

Monthly Bulletin

Gov-HER-Nance

Ensuring Gender Equity and
Socio-Economic Resilience
During COVID-19



Women are generally the primary caregivers in Pakistani society. And with the outbreak of the COVID-19 pandemic, that burden of care has vastly increased. Data* shows that 83% of a woman's time is spent at home, providing care for household members, home maintenance and self-care. It is also reflected in the limited mobility of many Pakistani women.

They are often four times less mobile than men leading to limited sources of information being available for them.

Their need for updated information is critical to providing efficient care for their families. This bulletin aims to reach women and provide them with COVID-19 related news to help them navigate around issues of safety, community and local governance.

Accountability Lab Pakistan (ALP), with support from the Department of Health Khyber Pakhtunkhwa (KP) and Ministry for Economic Cooperation and Development (BMZ), Germany, is publishing bulletins under the "Governance Ensuring Gender Equity and Socioeconomic Impact during COVID-19" campaign. This campaign aims to build and strengthen the resilience of marginalized populations, especially women, in three districts of Khyber Pakhtunkhwa against the negative impacts of COVID-19 as well as other future pandemics and health emergencies.

These bulletins include important government decisions, community feedback, verified information, valid concerns, and other questions from the ground around health, safety and local governance. These bulletins are translated into Urdu and 600 copies are disseminated on a monthly basis in three districts of Khyber Pakhtunkhwa - Peshawar, Mardan and Nowshera.

*Source: UNWomen

FACT



Blood types have no connection with Covid-19 treatment.

Studies have shown that there is no reason to believe being a certain blood type will lead to increased severity of COVID-19. By choosing to get vaccinated, you are not only protecting yourself and your family but your community as well. A person's blood type doesn't change the effectiveness of COVID-19 vaccines. Everybody needs to take precautionary measures from COVID-19, regardless of blood type. Despite a few researches mentioning a link between COVID-19 and blood type, experts say that these studies don't change much for the individual. There's no known connection between blood types and side effects from COVID-19 vaccines. Jennifer D.Allan (Associate Professor at Portland State University) stated that over 3,000 folks who got a COVID-19 vaccine did not find any increased side effects or other issues among people with different blood types. Vaccines are safe and effective at lowering the risk of getting sick and dying from COVID-19.

Source: [muhealth](#), [aarp](#)

MYTH



Eating raw onions and garlic can cure coronavirus?

While onions offer dietary and health advantages, there's neither proof that onions may be used as therapy or cure for Covid-19 nor that onions can kill viruses present in the air within their vicinity. A claim going viral nationally and internationally that having raw onions and garlic can cure COVID-19 and make COVID-19 patients test negative against the virus. However, we found that while onions have some antimicrobial and anti-inflammatory qualities,

There's no research to prove that onions and garlic can be used as a cure for COVID-19.



The WHO (World health Organization) has claimed that, "Garlic is a healthy food that has some antimicrobial properties, but there is no evidence from the current research that eating garlic or placing it around you will protect you from the coronavirus."

Source: [Thequint](#), [rappler](#)

The long COVID-19 symptoms no one's talking about

Bedridden COVID-19 patients are more at risk for anxiety and depression more than one year after their infection, according to a new study by The Lancet Public Health.

A new study, posted in The Lancet Public Health, found feelings of depression and anxiety can last about 1.5 years after experiencing extreme COVID-19 symptoms.

People who tested positive for COVID-19 have been more likely to feel or have trouble sleeping, but these issues were lifted about two months later.

Those who had such excessive COVID-19 that they were bedridden for as a minimum seven days have been much more likely to enjoy feeling of tension and depression more than a year later.



Source: [deseret](#)

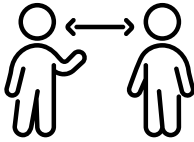
How can I protect myself against COVID-19?



Wash your hands frequently



Avoid touching your nose, eyes, and mouth



Put space between yourself and others



Cough or sneeze into your bent elbow or a tissue

If you have fever, cough or difficulty breathing, seek care early. Call beforehand, and seek medical advice

Source: [WHO \(World Health Organization\)](https://www.who.int)

What is the relation between tobacco use and COVID-19

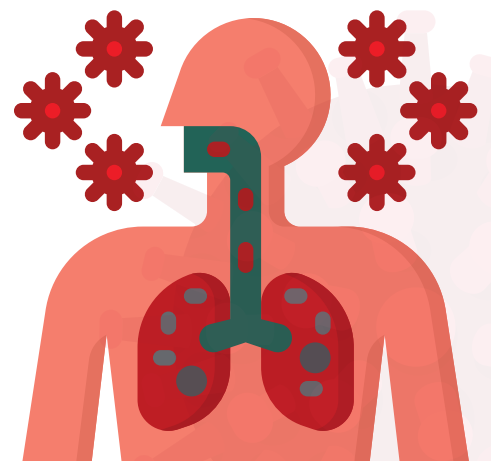
Tobacco use may additionally increase the chance of suffering from severe signs and symptoms of Coronavirus. Early research shows that, compared to non-people who smoke, having a record of smoking may additionally substantially increase the danger of unfavourable health outcomes for COVID-19 sufferers, such as being admitted to intensive care, requiring mechanical air flow and struggling with intense fitness results.

- 1 Smoking is already recognised to be a chance-factor for many other respiratory infections, which includes colds, influenza, pneumonia and tuberculosis.
- 2 The consequences of smoking at the respiration device makes it more likely that people who smoke will contract these illnesses, which will be extra severe.
- 3 Smoking is also related to increased improvement of acute respiratory distress syndrome, a key trouble for extreme instances of COVID-19, among people with extreme respiratory infections.

Evidence from China, where COVID-19 originated, suggests that humans who have cardiovascular and respiration conditions resulting from tobacco use, or in any other case, are at higher hazard of developing severe COVID-19 signs and symptoms.

Tobacco use has a huge impact on respiration health and is the maximum common cause of lung cancers. It is also the most vital risk-aspect for Chronic Obstructive Pulmonary sickness (COPD), which reasons the swelling and rupturing of the air sacs inside the lungs, reducing the lung's ability to absorb oxygen and expel carbon dioxide, and the construct-up of mucus, ensuing in painful coughing and respiratory problems. This may have implications for smokers given that the virus that causes COVID-19 frequently impacts the breathing system regularly inflicting mild to severe respiratory damage that could bring about fatality.

Source: [emro.who](https://emro.who.int)



70% of long COVID-19 patients suffer from these two symptoms

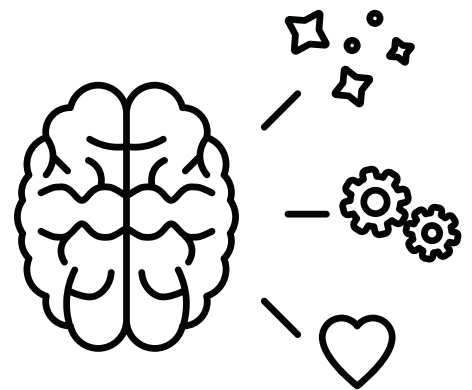
According to a new study, close to 70% of long COVID-19 patients suffer from two specific symptoms a month after infection.

Researchers at the University of Cambridge recently found that about seven out of each ten COVID-19 sufferers with neurological issues in the months after infections.

- These patients often struggle to perform on cognitive tests.
- About 75% of the sufferers said they can't work because of their signs and symptoms, too.

Most of these long COVID-19 sufferers be afflicted by two unique COVID-19 signs and symptoms:

1. Memory
2. Concentration problems



"Long COVID has received very little attention politically and medically. It urgently needs to be taken more seriously, and cognitive issues are an essential part of this. whilst a lawmaker talks about 'Living with COVID' – this is, unmitigated infection, that is something they ignore. The impact on the operating population may be huge,"

stated a look at senior writer Dr. Lucy Cheke in a university release.

Experts continue to identify a number of COVID-19 signs people revel in months after infection.

A new study from Denmark's State Serum Institute (SSI) found that 53% of participants said that they had COVID-19 symptoms 6 to 12 months after infection.



A similar study published inside the medical journal The BMJ (British Medical Journal) observed that one-third of COVID-19 sufferers experienced a new COVID-19 symptom months later wherein conditions concerned a range of fundamental organs and structures, including the heart, kidneys, lungs and liver as well as mental health complications.

EXPERT INTERVIEW WITH.....



For our fourth bulletin, we interviewed Mr. Zulfiqar Ahmad, District Education Officer Mardan, to learn about the challenges faced by educational institutes in Mardan during the COVID-19 pandemic.

Mr. Ahmad joined the National School Teacher Department on 16th October, 1989, and that time onwards, he has contributed to the development of various institutes, such as middle schools and high schools. After getting trained as a developmental practitioner, in 2021; he joined the field of administration, leading towards an opportunity to work with the Federal Government in the Special Education Department.



What has been the impact of Covid-19 on the education sector of Khyber Pakhtunkhwa? What has been the impact of Covid-19 on the education sector of Khyber Pakhtunkhwa?

“Two things have come to our attention post-Covid. One, our academic activities have been hampered. Face to face sessions and quality education have been obstructed. But at the same time, I would consider this pandemic a blessing. Before Covid-19, the concept of Intellectual property IP-based education in Pakistan was almost non-existent. Through Covid-19, we got the opportunity of adopting distance and technology based learning, which was a new avenue of learning. Through this avenue, our students were able to connect to the global stream of education. Overall, the effect of Covid-19 was a game of loss and gain, and I would call it a ‘mixed experience’.”

What difficulties did the administration, faculty members and students face in adopting online learning?

"Whenever you enter this sort of a situation, the primary issue you face is of facilitation.



- Network facilities are not always available throughout the areas.
- The second area of concern is the financial status of students and whether their families can afford laptops and mobile devices.

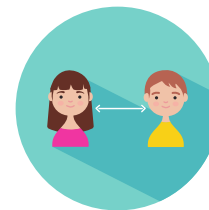


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- The local solution to this problem has been to make groups of students who can share a laptop.
- The second issue we faced was on account of the teachers, who were not exposed to this mode of teaching.
- Adapting to this mode of teaching was a huge challenge for the teachers who had been in the traditional system for a long time and had not received any technological training.
- When the students got access to Google, their learning grew by leaps and bounds but the teachers definitely faced an issue with this change as they had not experienced this level of technology before.

Following the 3rd and 4th wave of Covid-19, what safety measures were implemented in your district when the government decided to reopen educational institutes?

"We followed the NCOC protocol to a 100%. This included measures such as temperature checking, the use of hand sanitizers, wearing of face masks and practicing social distancing. As a further measure, we used to hold segregated classes whereby we would teach students in different groups. We would also carefully watch out for students exhibiting Covid symptoms, and if a case came forward, we would immediately send it for quarantine. We also collaborated with different public departments to make sure these precautions were implemented in the market and at home as well. The biggest challenge we had to deal with was that of vaccination. Thankfully, we were able to vaccinate all the children above 10 years, except for a few cases where the child had a health issue or was not allowed to get vaccinated."



Did you face any challenges in implementing these safety measures?

"Two factors ended up being the most challenging. The first was economic support, as the adoption of hand sanitizers, temperature checkers and other similar facilities came at a large cost. The second issue was that of social awareness. Although we educated students regarding social distancing and other safety measures, their families would often not have any such awareness which led to differences in society, and we had a hard time facing this challenge."



When the educational institutes reopened, and vaccination became mandatory for everyone, what challenges did your district face with regards to vaccination?

"There were two or three factors involved in this challenge. First, there is obviously the existence of a myth regarding the authenticity of vaccines. People believe in the rumor that the vaccine is being manufactured from a foreign country and therefore, may have questionable ingredients which can lead to problems in reproduction and other health issues. In order to resolve this challenge, we had to set an example for everybody. For example, we made propagation videos and testimonials regarding the vaccination and when the students saw that the DEO and other faculty members were getting the vaccination, they also got the courage to do so. Secondly, when we faced refusals of vaccination, we had to impose certain strict restrictions like refusal of admission to classes of unvaccinated students in grades 9 and 10 or refusal of entry to school of students in lower classes. When this practice began to come in the way of their education, the students realized that vaccination is essential."



As a district education officer, what have been some of your learnings from the pandemic?

"Since we had not faced a pandemic of this scale before, we did not have any repository of mitigation strategies with ourselves. We only had mitigation strategies dealing with floods etc. Once we went through this pandemic, we made a joint committee composed of different public departments that came up with mitigation strategies such as closing off an infected area to stop the spread of the virus. The strategy of smart lockdown proved to be very effective. The second new learning for us was how to use social media to campaign regarding the pandemic and spread awareness among the population. We also came to realize that the government should make provision for the education sector in such a way that if formal schooling is obstructed, the avenue of online learning should be available. Secondly, the professional capacities of the masses need to be improved. Everybody should get a proper orientation of how to behave and respond during a pandemic and what are the strategies available to them."

How does your department plan to make arrangements for educational institutes in your district for future pandemics?

"We need to restructure the teacher training program that currently exists in a way that it can adapt to the need of future pandemics, while including mitigation strategies in it. Teachers need to be aware that emergency handling cannot be stopped under any circumstances, so they should know what role they need to play to respond to it. Secondly, there should be a contingency plan available at the district level, that deals with the question of continuing children's schooling and meeting their needs in the case of a pandemic. Lastly, interdepartmental communication should exist so that we can deal with the issues of the pandemic."



VACCINATION CENTRES

➤ MARDAN

➤ **DHQ Hospital Mardan**
03005921350

➤ **Mardan Medical Complex, Mardan**
03339298814

➤ NOWSHERA

➤ **Cat D Hospital, Manki Sharif**
03028318682

➤ **District Head Quarter Hospital Nowshera**
03005712208

➤ PESHAWAR

➤ **Hayat Abad Medical Complex Hayatabad**
03005669116

➤ **Khyber Teaching Hospital University Town**
03339677767