

# **Status of Covid-19 Vaccination among Marginalised Groups in Pakistan**

## **Survey Report**

**By**

**AwazCDS-Pakistan**

**&**

**Pakistan Development Alliance**

## **Supported By**

**Global Call to Action against Poverty**

**People's Vaccine Alliance**

**Bread for the World**

**May, 2023**

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**People’s Vaccine Alliance:** is a coalition of over 100 organizations and networks, supported by Nobel Laureates, health experts, economists, Heads of States, faith leaders and activists, working together towards equitable access to medical technologies that help to prevent and respond to COVID-19 and future pandemics. The Alliance grew organically out of the open letter calling for a People’s Vaccine, organized in May 2020. We work together to end vaccine apartheid. For more information please visit <https://peoplesvaccine.org/>

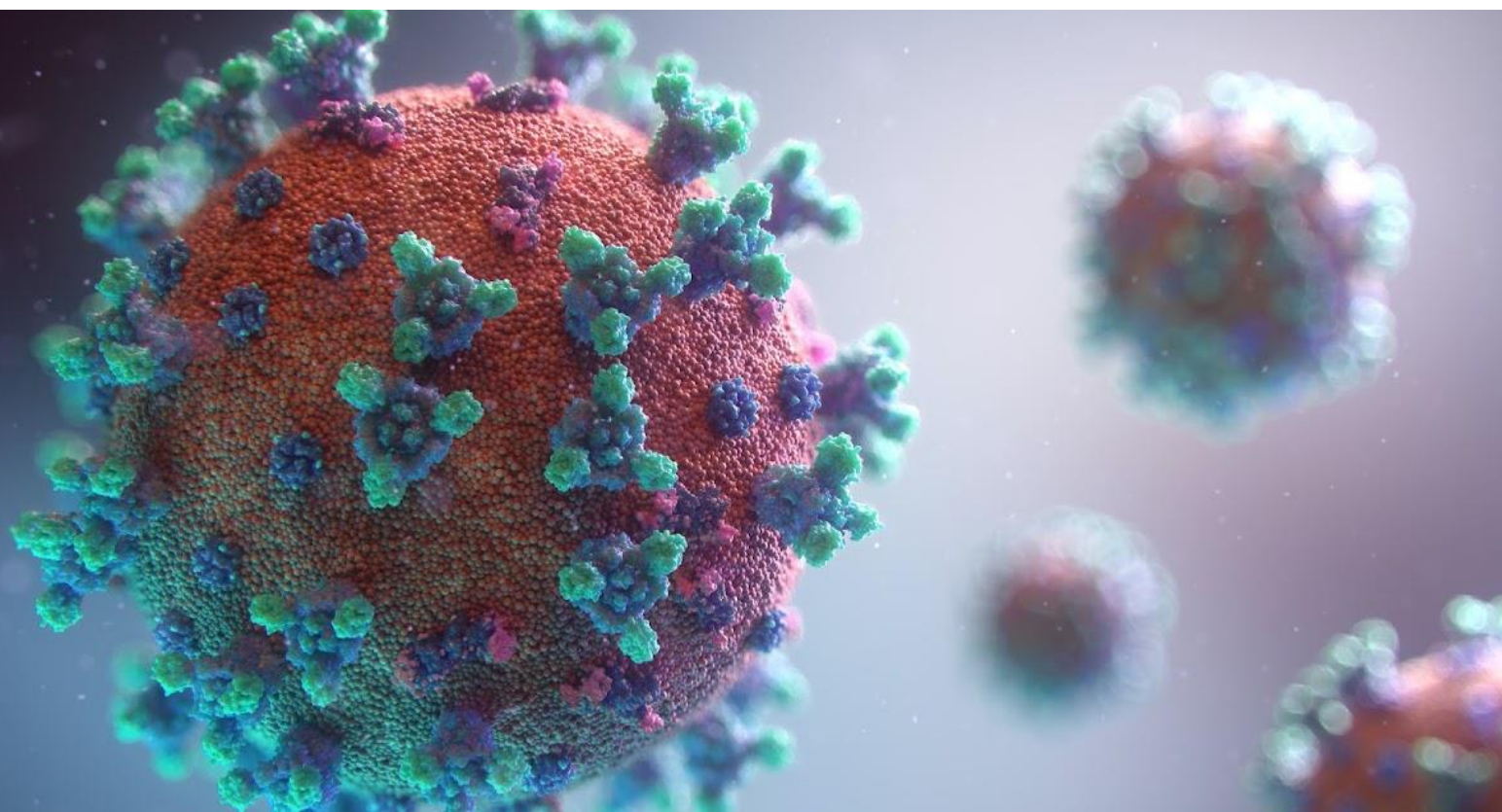
**Global Call to Action against Poverty:** is a network of over 18,400 civil society organizations (CSOs) organized in 66 National Coalitions and in constituency groups of women, youth and socially-excluded people, among others. GCAP supports people in their struggles for justice and brings individuals and organizations together to challenge the institutions and processes that perpetuate poverty and inequalities. For more information, please visit <https://gcap.global/>

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## **Acknowledgement:**

The role of field teams of [NARI Foundation Sukkur -Sindh](#) and [Jaag Welfare Movement](#) – R Yar Khan -Punjab is hereby acknowledged for collection of data from the marginalized households. Both the organizations are district leads of [Pakistan Development Alliance](#).

We also acknowledge the effort of Ms. Mariam Amjad Khan from [AwazCDS-Pakistan](#) for devising the workable methodology and leading the process of the survey.

The contributions of [Global Call to Action Against Poverty \(GCAP\)](#) and Peoples [Vaccine Alliance\(PVA\)](#) Asia, [Bread for the world](#) are highly acknowledged as without their technical and financial support the voices of marginalized communities might not have been collected and surfaced at mainstream.

## **Introduction:**

On December 31, 2019, first official case of Covid-19 was reported in Wuhan China. The first case of COVID-19 in Pakistan was reported on 26th February 2020. As of May 16<sup>th</sup>, 2023 total 1,580,900 cases were reported with 30,660 deaths<sup>1</sup>. It means 98% of COVID-19 affected population was recovered and discharged while 2% death were recorded. To curb COVID-19 in Pakistan, the [National Command and Operation Centre \(NCOC\)](#) was established and expanded with the scope of vaccination program to include children who were 5 years old or above. Vaccination was made mandatory across educational institutes and those who do not get vaccinated, would not be allowed to attend schools. To facilitate the vaccination process, NCOC had arranged mobile vaccination teams at their schools and children were also get vaccinated at vaccination centres near them. But unfortunately the [National Database on COVID19](#) could not shares vaccination rate among children, person with disabilities, transgender communities and religious minorities. Such data was required to be prepared and shared publicly for taking proper policy measures to ensure “Zero COVID Case” in Pakistan.

In February 2022, [Gallup Pakistan](#) launched a survey on COVID-19, for which the objectives were to have a comprehensive overview of changes in public perception, attitude and behaviour towards COVID-19. The tracker measured public response and behaviour towards COVID-19, socio-economic impact, overall changes and impact of coronavirus lockdown on the daily lives of ordinary Pakistanis. The findings share that 61% Pakistanis still hold the opinion that the threat of coronavirus is exaggerated and nearly 2 in 5 Pakistanis (41%) still believe that the coronavirus is a foreign conspiracy. The survey finding also shared that 84% of adult Pakistanis (who were part of survey) with mobile phone access admitting that they have received at least one dose of the COVID-19 vaccine.

In order to assess the situation of vaccine inoculation among marginalised communities, [Pakistan Development Alliance](#) decided to conduct household survey of women headed families, religious minorities, PLWDs and transgender communities. The focus of survey was to understand their vaccination status as well as if access to vaccination was easy for them or not. Gallup and other national statistics only gave information as whole of population but surveying marginalised communities would give us idea of **vaccine inequality** and their behaviour towards vaccination.

## **Purpose of the Survey:**

- Provide a comprehensive overview of vaccination status among marginalized communities.
- Examine a pattern and statistics of vaccination in line with government’s official data.
- Understand the determinants of COVID-19 vaccine hesitancy among marginalized populations.

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<sup>1</sup> <https://www.worldometers.info/coronavirus/country/pakistan/>

## Methodology & Process of the Survey:

[AwazCDS-Pakistan](#) and [Pakistan Development Alliance](#) conducted the survey to collect primary data to investigate the status of Covid-19 vaccination among vulnerable groups in two largest provinces of Pakistan i.e. Punjab and Sindh. Two districts were chosen to collect data i.e. District Rahim Yar Khan from Punjab and District Sukkur from Sindh. In order to ensure the best use of available resources **704 households (HHs) were targeted via convenient sampling**. These **704 HHs** were divided equally into four main categories of vulnerable segments including **88 Transgender People, 88 Women Led Households , 88 Religious Minorities Households and 88 Person Living with Disabilities Led Households for each district**. A comprehensive **Survey Tool** was prepared with the support of GCAP/PVA regional teams- **Annexure A**. Two field teams of 4 members each were formed and capacitated on survey tools. The teams collected data from whole of the selected districts based on convenient sampling between February- April 2023.

## Demographic Analysis of the Targeted Households:

Category		Population of Households	Percentage
Province	Punjab	1580	59%
	Sindh	1104	41%
	Total	2684	100%
Vulnerability Status	Transgender Community	176	7%
	Women Led Families	762	28%
	Religious Minorities	1043	39%
	Person Living with Disabilities	703	26%
	Total	2684	100%
Age	5 - 17 Years	652	24%
	Above 18 years	2032	76%
	Total	2684	100%
Gender	Male	1269	47%
	Female	1239	46%
	Transgender	176	7%
	Total	2684	100%
Disability Status	Yes	235	9%
	No	2449	91%
	Total	2684	100%

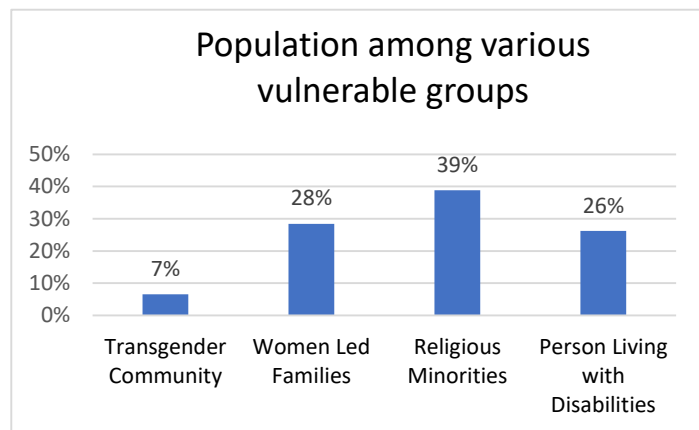
The demographic analysis of the above table shows interesting results i.e. the total population of households in **Punjab** is more than the **Sindh** province which is **1580** and **1104** respectively. **Whereas, the population of households of religious minorities is highest with 1043 inhabitants as compared to other vulnerable groups**. Number of females (46%) is slightly

lesser as compared to number of males (47%) which is somehow contrary to the national census that claims more women as compared to men in our country.

Overall the rate of PLWDs population among targeted 704 households was 9% which is again contrary to the globally acclaimed population of PLWDs in Pakistan as 15%. Both these contradictions on sex and disability may have been noticed because of the exclusion of two provinces i.e. Balochistan and Khyber Pakhtunkhwa from the survey sample.

The survey also found out the population of targeted households between 5-17 years is 24% and above 18 years is reported as 76% .

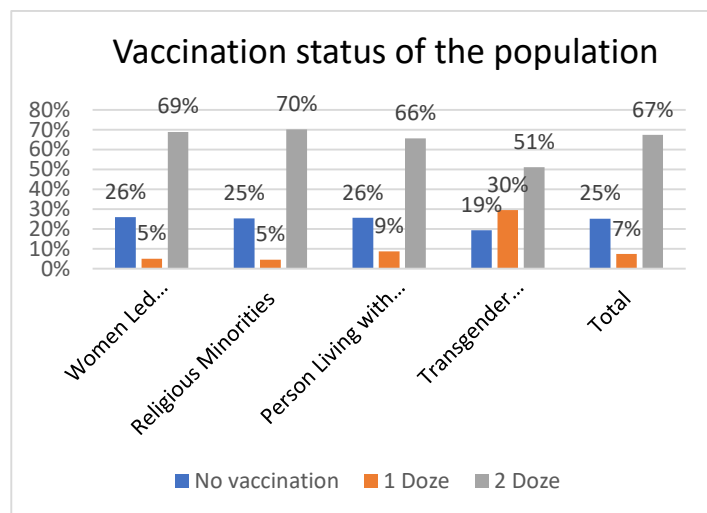
Out of total 2684 inhabitants of targeted 704 households 26% (703) belonged to the families of person with disabilities, 39% (1043) belonged to the families of religious minorities, 28% (762) belonged to the Women led families and 7% (176) were transgender people .



**Findings of the Survey regarding COVID Vaccination:**

**a) Vaccination status of marginalized groups:**

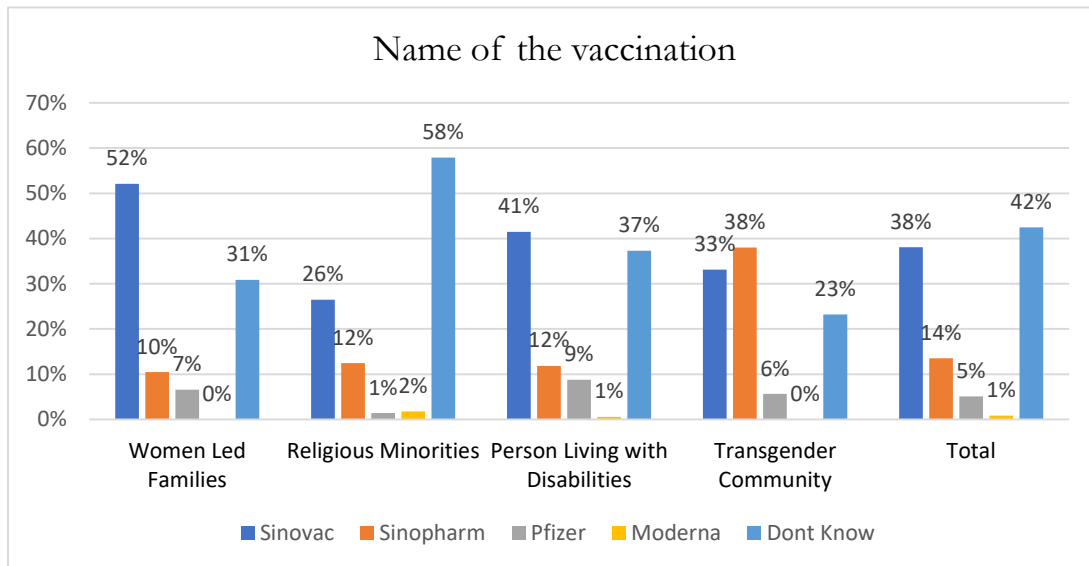
When all four marginalized categories were asked if they and their families got COVID vaccination? so category “Religious Minority” came up as highest vaccinated category who had 2 dozes with 70% and “Women Led Families” and “Person with Disabilities” with 69% and 66% respectively. However, the “Transgender Community” who were surveyed had lowest



vaccination rate with 51%. And among all four categories averagely 67% populations were vaccinated with 2 dozes, 7% population had single doze whereas 25% population had not received any COVID vaccination at all. Although, this categorized data cannot be cross matched with national data as there was no category covered other than males and females as they covered population in these two broad categories. Even though, the category of PLWDs and Transgender must have been mentioned separately for information and analysis purpose whereas national data

reflects that total of 59.55% population is vaccinated in Pakistan by May 14, 2023<sup>2</sup>. Since we have surveyed only districts of Punjab & Sindh where the rate of vaccination is comparatively higher than the rate of vaccination in Balochistan and Khyber Pakhtunkhwa.

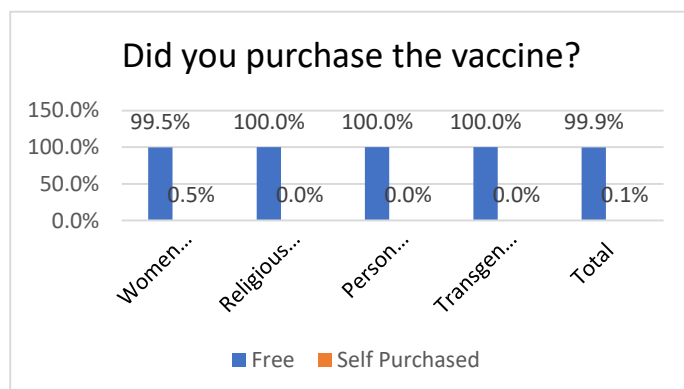
**b) Vaccine Brand used by surveyed population:**



When surveyed population was asked if they remember or know the vaccination name they have inoculated. So majority of population (42%) responded **“NO”** they do not remember name of the vaccine. Among rest of the 58% population who were inoculated 38% named Sinovac , 14% named Sinopharm, 5% named Pfizer and 1% remembered and named Moderna as their vaccine brand used. Therefore most of the people used Chinese vaccine brands that were actually readily available through public vaccine centers.

**c) Vaccine Availability and Affordability:**

When people were asked if they purchased the vaccine or got free? **99.9% responded that they received vaccine “Free”** and only **0.5% people from women led families disagreed and responded that they purchased.** The media reports also shares the evidence of Government decision to provide COVID-19 vaccines free of charge (fully funded) to its citizens to ease the burden and suffering of the people during the pandemic<sup>3</sup>.



**d) Age-wise vaccination status:**

<sup>2</sup> [https://ycharts.com/indicators/pakistan\\_coronavirus\\_full\\_vaccination\\_rate](https://ycharts.com/indicators/pakistan_coronavirus_full_vaccination_rate)

<sup>3</sup> <https://gulfnnews.com/world/asia/pakistan/pakistan-to-provide-free-covid-19-vaccines-to-citizens-1.75644950>



Population of 2684 individuals were asked about the vaccination status keeping them in two major age categories one is from 5-17 years and other is above 18 years. Province wise breakdown is available below:

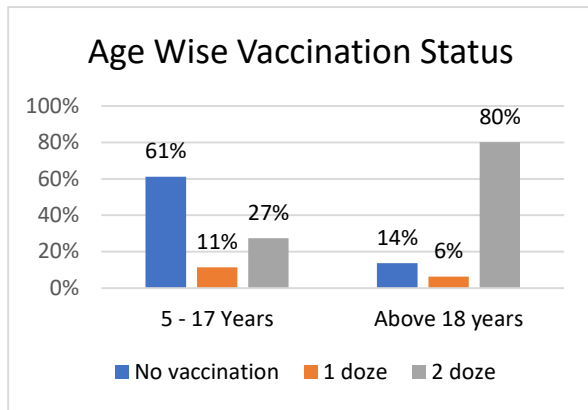
		Vaccination Status						
		No vaccination		1 doze		2 doze		Total
		#	%	#	%	#	%	#
Punjab	5 - 17 Years	277	73.3%	30	7.9%	71	18.8%	378
	Above 18 years	186	15.5%	94	7.8%	922	76.7%	1202
Sindh	5 - 17 Years	122	44.5%	44	16.1%	108	39.4%	274
	Above 18 years	91	11.0%	33	4.0%	706	85.1%	830
Total	5 - 17 Years	399	61.2%	74	11.3%	179	27.5%	652
	Above 18 years	277	13.6%	127	6.3%	1628	80.1%	2032

Looking at the results, we can infer that majority of population of age 5-17 years i.e. 61.2% could not be inoculated in both the provinces whereas Punjab leads with 73.3% population followed by Sindh with 44.5% of the population between the age of 5-17 had no vaccine. Moreover 11.3% population from this age group only availed single doze. While out of total only 27.5% population of age 5-17 are vaccinated with two doses. None of the participants had third and fourth booster doses which were recommended by WHO at one stage when sixth and seventh variant of Corona Virus was being observed.

COVID-19 vaccination was first initiated in Pakistan on 3<sup>rd</sup> February 2021. Phasing out the vaccination plans for the masses, the priority was first given to frontline health workers, senior citizens, and people at high risk with comorbid health conditions. Vaccination was opened for 15 years plus ages from 13th September 2021 while it was further extended to those above 12 years of age from 28th September 2021<sup>4</sup>. Statistics of the number of children who received COVID-19 vaccination to date, its safety, and side effect profile in children in Pakistan are majorly unavailable from the official websites of the [Ministry of National Health Services Regulation and Coordination, Pakistan](#).

<sup>4</sup> CDC . COVID-19 Vaccines for Children and Teens. National Centre for Immunization and Respiratory Diseases (NCIRD), Division of Viral Diseases (2022). [Google Scholar]

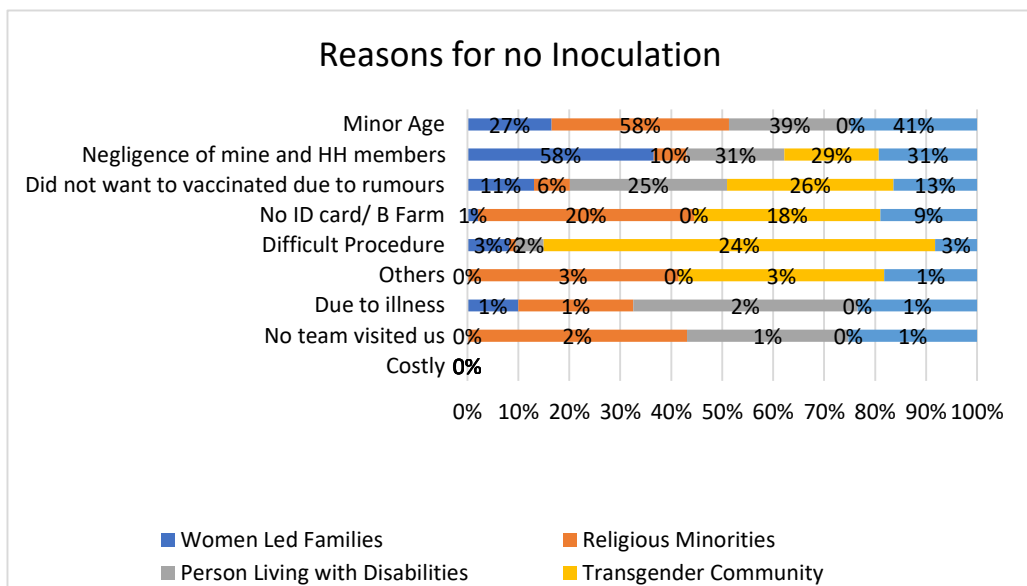
If we look at the vaccination status of overall population covering both age categories show that **80%** of the population are vaccinated with **02 dozes**. Whereas the national data shares Pakistan Coronavirus Full Vaccination Rate is **59.55%** as on May 14 2023<sup>5</sup>. As stated earlier, this might have been due to the reason that we have surveyed only Punjab and Sindh where sensitization level of people is relatively not influenced by religion and other customary practices. Whereas in Balochistan and Khyber Pakhtunkhwa provinces people are less inclined towards vaccinations due to religious influences and considering COVID as drama of western states and the vaccine may cause sexual impotency in the people.



**e) Reasons for no Inoculation:**

When 20% population, who were not vaccinated from all four marginalized categories were asked about the reasons behind not vaccinated? **41%** shared that more children are minor in their families so they are not vaccinated. According to the data of **women led families** the two most important reasons that their households were not vaccinated are, their negligence as stated by 58% and there were more

more minor in the family as stated by 27%. For the religious minority having more minors in the families remained the reason



with **58%** for not getting them vaccination and 20% of them also revealed that they could not get vaccination because they did not have computerized national identity card (CNIC) which was mandatory to get registration for vaccination.

The two major reason for the **PLWDs** were also minor age and negligence of their own or other household members with the rate of **39%** and **31%** respectively. Three major reasons of transgenders for no inoculation were negligence (**29%**), rumors (**26%**) and because of difficult

<sup>5</sup> [https://ycharts.com/indicators/pakistan\\_coronavirus\\_full\\_vaccination\\_rate](https://ycharts.com/indicators/pakistan_coronavirus_full_vaccination_rate)

procedure for registration as stated by 24%. Transgender community had that highest % of reason with difficult procedures and the report on access to COVID vaccination for transgender community in District Multan carried out by the UNDP and Ministry of Human Rights Pakistan also reflected similar concerns on the challenges of access to healthcare for the transgender community in Pakistan<sup>6</sup>.

### **Exclusion angle and Vaccine Inequality:**

Unfortunately, the Pakistan's national data base on status of Covid-19 cases as well as vaccination status was not disaggregated in many ways. The figures regarding treatment, deaths and vaccination cases are available either **province wise or gender wise** that only covers as males and females. The data based on all three genders, age categories and upon marginalized groups on basis of religion, disability and inclusion of transgender is not available at any level as public information. According to the Pakistan Bureau of Statistics of the Government of Pakistan, Pakistan has a majority Muslim population i.e. 96.47%, while 2.14% population is Hindu and 1.27% of the population is Christian<sup>7</sup>.

There is very less data available on angle of exclusion in independent studies also. A paper published by National Institute of Health “ Vaccination-hesitancy and Vaccination-inequality, Challenges in Pakistan's COVID-19 Response<sup>8</sup>” shares that “hesitancy” and “inequality” as two fundamental challenges that hinder the successful delivery of COVID-19 vaccination in Pakistan. People are reluctant to use vaccines due to conspiracy theories and religious beliefs. However, inequality, especially unequal accessibility to all social groups appears to be a more significant barrier to get a vaccine<sup>9</sup>.

The corruption of some members of the Pakistani elite has posed a significant challenge in the equitable distribution of the COVID-19 vaccine. Those in power had either used money as bribes or political pressures or threats to the health officials administering the COVID-19 vaccine to gain access to the COVID-19 vaccine doses for themselves and their family/ relatives. Dawn News leaked one such story where the family and friends of the Federal Minister of Housing (Tariq Bashir Cheema) received the COVID-19 vaccine at the minister's home when the first shipment of free vaccine arrived in the country<sup>10</sup>.

Moreover, already marginalized religious minorities in Pakistan are further away from getting COVID-19 vaccines. They were experiencing allegations and discriminations during the pandemic. Since the COVID-19 reached Pakistan with Shia pilgrims returning from Iran, people named the

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<https://www.tandfonline.com/doi/full/10.1080/07399332.2022.2029864?scroll=top&needAccess=true&role=ab&aria-labelledby=full-article>

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<sup>7</sup> ] Bureau of Statistics (2017) '2017 Census of Pakistan', available <https://www.pbs.gov.pk/>

<sup>8</sup> <https://pubmed.ncbi.nlm.nih.gov/34217150/>

<sup>9</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8426931/>

<sup>10</sup> Dawn News (2021). Minister under fire for allegedly using influence to get family vaccinated for COVID19. [www.dawn.com/news/1615465](http://www.dawn.com/news/1615465)

Coronavirus as “Shia Virus.” There were also rumors about incidents of Muslim aid workers mobilizing Hindus to convert to Islam if they want to receive humanitarian aid during the pandemic. Such incidents pushed the religious minorities further away from the equitable supply of COVID-19 vaccine if/when it becomes available for the public in Pakistan<sup>11</sup>.

## **Conclusion & Recommendations:**

The COVID-19 pandemic has caused multiple socioeconomic problems in Pakistan due to the country's fragile politics, struggling economy, and unstable healthcare system. Therefore, traditional media outlets and social media platforms might have helped educating masses and to overcome vaccine hesitancy by engaging medical professionals rather than airing biased commentaries or political views on COVID-19.

The government and civil society activists should educate the masses to question the authenticity of information they receive when they refuse for COVID-19 vaccine.

There is a need for the Pakistani government to launch an expanded public educational outreach campaign to disseminate accurate and honest information about the spread of Coronavirus to encourage vaccine acceptance for public safety.

The Ministry of Health also required to provide a comprehensive and segregated data of cases of COVID test, treatment and deaths keeping in mind the angle of inclusion. It is evident from the findings of our survey that **minor population in Pakistan is still not being vaccinated due to fears and stigma** while government had announced vaccination campaign many times explaining that the vaccine is safe for them.

The following are some important recommendations for future

- Improve the capacity of healthcare system to cater the needs of our ailing population/ marginalized communities in future such pandemics.
- Build the capacity and provide behavioral education to healthcare providers to deal with such catastrophes in future.
- 13 million women don't have CNICs and this shows that they are already excluded because they did have access to vaccination centers without CNICs.
- Government led campaigns are necessary at national / mainstream media to address the challenges against misconceptions based on religion and other antagonisms.
- This is important to ensure the accessibility at the vaccine centers to facilitate PLWDs.

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<sup>11</sup> Mirza, J. A. (2020). COVID-19 fans religious discrimination in Pakistan. The Diplomat. <https://thediplomat.com/2020/04/COVID-19-fans-religious-discrimination-in-pakistan/>

# کووڈ ویکسین کی کوریج سے متعلق سوالنامہ

## Annexure A: Survey Questionnaire in Urdu

اگر ویکسین نہیں لگی تو ویکسین نہ لگوانے کی وجہ کیا ہے؟	ویکسین آپ کو مفت ملی یا پیسوں سے خریدنی پڑی	ویکسین کا نام یاد ہے تو بتادیں	ویکسین سیٹس	گھر کے سربراہ کا موبائل نمبر	کیا کسی قسم کی معذوری کا شکار ہیں؟	جنس	پیدائش کا سال	عمر	علاقہ	نام (گھر کے سربراہ کے نام سے شروع کریں)
1- لگوانے کا طریقہ مشکل تھا۔ 2- مہنگی تھی۔ 3- انواہوں کی وجہ سے لگوانا نہیں چاہتے تھے 4- خود کی یا گھر والوں کی لاپرواہی تھی۔ 5- دیگر: _____	مفت خریدنی پڑی		نہیں لگوائی 1 ڈوز لگوائی 2 ڈوز لگوائی		ہاں نہیں	مرد عورت خواجہ سراہ		سال 5 - 17 18 سال سے زیادہ		1
1- لگوانے کا طریقہ مشکل تھا۔ 2- مہنگی تھی۔ 3- انواہوں کی وجہ سے لگوانا نہیں چاہتے تھے 4- خود کی یا گھر والوں کی لاپرواہی تھی۔ 5- دیگر: _____	مفت خریدنی پڑی		نہیں لگوائی 1 ڈوز لگوائی 2 ڈوز لگوائی		ہاں نہیں	مرد عورت خواجہ سراہ		سال 5 - 17 18 سال سے زیادہ		2
1- لگوانے کا طریقہ مشکل تھا۔ 2- مہنگی تھی۔ 3- انواہوں کی وجہ سے لگوانا نہیں چاہتے تھے 4- خود کی یا گھر والوں کی لاپرواہی تھی۔ 5- دیگر: _____	مفت خریدنی پڑی		نہیں لگوائی 1 ڈوز لگوائی 2 ڈوز لگوائی		ہاں نہیں	مرد عورت خواجہ سراہ		سال 5 - 17 18 سال سے زیادہ		3

4

سال 5 - 17  
18 سال سے زیادہ

مرد  
عورت  
خواجہ سراہ

ہاں  
نہیں

نہیں لگوائی  
1 ڈوز لگوائی  
2 ڈوز لگوائی

مفت  
خریدنی پڑی

- 1- لگوانے کا طریقہ مشکل تھا۔
- 2- مہنگی تھی۔
- 3- انواہوں کی وجہ سے لگوانا نہیں چاہتے تھے
- 4- خود کی یا گھر والوں کی لاپرواہی تھی۔
- 5- دیگر: \_\_\_\_\_

5

سال 5 - 17  
18 سال سے زیادہ

مرد  
عورت  
خواجہ سراہ

ہاں  
نہیں

نہیں لگوائی  
1 ڈوز لگوائی  
2 ڈوز لگوائی

مفت  
خریدنی پڑی

- 1- لگوانے کا طریقہ مشکل تھا۔
- 2- مہنگی تھی۔
- 3- انواہوں کی وجہ سے لگوانا نہیں چاہتے تھے
- 4- خود کی یا گھر والوں کی لاپرواہی تھی۔
- 5- دیگر: \_\_\_\_\_

6

سال 5 - 17  
18 سال سے زیادہ

مرد  
عورت  
خواجہ سراہ

ہاں  
نہیں

نہیں لگوائی  
1 ڈوز لگوائی  
2 ڈوز لگوائی

مفت  
خریدنی پڑی

- 1- لگوانے کا طریقہ مشکل تھا۔
- 2- مہنگی تھی۔
- 3- انواہوں کی وجہ سے لگوانا نہیں چاہتے تھے
- 4- خود کی یا گھر والوں کی لاپرواہی تھی۔
- 5- دیگر: \_\_\_\_\_

7		سال 5 - 17 18 سال سے زیادہ	مرد عورت خواجه سراہ	ہاں نہیں	نہیں لگوائی 1 ڈوز لگوائی 2 ڈوز لگوائی	مفت خریدنی پڑی	1- لگوانے کا طریقہ مشکل تھا۔ 2- مہنگی تھی۔ 3- انواہوں کی وجہ سے لگوانا نہیں چاہتے تھے 4- خود کی یا گھر والوں کی لاپرواہی تھی۔ 5- دیگر: _____
8		سال 5 - 17 18 سال سے زیادہ	مرد عورت خواجه سراہ	ہاں نہیں	نہیں لگوائی 1 ڈوز لگوائی 2 ڈوز لگوائی	مفت خریدنی پڑی	1- لگوانے کا طریقہ مشکل تھا۔ 2- مہنگی تھی۔ 3- انواہوں کی وجہ سے لگوانا نہیں چاہتے تھے 4- خود کی یا گھر والوں کی لاپرواہی تھی۔ 5- دیگر: _____
9		سال 5 - 17 18 سال سے زیادہ	مرد عورت خواجه سراہ	ہاں نہیں	نہیں لگوائی 1 ڈوز لگوائی 2 ڈوز لگوائی	مفت خریدنی پڑی	1- لگوانے کا طریقہ مشکل تھا۔ 2- مہنگی تھی۔ 3- انواہوں کی وجہ سے لگوانا نہیں چاہتے تھے 4- خود کی یا گھر والوں کی لاپرواہی تھی۔ 5- دیگر: _____