

Thank you Dr Al-Mandhari and colleagues for the opportunity to be here today to talk about our ongoing efforts to control COVID-19 in Pakistan. -

Pakistan is a country affected not just by COVID-19. Our populations are exposed to insecurity, natural disasters, and other emergencies. We are also battling polio, and -

our decade long efforts to eradicate this disease have now being impacted by COVID-19, as polio staff and resources are diverted to the pandemic response..

Pakistan has made many achievements in battling COVID-19 since the start of the pandemic, and we were able to significantly reduce transmission by July and August this -

year. However, like many countries around the world, easing of lockdowns resulted in a resurgence of cases in October. This required a strategic review of our response.

Since the beginning of our first case of COVID-19 on 26 February, WHO has played a key role in helping Pakistan, whether remotely, or through in-country missions. -

In October, a team from WHO's Regional Office for the Eastern Mediterranean visited Pakistan to review some of the lessons learned to strategize and offer technical -

guidance and recommendations for a stronger, more robust response to COVID-19 pandemic. There was a recognized need for rapid review on what worked well and what needs

to be improved for planning a more effective response to the pandemic.

The specific objectives that were set out for the mission included providing technical assistance in strategic planning in the short, middle and longer-term for the following -

four pillars of the COVID-19 response:

Reviewing progress towards Integrated Disease Surveillance and Response

Examining the situation on the Points of Entry

Initiating work on essential health services to align with the targets of PHC for UHC

Reviewing Risk Communication and Community Engagement

I worked closely with WHO throughout the mission and to review the mission findings, focusing on specific areas for a revised approach. -

There are well functioning multiple disease surveillance systems in Pakistan. Some outstanding achievements with case-based reporting (e.g., polio, VPD, COVID-19) and -

solid aggregated reporting for some vertical programme using DHIS2 (Malaria, TB, HIV)

However, it was clear during the mission that there is a need to progressively build and expand by disease, programs and geographical coverage with governance -

implementation and resource management, data convergence, strengthening key technical aspects and ensuring quality assurance.

COVID has led Pakistan to rethink approach to managing Points of Entry. While there is a vision for sustainable improvement with ongoing collaboration on the plan, -

findings for Points of Entry identified five paramount and critical needs: sustainable human resource with capacity building; prioritize investments in new quarantine

infrastructure and mapping of available facilities; establish professional training programme for PoE tailored for both health and non-health staff; restructure and modify

physical PoE premises to reduce risk of transmission; data management and sharing with stakeholders.

Taking advantage of the already well established and wide community-based networks within the polio programme allowed us to build on this for COVID-19. In a country -

as geographically complex as Pakistan, we depended heavily on our wealth of experience acquired on social and digital media platforms, as well as local community outreach that

also included listening tools used for rumour management and two-way communication with communities.

There are, however, limited resources and seasoned expertise dedicated to RCCE at federal and provincial levels, capacity building lacked integration and need for consolidating all monitoring and evaluation mechanisms, and this is an area we are working on to build together with WHO and partners. Like many countries, we are adapting our response as the situation evolves. We also know that our response to COVID-19, while taking up resources and capacities, should not allow up to forget the need to continue essential health care services, while ensuring proper infection prevention and control measures in all primary health care settings.

Despite the challenges, Pakistan is committed to containing the outbreak, while ensuring that gains made so far in other areas are not impeded, and that we can continue to collectively work together towards on global, regional, and Pakistan-specific goals of universal health coverage.

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