

THE OVERLY SENSITIVE NATURE OF AGED FAMILY INMATES AS A SOCIO-CULTURAL BARRIER TO COMBAT COVID-19

MUNIZA JAVED¹, FIZZA FATIMA²

¹Lahore College for Women University Lahore, Pakistan; Phd Scholar, Istanbul Medeniyet University, Istanbul, Turkiye

²Superior Univeristy Lahore, Pakistan

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Abstract

Human history is full of evidence showing a larger number of human and animal populations got affected by infectious diseases, viruses, and bacteria. Like previous life-threatening pandemics, coronavirus appeared to be a deadly virus in 2019 and declared as pandemic in 2020 by WHO. As per Global Reports, senior citizens have been most vulnerable to the corona virus attacks. This paper explores the experiences of family members dealing with elderly at home in the midst of the Covid-19 outbreak and how they managed them keeping in view their mindset on disease and socio-cultural constraints. For this purpose, qualitative research methods were adopted. 20 participants were selected for the in-depth interviews through purposive sampling. Following themes generated as a result of the data analysis: stubborn and rigid behavior of elderly, emotionally complex reactions, socio-cultural barriers, and traditional approach to the disease. Findings depicted the most common social cultural barriers in dealing with the difficult nature of elderly people are family ties, religious norms, respect, and empathy towards elderly people. Further, research findings highlighted major sentiments of older adults comprise attachment towards their grandchildren, feeling of insecurity, feeling of getting stigmatized, considering themselves as a virus spreader and feeling of being left out. It was found that older adults felt stigmatized, lonely, left out and considered SOPs (Standard Operating Procedures) as imposed remedial steps. Overall, it was found that at older age people express more anxiety and fear towards loneliness. Findings will help in sensitizing policy makers to design awareness sessions, religious and other home-based social activities for elderly people to combat stress related to loneliness in older age.

Keywords

Pandemic, Socio-cultural barriers, Aged- family inmates, Stubborn behavior

Introduction

It is said that in the history of human beings nothing killed more humans than infectious diseases like viruses, bacteria, and parasites. The present pandemic situation proved how vulnerable we remain. Some renowned magazine articles and reliable sources like BBC show that the novel coronavirus pandemic could be a predictable thing, but we gave little attention to that threat and the entire world was not ready to cope with this (BBC, 2019). According to BBC, Event 201, which was a high-level pandemic exercise, was organized on October 18, 2019, hosted by John Hopkins Center for Health Security in partnership with Bill and Melinda Gates Foundation and World Economic Forum (BBC, 2019). The exercise highlighted those areas where there is a need for public and private partnership to reduce the large-scale economic and

societal consequences at the time of severe pandemic situations (Center for Health Security, 2019).

In the past few years, the world has witnessed a growing number of epidemic events which were approximately 200 events per year. The world is in an alarming situation because these events are increasing and are becoming more disruptive to health, economies, and society. Experts predicted years back that it is just a matter of time before one of these ongoing epidemics would turn into a global pandemic with catastrophic consequences (Center for Health Security, 2019). Over the past 15 years numerous white papers and articles predicted that global pandemic involving a new respiratory disease. In 2018, BBC Future reported that various experts have predicted that the flu pandemic will hit the world in upcoming years, and not only that they believed that in coming years there will be millions of undiscovered viruses appearing in the world. BBC News stated that in 2019 Department of Health and Human Services organized a pandemic exercise called “Crimson Contagion” which predicted that a flu pandemic will hit China and will spread around the world, and due to that approximately 586,000 people would die in the US alone (BBC, 2019).

The SARS-CoV-2 virus is a virus that belongs to the single-stranded RNA family. This type of virus majorly affects mammals, birds, and reptiles whereas, in humans, it creates only mild infections like the common cold or 10 to 30% upper respiratory tract infection among adults (Paules, 2020). The previous strain has rare serious infections but can cause neurological disease in some humans (Esper, 2010). The previous coronavirus includes Middle East Respiratory Syndrome (MERS) which was first reported in Saudi Arabia in 2012 and severe acute respiratory syndrome (SARS) first identified in China back in 2003 (Pharm, 2014). The Fatality rates from these syndromes were quite less like 35% and 10% respectively (Center for Disease Control and Prevention).

SARS-CoV-2 is a newly emerged strain of coronavirus which was never identified in humans before. Its incubation period is unknown, but United States Center for Disease Control and Prevention predicted that its symptoms may appear in at least two days and remain in the human body for 14 days (Centers for Disease Control and Prevention).

Today the entire world is going through the same situation and fighting the life-threatening coronavirus pandemic, which is a controllable, yet widely spreading virus, stated by WHO (WHO, 2020). The symptom of the novel coronavirus was first found in Wuhan, Hubei province of China in December 2019. Up till now, the world has faced five dominant variants of this virus termed Alpha, Beta, Gamma, Delta, and Omicron variant. The virus has affected people in over 220 countries and territories across the globe. On 11 March 2020, World Health Organization declared it a global pandemic. In 2021, the reported cases by the end of March were 127,637,197 confirmed cases around the globe and a death toll of 2,793,023 deaths from the coronavirus (WHO, 2020).

Pakistan is a country having limited resources, struggling with a lack of emergency facilities, laboratory networks, proper infrastructures, trained human capacities, and fewest copying strategies during such pandemics (Noreen et al., 2020). As per statistics, the reported cases by September 2021 were 1,179,305, and a death toll of 26,175 in Pakistan. With all these limitations and the least available resources, the country tried hard to cope with this pandemic situation by managing a sufficient level of preparedness (Abbas, 2020). Furthermore, among other countries, Pakistan also achieved a successful vaccination process to cope with this novel virus having 18,512,319 fully vaccinated people by the end of 2021 (Ministry of Nation Health Service Pakistan, 2021). The statistics reveal positive progress of Pakistan in coping with the pandemic situation with a total of 1,060,881 recovered cases by December 2021 (Worldometer) (Covid.gov.pk).

Problem statement

With all these struggles one of the biggest issues Pakistan is facing during this crucial time of pandemic is people's non-serious behavior and lack of awareness of this virus (Jaffery, 2020). Despite Government's continuous efforts and strategies to direct the common public about the severity of this virus, still people show the least interest in getting vaccinated and adopting SOPs of social distancing and personal hygiene (Saad, 2020). The high densely populated areas of major cities of Pakistan have strong carriers of the virus and it's spread among less educated people including children, adults, and older (Maini, 2020). Children follow what their elders do and the older people with their traditional mindset feel that all these media campaigns and government awareness strategies are vague, and this virus is in reality nothing. Adults to some extent take that awareness campaign seriously by getting vaccinated and also trying to follow SOPs to make their families protected from this virus, but the problem lies in the traditional mindset of older people in the family who at this age are not so vigilant to adopt a change in their life.

The focus of the present study is on the sensitive nature and the traditional mindset of elderly people towards the adoption of precautionary measures during this pandemic breakout. The statistics gathered around the globe stated that the majority infected by coronavirus are older people. The reason is weak immunity and multiple health issues coming with this age factor (WHO, 2020). It is reported that 95% of deaths due to coronavirus were among people aged 60 years, and deaths among 80 years and more (WHO, 2020). In Pakistan both elderly people and children are at high risk (COVID, 2020). In such a scenario families have an enormous responsibility to protect their members, whether children or elderly people, to cope with this pandemic situation.

Pakistan is a country that comprises both extended and nuclear family settings, with strong family bonds rooted in moral values and cultural norms (Itrat et al., 2008), due to which it is a highly delicate thing to dictate and mold the behaviors of older people.

Research objectives

- To inquire what sort of delicate nature and major sentiments elderly people show to their families while dealing with coronavirus pandemic trauma.
- To find out the common social and cultural barriers in coping with the sensitive nature of elderly people while convincing them to adopt SOPs and precautionary measures during a pandemic.
- To inquire family members about the difficulties they face while dealing with the traditional unmold mindsets of elderly people of their families.

Research questions

1. What sort of delicate nature and major sentiments do elderly people usually show to their families during this pandemic breakout?
2. What are those social and cultural barriers which come in between while convincing elderly people to adopt SOPs and precautionary measures during a pandemic?
3. What sort of difficulties family members face while dealing with the traditional unmold mindsets of elderly people in their families?

Literature review

Growth patterns of coronavirus from all over the globe have been clearly suggestive of the fact that it is rapidly spreading because of the social behaviors and socioeconomic inequalities (Van, 2020). Research so far has clearly shown that continued social contacts and

networks can increase very strongly the outspread of disease in a population (Morris, 1993; Piccardi, 2013).

Threat of Covid-19 leaves all countries on the globe vulnerable to the disease outspread, and although it is difficult to combat this pandemic in all countries, it is more challenging in countries like Pakistan, because socio-cultural factors aggravate the risks (Kermani, 2020; Shiekh, 2020).

In developing countries such as Pakistan, how people from different age groups and cultural backgrounds perceive disease causation is very much based on the supernatural models, which contradicts the biomedical model of disease causation (Rehman et al, 2020).

Because of varying cultural beliefs and different sources of knowledge, population subgroups seem to be skeptical about the claimed risks of Covid-19 and many do not think of it as a very serious public health threat (Khatak, 2020). Therefore, they do not adopt preventive social behaviors like social distancing, required to combat the disease outspread, and neither do they consider any other preventive measure necessary (Gannon, 2020).

Much like in other countries, the risk of getting infected by coronavirus rises with the age in Pakistan. Although most of the infected people are below the age of 60 (81.4 %), more than 50 % of those who have died from the virus are aged 60 and above. This suggests that senior citizens are most vulnerable to virus attack, and they are at risk of facing the hardest hit (Saima, PIDE).

Some of the major effects of the pandemic experienced by older adults include severe complications, disruption in their daily routine, its effects on their behavior and mental situation, high mortality rate, and problem in adapting to new technology like telemedicine. Multiple studies revealed that the older adults showed less traumatic and stressed symptoms in the early days of the pandemic as compared to other age group (Vahia et al., 2020).

Despite these provisos, the early findings recommend higher resilience to the mental health effects of COVID-19 at least in a proportion of community-dwelling older adults. This resilience may reflect an interaction among internal factors (e.g., biological stress response, cognitive capacity, personality traits, physical health) and external resources (e.g., social status, financial stability) (Laird et al., 2019).

Various studies during the pandemic illustrate that the response of older adults toward COVID-19 was based on how much loneliness and isolation they experienced during the lockdown. A mix-method study conducted with 73 older adults having already prolonged depression and anxiety symptoms revealed that there was no increase in depression symptoms in any of those participants during the pandemic period because of social connectedness and continuous access to mental health care. The study depicted that loneliness, isolation, and social disconnectedness influence mental health of older adults (Hamm et al., 2020).

A comparison of various studies about how difficult the pandemic is for older people revealed that many older adults around the globe lack the resources required to deal with the stress of this pandemic. This includes materials like lack of smart phones and internet facilities, less social connections like few interactions with family members or friends, and the inability to engage in physical activities and daily routine. Clinicians have measured that the unavailability of such resources had a huge impact on mental health, especially lack of technology, which played a very important role in social connection during this pandemic (Vahia et al., 2020).

A study conducted in China revealed that most older adults above 60 showed more symptoms of stress due to COVID-19 (Qiu et al., 2020). Various studies conducted during the pandemic revealed that engaging older adults in proactive coping strategies helps them in reducing stress or having no stress during COVID-19 (Ann et al., 2021).

Methods

Method and sample size selection was quite challenging for researchers in this particular research because of the abrupt pandemic lockdown situation. Data collection was difficult during this phase because the intractable virus spread caused dread and trauma among people. Lockdown restricted face to face interaction which made respondents inaccessible. Initially, researchers opted for quantitative research method and did a small data collection to check the responses of people. The responses were quite inadequate and unclear because of so much mental strain among respondents concerning the epidemic. This encounter gives researchers the idea that further in-depth research is required to get a deeper insight into people's opinions and experiences about this study. Pandemic limits the sample size of this research.

Sample

20 in-depth interviews were finalized by the researchers with youngsters from the age group of 15 to 25 and middle-aged adults from 26 to 50 age group, performing their duties as bread earner and decision-makers of a family including both male and female respondents (N=20, 10 older adults and 10 middle-aged adults). Covid-19 pandemic is a widespread occurrence that every individual is experiencing, so the respondents were randomly selected adults having elderly people in a family. Respondents ranged in age from 15 to 50 years. Researchers opted purposive sampling technique to select respondents. Social media sites were used to approach respondents. All the respondents were briefed about the purpose of this research and then the researchers conducted their interviews according to their availability and convenience.

The technique for data collection

The present research intends to develop an in-depth understanding of the overly sensitive nature of aged family inmates as a socio-cultural barrier to combat COVID-19. A qualitative approach for data collection was used because this research was an attempt to explore the hidden societal barriers to combat this unexpected pandemic. The researchers have no intention to generalize it to the whole population, keeping in mind the unpredictable nature of the pandemic. The semi-structured interview protocol was used to get a deep understanding of the overly sensitive nature of aged family inmates during the Covid-19 pandemic. The semi-structured in-depth interview method allows respondents to express their views openly and spontaneously. Researchers had a one-on-one online and face-to-face session with each participant to grasp their perception of a specific issue or phenomenon (Boyce & Neale, 2006). The self-design interview guide was used.

Procedure

Participants were asked to sign informed consent before starting each interview session. Researchers made sure to keep the confidentiality and anonymity of each participant and also made it clear that their views are only for research purposes. Participants were allowed to leave the interview at any moment if they felt harm or didn't want to answer any questions. Researchers took the permission of recording interviews with each participant beforehand. The maximum period of each interview is between 20-40 minutes. Researchers asked questions in both Urdu and English for the convenience of participants. All the interviews were audiotaped, and each participant was considered a unit of analysis. Researchers opted for thematic analysis to transcribe data.

Analysis

For the analysis process, Creswell's (2009) steps of analysis were followed. After data collection, the researchers organized and prepared the data and then read it. After that coding was done through raw data and themes were developed (Rossman & Rallis, 1998). An inductive approach was used to get a deeper insight and real crux of the phenomena (Strauss & Corbin, 2008). The final stage is to interpret the data (Lincoln & Guba, 1985) to explore the real essence of the ideas.

Results

Results showed the overall perspective of bread-earner adults about the overly sensitive nature of aged family inmates as a socio-cultural barrier to combat COVID-19. Results are shown objective-wise to depict a clear picture.

Experience of bread-earner inmates with the emotionally complex elderly people

Pakistan is a culturally diverse country. Participants belong to both the traditional joint family system and the modern nuclear family system. All the participants, whether living in a joint family or nuclear, have a view that elderly people are the most prestigious asset of their family, and they hold a strong sense of emotional attachment, care, and respect towards them. While asking about the experiences of participants with elderly people in families one of the participants shared his view:

“For me, elderly people in my family are a blessing, they have lifelong experiences which always help in solving family and societal problems. They become a little childish by the time, but it still doesn't make them any less important or a burden in the family”.

Another participant shared:

“Elderly people are blessings in the family but by the time their behavior becomes difficult because they are very rigid about their traditional beliefs and routines. Sometimes they become very stubborn and emotional even more than children”.

While asking about the feelings and behaviors of elderly people in their families during COVID-19 most of the participants shared that it was difficult to convince them about this virus and its precautions. Some shared that their elder family members are sensible and cooperated throughout this virus phase.

One of the participants expressed:

“When my father (75 years old) was diagnosed with covid19, he remained in denial for a few hours. It was extremely difficult to convince him that he has to be isolated. He agreed to stay in his room alone but never allowed the door to be closed. He started sitting near the door and sometimes out of his bedroom in the living room. It was difficult to tell him and then we started being more careful and staying away from him”.

Another participant added:

“Well, it was quite difficult to be aware of my grandmother. We'd go through a very tough time with her because she always meets people like normal routines. If we stop her to meet and greet with others like a

normal routine. She used to get angry and stopped talking to us. She started expressing that we don't let her meet guests because we are ashamed of her, she is an old generation woman. We tried to convince her, but she sometimes became very emotionally drained. This was a very difficult phase for us, then one day she became highly sick, but Alhamdulillah that was not corona. After that, she realized that we are concerned about her health, but still, she doesn't believe in the Coronavirus".

Another participant replied sarcastically:

"My grandmother gets angry every time whenever we ask her to follow precautionary measures and she use to say is it written on someone's forehead that he or she is affected by coronavirus?"

One of the participants expressed:

"Mothers are blessing. We guided her about coronavirus severity, and she understood everything which we use to tell her but when my brother got infected from this virus, we isolated him and didn't allow our mother to visit him. She started going into his room silently without letting us know. Once we caught her so she said no disease is bigger than the love of a mother for his children, how can I resist when my son is in pain. Sometimes parents and elderly people make us speechless from their love".

Another participant narrated his experience:

"My father has a routine whenever he goes for offering prayer to the mosque, he uses to take kids in his arms after coming back and love them and dua dete Hai unhe (give blessings to children), but as we are stopping him these days, he feels a little annoyed and emotional and he talks like theek hai tm logo k bache hai ab masjid se ak dua bhi nhi de skta ma dua se bhi virus hojayega (it's alright they are your kids, now I can't give blessings to them as through this I will give them a virus)".

Few participants shared that their parents, grandparents, and other elderly people took coronavirus more seriously than any other member of their family and they not only follow all precautionary measures but also implement all SOPs more strongly at home.

One of the participants responded:

"Most of the family members understand about the virus and we don't face any problem in process of convincing them".

Researchers asked about the kind of sensitive nature or major sentiments elderly people showed about the risk of virus and following precautionary measures. The majority of the participants were in a view that most of the elderly people of their families expressed more frustration and anxiety during the lockdown phase. They showed more emotional attachment towards their children and grandchildren due to dependency, they felt insecure, stigmatized, and left out if one emphasized the risk of virus they have, more than others.

One participant shared:

"My father-in-law gets sentimental if we stop him touching young infants whenever he came back home from outside. He feels left out by his family if anyone in the family gives him food in the room and asks

him to take shower by coming back home and before touching kids, he feels family members are cutting him off”.

Another one stated:

“My mother stopped talking to us and refused to eat anything given by us just because we quarantined her when she got sick and had virus symptoms. She felt like family members considered her a source of virus spread”.

One more participant added:

“My mother-in-law felt stigmatized when we started giving extra care to her health and guiding her to follow precautionary measures. She started being so upset and kept on saying that we are making her a patient because we are fed up with her and wanted to send her to the hospital or old-age home. Then we stopped saying anything because we can't afford to make her mentally stressed. This is Pakistan elder's respect is more than health”.

Social and cultural barriers in coping with the sensitive nature of elderly people

With increasing age, elderly people become dependent on their family members or young adults in family for the daily life activities, decision making, and problems. Assisting, guiding, and helping elderly people in the family is quite challenging sometimes. This sudden change and dependence in life make them mentally stressed and stubborn. They continuously face a dilemma where they want their family members' guidance, support, and help related to their daily life activities and well-being, but show their persistence, resistance, and stubbornness when children and adult family members tried to help them, protect, or guide them. This all is a sign of elderly age.

The majority of participants shared that it is more difficult to deal with the elderly age stubbornness during the pandemic phase than on normal days. Most of the participants are of the view that family ties, respect factors, religious norms, and empathy are some of the prominent social and cultural barriers in coping with the sensitive nature of elderly people in the pandemic phase.

One of the participants shared his view:

“I think the family tie is a barrier in this. I prefer to ignore arguing with them or convincing them about changing their behavior and adopt precautionary measures because it usually becomes a cause of dispute”.

Another participant added:

“I think respect factor comes in between. They feel disrespected or annoyed whenever I ask them to do something against their behavior and routine”.

One of the participants nodded:

“I think empathy towards elder people comes first then any precautionary measures. I mean it's okay elders are blessing, if they are not washing hands before eating or playing with kids don't force them, it will hurt them, or they will feel emotionally distressed”

Another participant explained his point:

“We can’t avoid our religious norms here. Whenever we tried to convince them not to hug and shake hands with others while greeting, performing prayers at home, not offering food to any stranger, or any other religious ritual which we are avoiding due to the pandemic, makes them feel like they are doing something against religion so they will get angry and won’t listen to you”.

Experience of family members while dealing with the stubborn and rigid behavior of elderly people

Researchers asked participants to share the experience they had with the elderly people in convincing them about the pandemic and its precautionary measures. All the participants shared some interesting positive and negative experiences.

One female participant narrated:

“My father got this virus and felt panicked about staying alone in his room. He felt insulted when I served him food on disposable plates and cups. It was difficult for us to convince him. He is afraid of living alone, so he kept the door of his bedroom open”.

positive responses also came from a few participants from which one shared:

“We are very much at peace because we didn't need to convince them, they are more aware of all this than us.”

One participant shared her embarrassing experience:

“I want to share one incident here, my grandfather has the habit of going to mosque five times a day, so it was very difficult to keep him at home. We had to blackmail him regarding his grandchildren, and we felt really ashamed doing this”.

One more participant shared a joyful experience:

“We are blessed I think because our elders are very responsible, even they told us to follow sop's which is a very positive response”.

One more participant added about his father’s experience:

“My father shared that when he went for jummah prayers to the mosque he found people are overcrowded when he asked Imaam to reduce some people he said don’t be afraid we are praying Allah will protect us we don’t need to do precautionary measures.”

Discussion

The present qualitative analysis aimed to stumble on the overly sensitive nature of aged family inmates as a socio-cultural barrier to combat COVID-19. The first theme of the present study exhibited the experiences of bread earner adults with the elderly people of their families during the COVID-19 phase. The study inquired about the feelings and behaviors of elderly people during COVID-19, and it was found that the elderly people residing at home showed more mental crisis and anxiety than others (Vahia et al., 2020). It was quite difficult to deal with the sensitive nature of elderly people during the pandemic phase as it is hard to convince them about this virus and its precautions.

The opinions expelled by the majority of participants in the second theme were about the sensitive nature of elderly people in their later life, their emotional attachment and

dependency on their children and grandchildren (Laird et al., 2019). Continuous guidance about the risk of virus and forcing them to follow SOPs make them feel socially isolated, insecure, stigmatized, and left out. Findings revealed that elderly people showed more signs of frustration and anxiety during the lockdown phase, when they felt more dependent on their family members and had no outdoor activities (Hamm et al., 2020).

Study findings revealed that stubbornness is an elderly age sign. People show stubbornness more in older age than at younger because of the sudden shift in their lifestyle from independent and self-decision maker to dependent, more rely on family members for guidance, decision making, and daily life activities (Heid et al., 2016). Participants shared that elderly people showed more stubbornness in the covid pandemic phase, especially on lockdown days. The reason for this increased stubbornness is the care, protection, and restriction they get from family members in this phase, because elderly people were more at risk of virus carriers than others (SSDO, 2020). Family members started giving extra attention and protection and guidance to them so that they can protect their elderly people and family members from this virus. This extra care and restriction make them more sensitive to following SOPs of COVID.

Findings indicated in the third and last theme of the study were that sociocultural barriers like respect factor, empathy, religious norms, and emotional dependency of elderly people on family members make it harder to deal with the stubbornness and sensitive nature of the elderly in making them understand and accept precautionary measure like following SOPs and getting vaccinated to protect them from coronavirus.

Conclusion and implications

The findings of current study showed that COVID-19 has a drastic effect on the elderly persons. It has changed the day-to-day routines of billions of people around the globe. The effect on domestic sphere is quite visible, it affects the daily routine, decision making, mobility of members, behavior of children and elderly members. The families found it very hard to deal with the sensitive nature of elderly people during the pandemic stage, as it is tough to persuade them about this virus, its protections, and precautionary measures.

These elderly people found it difficult to follow the SOPs and guidance about the risk of virus by the family members, it seems to them that they were lonely, uncertain, left out and stigmatized due to these remedial steps. Due to this, they displayed more frustration and anxiety during the lockdown phase as they were not allowed to do outdoor activities. They showed more stubbornness and resentment as they were dependent upon their families. Family members started giving extra attention, protection, and guidance to them, so that they can protect their elderly people and family members from this virus. The findings will help the policy makers to realize about the designing of awareness, religious, homebased, interest related programs for persons of every age group.

As these elderly people have little or no access to technology, social medias, unable to make use of the technology, they have suffered the worst effects of COVID-19. The steps should be taken by government to minimize the negative effects of Corona and other pandemic in future, by increasing access to technology during lockdown period for these people. There should be more elderly interest related entertainment and religious programs on media.

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