how Pakistan fared through the pandemic as a nation-state. The initial confusion and unpreparedness on the state’s part, coupled with the citizens’
refusal to abide by the government’s measures for containment of the Coronavirus imply that lessons learned should be incorporated into Pakistan’s national security discourse, policy actions, and society at large. The following passage overviews Pakistan’s domestic response to the unprecedented global health calamity, and its social, economic, and political impacts, followed by a critique of limited institutional capacities at the onset of the pandemic and measures taken forthwith to make up for them.

Pakistan detected the first case of Covid-19 in February 2020. Though the state institutions developed containment SOPs, contact tracing, and imposed lockdowns, the caseload touched 6,825 by 12th June that year (Ministry of National Health Services Regulations and Coordination, 2020). Pakistan’s health sector was under-resourced, underdeveloped, and in shambles pre-Covid-19; the pandemic exacerbated it further. More importantly, at the time, Pakistan’s national security policy had been, one, undefined, and two, traditionally dominated by state-centric security considerations, therefore Covid-19 was not seen as a security threat despite its potential to devastate the economic activity, resulting in political uncertainty and social strife. In 2020, as a result of a country-wide lockdown and trade disruptions, Pakistan’s GDP contracted by 0.4% (Ministry of Finance, 2022). The working population dropped from 35% to 22% during the same period (Dar, 2022). Whereas the first lockdown resulted in fears of widespread job loss and hunger, during the subsequent waves, the government resorted to systematic “smart lockdowns” to limit their economic impacts. On the social front, the state faced challenges to its writ and legitimacy at the hands of Covid-sceptics. But the inclusive response strategy, which took religious, ethnic, and political leaders of thought on board, eventually pacified the resistance.

1- Securitization of Covid-19 in Pakistan
Multiple securitizing agents may be identified in Pakistan which sought to securitize Covid-19 in Pakistan. Chief Minister Sindh Murad Ali Shah, citing the fears that the widespread viral infections in his province could spiral out of control, announced a complete lockdown beginning 23 March 2020 (Geo News, 2020). When faced with the ‘developing state dilemma’, Mr. Shah claimed that economic recovery was possible, but if a large portion of the workforce in Pakistan’s densely-populated economic hub–Karachi, Sindh–was to be infected, repercussions would be far-reaching. Hence, to him, Covid-19 posed an existential threat to human security. His rationale was picked up by celebrities, several of whom took to social media to voice their agreement (DAWN Images, 2020). Sindh’s containment strategy was soon adopted by other provinces, and the federal government took the initiative to establish a National Command and Operations Center (NCOC) to coordinate provincial efforts into a national effort. Using the platform, policymakers and experts refined the contours of lockdown policy, developing a "smart lockdown" strategy. It was augmented by the expansion of the state’s social security net through the Ehsaas emergency cash program. Thus, the securitization of Covid-19, unlike the Copenhagen School’s thesis, proved positive in the case of Pakistan and resulted in an innovative pandemic response.

2- Test, Learn, and Adapt Strategy
In absence of a non-traditional security-oriented policy to respond to the direct and indirect impacts of the pandemic, Pakistan’s earliest response followed a test, learn, and adapt strategy to bridge the gaps. Contact tracing proved to be an effective strategy, requiring multi-sectoral coordination and mobilization of limited resources in a systematic manner (Zafar et al., 2022). Whereas inbound travellers were screened for symptoms and suspects quarantined, the scope of tracing, tracking, and isolation was expanded nationwide as capacities developed over time. The public and
private laboratories lacked testing facilities; the initial test kits had to be imported at exorbitant prices amid a worldwide shortage. Indigenous kits were made available only in June 2020 (Jamal, 2020). Hospitals also faced ventilator shortages to deal with critical cases, which brought to light the fact that Pakistan had no local ventilator development capability (Mubarak, 2020). Also in short supply was personal protective equipment (PPE). Healthcare workers, overworked by the rising caseload, contracted Covid-19 by hundreds (Khan, 2020). In short, Pakistan's health system nearly collapsed, were it not for healthcare workers who held up their end even in the most difficult of times.

3- Invoking Health Interventions
For effective and rapid response, it required legislative and institutional mechanisms for adroit addressal of covid-19 and following measures have been taken:

a- The 18th Amendment and Health sector in Pakistan:
The 18th amendment to the Constitution of Pakistan transferred the responsibility of the health sector to the health sector to the four provinces. The federal government took the lead in synergizing the national effort through the National Command and Control Center (NCOC) (Babar & Malik, 2022: 178), whose responsibilities included:

1) Bringing all the necessary stakeholders including policymakers, administrators, healthcare experts, and bureaucrats for developing necessary policy interventions for virus detection, quarantine, containment, and vaccination.
2) Data collection utilizing advanced technology to predict, prevent and contain the spread of the virus and monitor all activities.
3) Strategy development for public awareness campaigns through print, electronic, and social media.

The National Action Plan focused on creating and responding efficiently to the Covid-19 outbreak, strengthening emergency response capabilities and preventing the further spread of the virus in Pakistan. The plan called for prioritizing financial and other resources for emergency preparedness and response and mobilizing increased domestic and international investment in this area. Provincial and Area Departments of Health can use this plan to implement important emergency preparedness actions, strengthen inter-sectoral collaboration and develop operational capabilities for an efficient response. The plan also evaluates resource allocation to ensure that financial investments support implementation (National Institute of Health, 2020).

4- Vaccine Diplomacy
NCOC started vaccination of frontline health workers and elderly on 10th March 2021. Table 1 shows the details of the 179.8 million vaccine vials Pakistan received as of 30th November 2021, either as donations or through bilateral agreements (UNICEF, 2021). At the time of writing, 333.6 million doses of numerous COVID-19 vaccines have been administered (single, double, and a booster dose in both cases) (Ministry of National Health Services Regulations and Coordination, 2020).
Establishment of NCOC and Ehsaas Cash Program

NCOC and Ehsaas Emergency Cash Programme were key in the prevention of a general socio-political and economic catastrophe. The former combined the Covid-19 testing, treatment, containment measures, and public awareness under a civil-military command, embracing technological advancement to set up a robust pandemic response. The latter, a social security net, catered to 12 million daily workers (an estimated 100 million if family system is considered) through one-time, on-demand cash assistance by disbursing Rs. 193.96 million or Rs. 12,000 per family ($78.6 in April 2021 conversion rate; $46.6 as of February 2023) (BISP, 2020). Resultantly, the social security net expanded by 281% compared to pre-Covid levels (Gentilini et al., 2020). Moreover, to shoulder the economic crunch faced by the market, the government gave an Rs. 900 billion ($5.66 billion) economic relief package. While Rs. 200 billion ($1.25 billion) were reserved for low-income groups, Rs. 280 billion ($1.76 billion) were meant for wheat procurement (Latif, 2020).

Countering Socio-Cultural Impediments

The social dimension of Pakistan’s response to Covid-19 as a nation-state was yet another area of concern, as the understanding of the Coronavirus by the nation and the state were immediately at odds with each other. Religious pilgrims imported a considerable number of cases in the first wave, so the state response, in addition to contact tracing and isolation, was to ban mass prayers in mosques. Sahabzada Peer Abdul Basheer, Chairman of Milli Yakjehti Council, a non-political alliance of religious parties, was one such individual who criticized the closure of mosques on religious grounds. “This is the moment that we should offer prayers and seek forgiveness from the God. But we have taken the opposite position and closed the doors of the God’s houses (masjids). This is like inviting the azab (suffering) from the God,” he was reported to have told his followers (Rehmani, n.d.). This led to visible discontentment among the citizens. But the state under the leadership of President Arif Alvi strived to bring religious scholars and other leaders of public thought on board. The president convened the first conference with religious leaders (ulema) on 26th March 2020, where he requested their support. NCOC employed ulemas’ help in creating public service messages disseminated through print, electronic, and online media. Federal Ministry of Religious Affairs and Interfaith Harmony played a leading role as a liaison between religious scholars--important thought leaders in Pakistani society--and the government. Religious leaders also lend support during the vaccination drive, calling upon their followers to get vaccinated. At a conference convened on 3rd June 2021, Mufti Kifayat Hussain Naqvi

Table 1: Type and number of COVID-19 vaccines received by Pakistan as of November 2021 (latest available data)

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Doses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cansino</td>
<td>2,841,200</td>
</tr>
<tr>
<td>PakVac (vaccine concentrate imported from CansinoBio and packaged by NIH in Pakistan)</td>
<td>6,997,320</td>
</tr>
<tr>
<td>Sinopharm Covax</td>
<td>8,845,200</td>
</tr>
<tr>
<td>Sinopharm Bilateral/Donations from China</td>
<td>30,920,000</td>
</tr>
<tr>
<td>Sinovac</td>
<td>77,500,000</td>
</tr>
<tr>
<td>Pfizer Covax</td>
<td>20,121,260</td>
</tr>
<tr>
<td>Pfizer Bilateral</td>
<td>6,259,500</td>
</tr>
<tr>
<td>AstraZeneca Covax</td>
<td>8,071,800</td>
</tr>
<tr>
<td>Moderna Covax</td>
<td>9,248,000</td>
</tr>
<tr>
<td>Sputnick</td>
<td>9,000,000</td>
</tr>
<tr>
<td>Total</td>
<td>197,804,280</td>
</tr>
</tbody>
</table>
assessed the untiring efforts of President Alvi, who took the leading role in crafting a national effort by bringing the ulema in the loop for which he “deserves our tributes and appreciation” (Tribune, 2021).

7- Flash Floods 2022 and Covid-19
As of February 2023, Pakistan has had a total Covid-19 caseload of 1.57 million and 30,641 deaths, showing a 99.13% recovery rate (Ministry of National Health Services Regulations and Coordination, 2020). In a country of 235 million inhabitants, 37% of which live in densely populated urban centres, this was no less than a feat. Compared to the developed world and comparable developing states, Pakistan arguably managed to contain the virus (in its true sense). Unlike an early assessment by Bloomberg that Pakistan will take up to a decade to vaccinate 75% of its population, effective and coordinated inoculation allowed the state to vaccinate 34.6% of the eligible population – 18 and older, later reduced to 5 years old–within 9 months of global vaccine rollout (Arab News PK, 2021). At the time of writing, 333.6 million doses have since been administered under the planning and direction of NCOC. Dissolved after the fourth wave subsided, NCOC was re-established by the incumbent government. Lessons learned from NCOC are expected to prove useful in future national calamities. One such example is National Flood Response and Coordination Center (NFRCC), modelled on NCOC to “articulate and synergize flood relief efforts” established to oversee post-Monsoon 2022 flood rehabilitation and restoration efforts (National Flood Response & Coordination Center, n.d.).

8- Mapping the Future of Human Security in Pakistan
The COVID-19 pandemic served as an eye-opener for the magnitude of threats posed by non-traditional security challenges. Pakistan had to rethink its national security approach from a human security perspective to prevent–what could otherwise have been–a perfect storm. This paradigm shift has the potential to serve the state in any future security theorization and policymaking. A human-centric security focus will arguably strengthen the federation. NCOC, for instance, provided a platform for governments across Pakistan to coordinate on policy and implementation of effective pandemic response. Such employment of technology and public access to information with little bureaucratic red tape is expected to bring transparency in hitherto closed-door policymaking. The aforementioned NFRCC, conceived based on lessons learned from NCOC, strengths the argument that Pakistan should establish a permanent national, apolitical, flexible, and human-centric institution with a legal/constitutional status through proper legislative process from the parliament (Khalid, 2021). The first-ever National Security Policy (NSP) of Pakistan released on 12th January 2022 acknowledged human security as a crucial aspect of comprehensive national security.

9- Sharing the Dividends-Regional Human Security
Pakistan’s National Security Policy envisions “mutual coexistence, regional connectivity, and shared prosperity (as) essential prerequisites” to the national security of individual states and regional peace (National Security Division, 2022). Human security is not only a common need of all states, but the multifaceted challenges facing human beings, their needs, and complex interactions can be best solved through a collective effort. Hence, NCOC can provide a model to be replicated under the umbrella of S.A.A.R.C. (South Asian Association for Regional Cooperation is a regional intergovernmental organization. Member states collaborate for human welfare, mutual assistance, and regional self-reliance) at the regional level for collective human security in South Asia.

In post-pandemic, Pakistan is a new state by all means. Whereas the authorities seemed clueless at the beginning, faced with an unprecedented non-traditional security challenge, an interconnected and integrated national response
proved useful in two ways. One, it strengthened democracy whereby different governments and state institutions worked in collaboration for a national cause. Second, it highlighted critical gaps in Pakistan’s national security. The economic, political, and social challenges discussed above are by no means exhaustive, but a careful assessment of each can help prepare the state for future crises that may befall the country and threaten national security. In this regard, Pakistan’s National Security Policy 2022-26 is a step in the right direction.

10- Actionable Policies

Given a critical appraisal, identifying the loopholes in policy implementations, following are the suggested actionable measures to be considered:

1. **Future-oriented Research:** Institutional responses based on careful improvisation of limited resources/expertise allowed Pakistan to avoid a general catastrophe. Thus, research on best practices, strengths and weaknesses in institutional actions can help in drawing lessons and preparing a national response strategy for future national-level emergencies.

2. **Overhaul of Health Infrastructure:** Government must build upon the stopgap measures which improved the healthcare infrastructure, equipment, and workforce amid the COVID-19 pandemic. Healthcare infrastructure is essential for pandemic response: The COVID-19 pandemic has highlighted the critical importance of healthcare infrastructure, including hospitals, clinics, and laboratories, in responding to pandemics. Governments must invest in the construction, maintenance, and upgrading of healthcare infrastructure to ensure that it can withstand the demands of a pandemic. An increase in federal/provincial healthcare budgets coupled with reforms and improved transparency may reinforce the gains made during the pandemic.

3. **Devolution of Healthcare Policy and Service Provision:** During the pandemic, the federal and provincial governments displayed an impressive coordination through the National Command and Control Center (NCOC). But the fruits of the 18th Amendment to the Constitution of Pakistan need to be devolved to the lowest tiers of government for improvement in citizen-centric policy making and service provision.

4. **People-centric Healthcare Policy/Strategy:** Inter-connected societies offer both opportunities and complexities. In the age of disinformation, governments must establish their credibility through effective use of social media (in addition to traditional sources) to keep the information-hungry citizens from falling for anti-state propaganda. In this view, the young require attention.

5. **Health Economy:** Filling gaps in Pakistan’s health economy is critical for improving healthcare outcomes: Pakistan faces significant gaps in its health economy, including limited access to medical equipment and vaccines. These gaps can lead to inadequate healthcare delivery, particularly in rural and underserved areas. By filling these gaps, the government can improve healthcare access and outcomes for all citizens. Government may seek public-private partnerships in this regard. Public-private partnerships can bring expertise and resources: Public-private partnerships can be an effective way to fill gaps in Pakistan’s health economy. The private sector can bring expertise and resources to develop new technologies and improve existing ones, while the government can provide regulatory oversight and support for research and development. By working together, the public and private sectors can bring new innovations to the healthcare sector and improve healthcare outcomes for all citizens. Development and/or support of entrepreneurial ventures also require state’s support through dedicated policy making, funding, and incubation.
Conclusion

Pakistan’s policy and operational infrastructure were not prepared for a non-traditional security challenge at the onset of COVID-19 pandemic, yet it managed to contain the pandemic and its socio-economic and political fallout. Pakistan was quick to alter the emphasis from state-centric security to a human-centric security paradigm. The successful adaptation of a hybrid state-cum-human centric security policy and mobilization of multiple resources at the disposal proved to be extremely vital in curtailing the disastrous outcomes of the pandemic. Moreover, the long-term impacts, be those health-related or economic, were also taken care of through innovative incorporation of the Ehsaas programme and the establishment of NCOC. The shift in Pakistan’s policy paradigm will play a crucial role in mitigating the impacts of any natural or induced calamity in the future and has posed an urgency at the state level to divert attention from hard components of security to soft/unprecedented ones. Pakistan’s response to Covid-19 was perhaps better calculated and articulated in the region, but still, the policy shift alone can be only so much fruitful unless there is cooperation at the regional level. Therefore, it is in the best interest of the international community to work together to give due regard to human security and devise a collective response regime at the regional and global levels.
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