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How Does COVID-19 Affect Demographic, Administrative, and Social Economic Domain? Empirical Evidence from an Emerging Economy

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ABSTRACT

Worldwide, the COVID-19 pandemic has had a significant impact on social and economic conditions as well as mental and physical health. Pakistan is considered in high ranks on Uncertainty Avoidance Index (UAI). The people of Pakistan have already faced numerous obstacles in terms of food and housing prospects. Job security, inflated prices of food items, and financial distress are the foremost vital challenges of Pakistan's people during the Pandemic. This study examines the people's perception of social, economic, and psychological impact and explores the causes and trends of spreading the COVID-19 pandemic in Pakistan. A primary survey method was conducted to collect the data from all Punjab divisions via questionnaire, and 471 respondents were finally selected for data analysis. The data collection instrument was a questionnaire, and the data analysis tool was SPSS. Investors, analysts, business professionals, economists, business faculty staff, and civil society are the study's populations. The findings show that the overall social and economic life has been affected (82% of respondents agree) by the COVID-19 pandemic. 60.5% of respondents manage their spending through salary (mean value = 4.45), while 45% use savings (mean value = 4.25). Moreover, Government support (mean value = 3.95) plays a vital role in managing expenditure in this COVID-19 outbreak in Pakistan. Consequently, this study confirms that the lock-down implementation measure (mean value = 2.20) is not considered useful in reducing COVID-19 due to Pakistan's financial and economic uncertainty. This study concluded the social distance and testing measures are vital tools in reducing the COVID-19 pandemic in Pakistan. However, the study established that micro-smart lockdown, increased COVID-19 testing kits, and adequate medical equipment in the Hospital of Pakistan are the key mechanism to control the pandemic. Consequently, this study recommends that thorough long-term planning be undertaken to mitigate the pandemic's worst effects and develop a comprehensive strategy with society as the primary focus.

KEYWORDS

COVID-19; health; socioeconomic; socio-demographic; uncertainty avoidance index; micro-smart lockdown

1 Introduction

The novel coronavirus (COVID-19), spread by a severe acute respiratory syndrome called coronavirus 2 (SARS-CoV-2), has spread worldwide, while it is controversial from where it is started [1].

The COVID-19 first emerged in Wuhan (China) around December 2019; it became a global pandemic causing multiple deaths [2]. Globally, as of March 02, 2022, WHO had confirmed 437,333,859 cases of COVID-19, including 5,960,972 deaths. Meanwhile, there have been 1,510,221 confirmed cases of COVID-19 in Pakistan, with 30,196 deaths [3]. None of the countries were ready for this novel virus and the health measures [4,5]. The spread of this disease was too unpredictable. This caused a state of fear across the world [6,7]. It was declared a global pandemic in March 2020 by World Health Organization (WHO) [8]. This virus has affected every country's economic, social, and political aspects, and the first case of COVID-19 in Pakistan was reported around February 2020 in Karachi. The different political, religious, and domestic activities were caused to spread this novel virus in Pakistan [9].

The COVID-19 outbreak affected all the economies globally irrespective of their region, religion, color, ethnicity, and income status [10]. It was observed that all economies of the world suffered severely [11,12]. The gross domestic production (GDP) declined, and unemployment and inflation increased during this pandemic. It ruthlessly affected the formal, informal, social, health, services, tourism, education, and manufacturing sectors [13]. Pakistan is a developing country, and its economy suffered during this pandemic. Millions of workers have faced unemployment during this outbreak. Different manufacturing and production sectors have to face difficulties during their exports, and significant drops were observed like carpets and leather sector −19.2% to −27.4%, respectively [14]. Similarly, sports and surgical units, −14.19% to −8.4%, respectively [15]. It was observed that a lack of administrative coordination with public behavior was observed, which caused COVID-19 in the country. The country's gross domestic products (GDP) fall from 5% annual to less than 3% for the fiscal year 2019–2020 [16]. On 13th March 2020, a coordination committee was made called National Coordination Committee (NCC) to deal with the global pandemic outbreak in Pakistan. NCC coordinated with NCOC (National Command Operation Center) as per prime minister's orders to deal with financial, social, economic, and other aspects of this pandemic in Pakistan. Food scarcity and other social issues were also to be dealt with under the command of this committee.

Internationally, Pakistan stands in high ranks on Uncertainty Avoidance Index (UAI). Pakistan ranks 21 among 52 countries with an average of 70 [15]. The institutional structures of Pakistani also represent the level of Uncertainty Avoidance that is seen as a public policy. This is why Pakistan stands low on innovation in the world [17]. Therefore, the people are much concerned about job security, savings, and future expenditure management planning, and the COVID-19 pandemic creates challenges for the local people to manage their day-to-day lives. Pakistan's surgical sector production was also affected due to the lockdown of the country and global supply market demand. During the survey, it was also observed that the education sector is considered Pakistan's largest job-providing sector [18]. During the lockdown, the primary school level to university level jobs seekers were affected, and almost 3 to 5 million educated people were affected. The unemployment ratio of Pakistan labor was monitored at 5.8% in 2018, but in the fiscal year 2020–2021, it was expected to be 8.1% [19].

The first quarter wave of the COVID-19 pandemic in Pakistan from February to May 2020 severely affected the country. In developing countries like Pakistan, where public health, education, and social services sectors are not given much importance, it was also challenging to face this pandemic [20]. After a strict lockdown of two-month mid-March to mid-May 2020 and its impacts on all life sectors, the government decided to implement a smart lockdown on COVID-19 affected areas. This strategy shows relatively better results to control COVID-19 and also to support the economy of the country. This strategy was very successful, and further government changed this strategy to a micro smart lockdown until the end of this COVID-19 outbreak. It showed tremendous results to control the COVID-19 pandemic and to support the socio-economy sector of the country. NCOC became a major stakeholder in making decisions related to the regulation of economic and social activities. According to Nafees et al. [21], the main cause of the outbreak in Pakistan was the late quarantine of travelers and

citizens. Shafi et al. [22] stated that the micro, small, and medium-sized enterprises (MSMEs) were adversely affected by the COVID-19 epidemic in Pakistan.

Pak et al. [23] demonstrated how the majority of governments worldwide misjudged the risks posed by COVID-19, its rapid infectivity, and the consequences for communities. Daily wages employees were mostly affected during the COVID-19 outbreak. Khalid et al. [24] explored the healthcare challenges posed by the COVID-19 pandemic, as well as the Pakistani government and institutional reactions to COVID-19. This work suggests that the government must act responsibly to safeguard the security of healthcare practitioners. Saeed et al. [25] explained the process of monitoring COVID-19 cases in the province of Punjab, Pakistan. The number of cases of COVID-19 was predicted by using predictive models. Manzoor [26] discussed how the general public's non-compliance with SOPs for preventing COVID-19 had exacerbated the disease's current issues. This is fueled by the weak implementation of smart lockdowns and travel restrictions as per government decisions. Ali et al. [27] explained the measures that overwhelmed the low-income countries like Pakistan during COVID-19. The study proposes that the countries make appropriate and short-term measures to slow the transmission of the virus, deal with its current implications, and simultaneously draw out a plan to devise long–term measures to deal with the lasting effects of COVID-19. Sharif et al. [28] addressed knowledge and research gaps regarding novel coronavirus clinical symptoms and gender relationships in different age groups in Punjab, Pakistan. The article examines the gender-based trends in COVID-19 positivity in other age groups in multiple districts of Punjab, Pakistan. Meo et al. [29] described the challenges faced by Pakistan during the COVID-19 pandemic and the government of Pakistan's policies to contain and control the spread of the disease. The fragility and vulnerability of the health system infrastructure were intensified due to the increase in the number of infected COVID-19 cases.

This study aims to observe community perception during the coronavirus disease COVID-19 pandemic on the socioeconomic, environmental, demographic, and administrative sectors of Pakistan. An online survey was conducted through a questionnaire from 9 divisions of Punjab province, Pakistan. The research work may assist people and government institutions to minimize the spread of the coronavirus by adopting long-term planning.

The rest of the paper is organized in the following manner. Section 2 provides the proposed methodology, which is comprised of study design, questionnaire development, sampling strategy and sample size, and data analysis. Section 3 reports the results based on the questionnaire and statistical analysis that are discussed in Section 4. Finally, the conclusion and recommendations for further work are presented in Section 5.
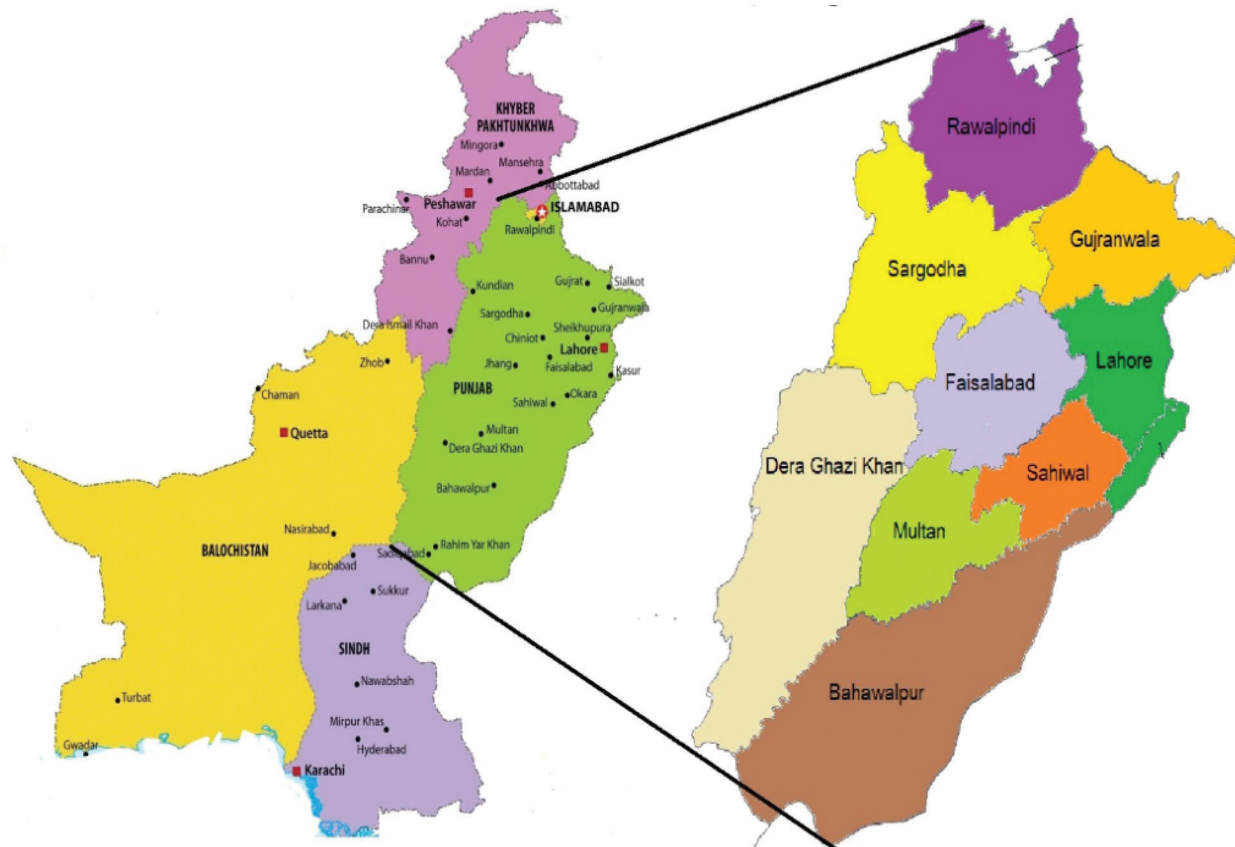
2 Methods

2.1 Study Context

When the outbreak began in Pakistan, governments were unprepared to cope with it. At first, the entire country was put on lockdown. The corporate community was adamantly opposed to this choice, but saving lives and protecting public health came first [30]. After two months of strict lockdown, business was halted, exports suffered substantial losses, and more than 90% of respondents agreed on the recession [31]. Table 1 shows the COVID-19 outbreak when the first patient was identified in Pakistan from February 26, 2020, to 31 July 2020 and similarly 1st August 2020 to 31 December 2020 total COVID-19 cases in Pakistan, and a comparative graphically representation. Gallup observed that unemployment reached 28%, and almost 6.65 million people were unemployed during the 2020 fiscal year. It was also observed that GDP declined to almost negative 2%. Pakistan's economy suffers, and nearly 50% of export affected during this pandemic [14]. World Bank also warned perhaps Pakistan's economy might fall into recession [32]. The most significant impact of lockdown was observed, the slowdown of business activities. Punjab Province's big cities Lahore, Faisalabad, Gujranwala Rawalpindi, and Multan industrial units were closed,

and almost 4 million workers suffered [33] (Fig. 1). Self-employed persons like shopkeepers, vendors, teachers, and personal household industries like mechanics and plumber carpenters are also affected. These are the undocumented economy and almost 7 million people, totaling nearly more than 55% of businesses affected during this COVID-19 pandemic lockdown.

Table 1: COVID-19 comparison table among provenances

	Punjab	Sindh	Khyber Pakhtunkhwa	Baluchistan	Islamabad	AJK/Gilgit Baltistan
COVID-19 cases deaths	502,254	569,293	216,113	353,62	134,054	43,074/11,550
	13,512	8,087	6,286	377	1,014	788/192

Note: Source NCOC: https://covid.gov.pk/stats/pakistan.

Figure 1: Study map of nine divisions in Punjab Province, Pakistan

2.2 Study Design

The study has collected the data based on two criteria; the sample is based on the relative divisions' population and the second criteria are the affected with Pandemic.

2.3 Questionnaire Development

The primary instrument was established in English and accomplished in Pakistan. We did not interpret it into the Urdu language, the Pakistan countrywide language, because the English language is the official

language and generally recognized and understood. The study has utilized the instrument already used by Ali et al. [34] to analyze the impact of the COVID-19 pandemic on socio-demographic, administration, and socioeconomic vulnerability. The researchers argued that developed instruments are more reliable in analyzing the new study in the same area. The research states that it increases the reliability of the questionnaire. Thus, the pilot study has been conducted and sent the data to the experts of relevant fields. The participants were requested to give remarks on the wording and designing of the instrument to confirm quality. To follow their feedback and remarks, we additionally reviewed and finalized the questionnaire. A five-point Likert scale was used to collect data [35].

2.4 Sampling Strategy and Sample Size

The questionnaire has sent to 850 respondents to respond to an underline study from all nine divisions of Punjab, Pakistan (Table 2). However, a total of 471 individuals have finally been selected for analysis. The studies were also received the missing response, but it is ignored in the analysis. The response rate is 55.41%, and 379 responses are rejected because of uncompleted and unreturned. Questionnaires were sent to the respondents from May 2020 and again reminded in November 2020. The time limit for the collection of survey responses was determined in December 2020. Dillon et al. [36] argued that in the case of "cold surveys" (Responders who have not previously committed themselves to participate), the response rate might be considered low. The research reveals that a response rate of 31.23% means that a satisfactory success rate has been attained in the responses [35].

Table 2: Participants from nine divisions of Punjab Province

Divisions of Punjab	Frequency	Percent	Cumulative percent
Lahore	174	37	37
Faisalabad	57	12	49
Rawalpindi	80	17	66
Multan	71	15	81
Bahawalpur	24	5	86
Sargodha	19	4	90
DG khan	9	2	92
Gujranwala	28	6	98
Sahiwal	9	2	100.0
Total	471	100.0	

2.5 Data Analysis

SPSS (v.24.0) was employed to facilitate data analysis [37,38]. The questionnaire is based on two sections. The first section contains six (6) items related to the demographics of respondents. The second section includes thirty-eight (38) items. These items are divided into eight different scales to measure. The variables represented in the following way: PSI "Perceived Social Impact", PEI "Perceived Economic Impact", PEM "Perceived Expenditure Management", PMR "Perceived Measures Reducing COVID-19", IPC "Identifying COVID-19 Pandemic Causes", PM "Philanthropy Measure," KMCP "The Key Mechanism to Control Pandemic".

The study used Cronabah's Alpha method to check the reliability and consistency. The Cronbach's Alpha (Eq. (1)) value of all variables above 0.70 represents the data reliability (Table 3).

$$\alpha = \frac{N\bar{p}}{1 + \bar{p}(N-1)} \qquad (1)$$

Table 3: Reliability test

Scale	Cronbach's Alpha
PSI	0.786
PEI	0.734
PEM	0.794
PMR	0.724
IPC	0.734
PM	0.713
KMCP	0.725

3 Results

COVID-19 Pandemic is a global threat because they have the potential to infect a large proportion of the world's population. Governments, domestic agencies, and non-governmental organizations (NGOs) must set lofty goals and take strong action to tackle this menace. On the one hand, the lockdown is hailed for its success in halting the spread of COVID-19, averting deaths, and preserving the healthcare system from total breakdown. In contrast, it is blamed for worsening poverty and unemployment, closing economic lifelines, increasing the prevalence of mental health disorders, and facilitating gender-based violence [39].

Table 4 indicates the demographic information of all individuals. The sample represents 376 (80%) males and 95 (20%) females, out of a total sample of 471 in Pakistan. The majority of the sample (51.8%) are above age 50, followed by between 41 to 50 years and then 31 to 40 years. The sample reveals that 86 (18.4%) respondents are inter or less educated. Whereas 230 (48.7%) of respondents have a bachelor's degree and 155 (32.9%) respondents have a master's or above education. The total samples include 271 (57.5%) businessmen, 94 (20%) students, 93 (19.7%) professional and 13 (2.8%) respondents were in other occupation background. The findings show that the majority of respondents, 386 (82%), respond agree, and 71 (15%) show their neutral behavior, whereas the 14 (3%) feel disagreement regarding the pandemic effect of their social lives.

Table 4: Demographic information

Sample (N = 471)		
Demographic	**Frequency**	**Percentage**
Gender		
Male	376	80
female	95	20
Age		
<30	16	3.42
31–40	42	8.9
41–50	169	35.88
>50	244	51.8

(Continued)

Table 4 (continued)		
Sample (N = 471)		
Education		
Inter	86	18.44
Bachelor	230	48.7
Masters	155	32.9
Occupation		
Business man	271	57.5
Student	94	20
Professional	93	19.7
Other	13	2.8
Pandemic effect		
Disagree	14	3
Neutral	71	15
Agree	386	82

3.1 Perceived Social Impact

Table 5 shows that most respondents (53.25%) strongly agree with the statement "my daily routine impact with pandemic" in perceived social impact. The mean value of the responses (4.35) is also depicting the direction towards strongly agrees. To answer the "Limited my social life impact with the pandemic," most respondents agreed with the response, whereas the means value (3.75) represents the respondents' agree on a response. The respondents agree on the statement "My family gatherings" impacted COVID-19, while the average responses also represent agree. Thus, the overall findings of the descriptive statistics show that the People in Pakistan believe (3.82) that COVID-19 impacts their social lives.

Table 5: Perceived social impact (S.D = Strongly Disagree, D = Disagree, N = Neutral, A = Agree, S.A = Strongly Agree)

"Perceived social impact"	N	S.D %	D %	N %	A %	S.A %	Mean	Std. deviation
"My daily routine"	471	0.44	0.66	15.55	30.1	53.25	4.35	0.1204
Limited my social life	471	0.4	1.1	33.75	25.25	39.5	3.75	0.1603
Shortage my traveling plan	471	0.8	4.1	57.25	25.45	12.4	3.35	0.184
My family gatherings	471	0.8	3.2	15.25	60.5	20.25	3.85	0.1727
Average mean	471						3.82	0.1632

3.2 Perceived Economic Impact

Respondents were asked how the perceived economic impact during COVID-19 in Punjab, and their results are shown in Table 7. It was indicated that 65.5% of respondents strongly agree that they have financial distress, and 58.5% were suffered due to inflated prices of domestic food items during the

pandemic. The most important result of the table indicates the mean value (4.07) of "perceived economic impact", which is a problematic situation that requires high attention by the government authorities to deal with it in a better way. Table 6 shows the relative responses of the perceived economic impact of respondents.

Table 6: Perceived economic impact

"Perceived economic impact"	N	S.D %	D %	N %	A %	S.A %	Mean	Std. deviation
Financial distress	471	0.5	1.5	8	24,5	65.5	4.40	0.13
Decrees in my earnings	471	1.5	3.5	15	61.5	18.5	3.65	0.1503
Concerned to loss my job	471	1	1.5	7.5	34.5	55.5	4.25	0.134
Lack in investment plans	471	1	4.5	24.5	55.5	14.5	3.75	0.1847
Inflated prices of domestic food items	471	–	2	4	35.5	58.5	4.35	0.11
Total mean	471				4.86	4.26	4.07	0.1532

Table 7: Perceived expenditure management plan

Perceived my expenditure management plan	N	S.D %	D %	N %	A %	S.A %	Mean	Std. deviation
My salary	471	–	4.5	5.5	29.5	60.5	4.45	0.1123
My savings	471	–	6	18	31	45	4.25	0.1503
Return from business/Investment	471	–	10	29.5	40	20.5	3.25	0.134
Government support	471	2	5	19	49.5	24.5	3.95	0.1747

3.3 Perceived Expenditure Management Plan

Table 7 shows the results of the perceived expenditure management plan during COVID-19, and it was asked how to manage expenditure in the pandemic. The table indicates that 60.5% of people manage their expenditure through their salaries, and 45% of respondents have to utilize their savings. These results analyze that respondents take care of their future and strongly agree to depend on their salaries during the COVID-19 outbreak so that policy-makers should realize this reality.

3.4 Identifying the COVID-19 Pandemic Causes

Since COVID-19 spread in all provinces, Punjab is one of Pakistan's largest provinces, a highly dense and populous area. Table 8 represents the respondent's behavior towards identifying the COVID-19 pandemic causes. The means values of the finding depict that the shortage of testing kits in hospitals (4.70), lack of precautionary measures (4.20), and lack of awareness about COVID-19 intensity (3.70), respectively, are the major key causes of spreading coronavirus in this region.

Table 8: Identifying the COVID-19 pandemic causes

Identifying the COVID-19 pandemic causes	N	S.D %	D %	N %	A %	S.A %	Mean	Std. deviation
People did not cooperate with Govt institutions	471	–	12.75	56.75	24.75	5.75	3.20	0.1723
Lack of awareness about COVID-19 intensity	471	1.25	8.25	24.25	55.75	10.50	3.70	0.1503
Shortage of testing kits in hospitals	471	–	1.50	7.5	21.75	69.25	4.70	0.134
Lack of precautionary measure.	471	–	1.25	8.25	30	60.50	4.20	0.1747
Others	471	–	4.50	60.50	30.50	4.50	3.35	0.1245

3.5 Perception to Take Measure in Reducing COVID-19

Table 9 explained that the majority of respondents strongly agreed on this point that "social distance" (60.50%) and "testing measures" (45.5%) are necessary steps in reducing COVID-19, respectively. However, the low economy and financial instability in Pakistan show their disagreement on "lockdown implementation" as a measure in reducing COVID-19.

Table 9: Perception to take measure in reducing COVID-19

"Perception to take measure in reducing COVID-19"	N	S.D %	D %	N %	A %	S.A %	Mean	Std. deviation
COVID-19-testing measure	471	0.50	1.25	12.50	40.25	45.5	4.30	0.1323
Lock-down implementation measure	471	15.5	25.50	36	12.75	10.25	2.25	0.2103
Social distance measure	471	–	1	8.50	30	60.50	4.65	0.134
Face mask in pubic place	471	2.50	8.25	14.5	32.5	42.25	3.60	0.2147

3.6 Philanthropy Measures

The findings (Table 10) regarding the Philanthropy measure represents that the financial support (4.77), availability of commodities on subsidies prices (4.45), Food support facility (4.30), and appropriate medical facilities (3.90) initiatives by the state agencies play as the key philanthropy measures to cop this period of pandemic challenges. Although, NGOs' role as a philanthropist is considered much significant by the respondents of the sample.

Table 10: Philanthropy measures

Philanthropy measures	N	S.D %	D %	N %	A %	S.A %	Mean	Std. deviation
Food support facility	471	–	4.5	5.5	29.5	60.5	4.30	0.1123
Appropriate medical facilities	471	–	6	13	65.5	15.5	3.90	0.1403
Financial support	471	–	1	8	22.5	68.5	4.77	0.114
Availability of commodities on subsidies prices	471	–	2.5	7.5	31.5	58.5	4.45	0.1347
Awareness campaign and public Seminars		–	5.5	62.5	23.5	8.5	3.55	0.1785
NGOs		2.5	10	22.5	44.5	20.5	3.70	0.2310

3.7 The Key Mechanism to Control Pandemic

Since the increased cases of COVID-19, the federal government of Pakistan is trying to adopt a key mechanism to control this situation of the pandemic. This study asked the respondents to respond to their perception towards a key mechanism to prevent a pandemic, and responses are shown in Table 11. The results express that respondents (75.5%) strongly agree that the government should impose a micro-smart lockdown in 9 divisions of Punjab to control the pandemic. Consequently, our descriptive statistics also confirmed that the Micro-smart lockdown of 4.70 and testing kits (4.60) is a key mechanism to control pandemics. However, Increase quarantine centers (3.50) and lockdown for an extended period (2.75) are not considered the key mechanism to prevent pandemics.

Table 11: The key mechanism to control pandemic

The key mechanism to control pandemic	N	S.D %	D %	N %	A %	S.A %	Mean	Std. deviation
Lockdown for a longer time period	471	6.0	20.5	65.5	5.5	2.5	2.75	0.1923
Smart Lockdown	471	–	5	15	60	20	4.10	0.1303
Micro-smart lockdown	471	–	0.5	9.5	15.5	75.5	4.70	0.134
Increase COVID-19 testing kits in hospitals	471	–	–	6.5	23.5	70	4.60	0.1747
Increase quarantine centers		–	6.5	43.5	41.5	8.5	3.50	0.1387
Adequate medical equipment in hospital			4.5	5.5	29.5	60.5	4.30	0.1234

3.8 Institution Performance during COVID-19 Pandemic

Table 12 shows the respondent's responses towards the Institution Performance during the COVID-19 pandemic, representing the mean value and standard deviation of the responses and descriptive statistics. The means values (4.60, 4.45, 3.60 & 3.20) represent the institution's performance during COVID-19. Respondents reported that Government and local institutions had performed highly during pandemics.

Table 12: Institution performance during COVID-19 pandemic

Give performance rating in different institution	N	S.D %	D %	N %	A %	S.A %	Mean	Std. deviation
Local government	471	–	4.5	5.5	28.5	61.5	4.45	0.1423
NGOs	471	–	11.5	70.5	15.5	2.5	3.20	0.1203
Community members	471	–	11	28.5	42	18.5	3.60	0.174
Govt agencies	471	2	5	19	49.5	24.5	4.60	0.1947

4 Discussion

The developing world's people, such as Pakistan, have already had various food and housing opportunities challenges. That outbreak of pandemics in this region further worsened these challenges. Pakistan stands in high ranks on Uncertainty Avoidance Index (UAI) [15]. Consequently, people are much anxious about job safety, savings, and expenditure management strategy. In terms of perceived social influence, the data indicate that the majority of respondents strongly agree with the statements "my daily routine has an effect" and "my daily routine has been changed by the epidemic". Additionally, the majority of respondents say that my travel planes have been impacted by this issue. The respondents

concur with the statement "COVID-19 has influenced my family gatherings". Thus, the overall findings of the descriptive statistics show that the People in Pakistan believe that COVID-19 impacts their social lives. Our finding of social life is in line with the study of Espinoza et al. [40].

During COVID-19, respondents were asked how the pandemic had affected their personal finances. The results suggested that people were in financial difficulties and that higher prices of domestic food products had a negative influence. The most critical consequence is "perceived economic effect", which is a serious problem that needs to be addressed by the government. In addition, concerns about job security and income were critical in this case. As a result, finding a decent investment opportunity was also a major challenge for Pakistanis. Likewise, job insecurity was a real challenge for working people in the United States throughout the influenza outbreak [41]. During COVID-19, it was questioned how to manage expenditure in a pandemic. Through their wages and savings, people manage their daily expenses and budget accordingly. The government's assistance may potentially play a significant role in resolving this issue. This study discusses that government aid plays a vital role in managing expenditure in this COVID-19 outbreak in Pakistan. Though, the Ehsas program by "Poverty alleviation and social safety division of Pakistan" and Banazeer income support program play a significant philanthropy measure for the support of needy people in that challenging situation of Pakistan. A relief package of around 203 billion rupees was launched under the Ehsas emergency cash program, where more than fifteen million families were helped to overcome the financial strain.

Pakistan's largest province, Punjab is a densely populated area that has been infected by COVID-19. Coronaviruses are spreading in this area because to three main factors: a lack of hospital testing kits, a lack of preventative measures, and a lack of knowledge regarding COVID-19 intensity. It is determined that "social distance" and "testing measures" are necessary steps in reducing COVID-19 spread. However, Pakistan's weak economic and financial instability demonstrate their opposition to "lockdown implementation" as a tool for lowering COVID-19. Meanwhile, our study found the availability of commodities on subsidies prices, food support facility and appropriate medical facilities philanthropy measures by central and local government play a significant role in controlling pandemics. Still, the non-governmental organizations (NGOs) role is not found satisfactory by the people of Pakistan. When it comes to the "perceived economic impact", it is a complex issue that needs the government's full focus to deal with it adequately. Meanwhile, this study expressed that the Lock-down implementation measure is not considered a good mechanism in reducing COVID-19 due to financial and economic uncertainty in Pakistan. Also, this study confirmed the social distance and testing measures are key tools in reducing the COVID-19 pandemic. Consequently, the study confirmed the micro-smart lockdown, increased COVID-19 testing kits, and adequate medical equipment in the Hospital of Pakistan are the key mechanisms to control pandemic in the case of Pakistan. Additionally, the survey examined respondents' perceptions of the institution's performance during the COVID-19 pandemic. According to the findings, the government and local institutions behaved admirably during the pandemic. However, the participation of NGOs in addressing this challenge was deemed insufficient.

To properly implement lockdown and other policies, the government must consult the local key stakeholders and examine their serious aspects such as unemployment, inflation, products availability, and economic security while making critical decisions in the Pandemic. Consequently, this study suggested that comprehensive long-term planning prevents a pandemic's worst effects and builds a comprehensive strategy with society as the primary focus. However, the findings of this study should serve as a cautionary note when making simplistic assessments of sociodemographic and socioeconomic vulnerability during the COVID-19 Pandemic. Based on our research and the public's plea for government assistance, the following policies would stimulate and assist the community in surviving this pandemic. Firstly, the public expects government policies and actions such as tax exemptions, subsidies on essential goods, loan rescheduling, and significantly reduced house utility costs. Secondly, increased

investment in areas such as public health facilities and health care is necessary to improve and meet medical needs in such situations. Finally, the government should promote, enable, and incentivize the online business industry in order to ensure that basic commodities and goods are accessible to all individuals within the micro smart lockdown zone.

The above notwithstanding, there are some limitations to this study. This study is preliminary, and further research at various stages in the pandemic is necessary to assess the pandemic's consequences, the effectiveness of the public policy, and public reaction. Moreover, while this study focuses mainly on Pakistan, additional research is necessary to ascertain the impact of COVID-19 on other cultural, social, and governmental systems before our findings can be applied and generalized to other low-income countries. Resource constraints such as time, funds, and lockdown measures limited the study's scope, forcing it to be conducted only on Punjab Province rather than the entire country.

5 Conclusions

The COVID-19 pandemic has affected all nations worldwide, affecting the social, economic, psychological, and physical lives. That transmittable infection is hazardous and infects the large human population on earth, requiring high intentions and serious actions from global, domestic bodies, and NGOs. The study confirmed that social distancing and testing are the key instruments in Pakistan's fight against the COVID-19 epidemic. The study demonstrated that micro-smart lockdown, increased COVID-19 testing kits, and adequate medical equipment at the Pakistan Hospital are key pandemic control mechanisms. Meanwhile, Pakistanis are anxious about job security, rising food prices, and financial distress. They do, however, rely on incomes and savings to manage their expenditures during a pandemic. Legislators and government organizations need to understand the value of compensation and savings. Thus, future studies can also consider addressing these concerns to provide further depth of knowledge about the consequences of the ongoing pandemic on the socio-demographic, administrative, and socioeconomic of Pakistan.

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