

## POSTER #19

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### **Current experience and future challenges of COVID 19 in Sri Lanka: An Auto-ethnographic study**

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**Background:** Sri Lanka a Lower Middle Income Country (LMIC) reports 2850 confirmed COVID-19 cases and 11 deaths. With no definite treatment or vaccine available, different public health measures were employed to contain the pandemic.

**Objectives:** To describe the efforts undertaken in Sri Lanka to manage COVID-19 pandemic and to learn from shared experiences.

**Methodology:** This study was conducted as an auto-ethnographic study. Narrative accounts of key team members of Sri Lanka's pandemic management teams were synthesized into a master narrative.

**Results:** All portals of entry in to Sri Lanka adopted a screen and quarantine policy after the first patient was identified. All potential patients were tested and isolated regardless of symptoms. Polymerase-Chain- Reaction (PCR) testing capacity was achieved rapidly by collaborating with international and national partners. Hospitals and other institutions were remodified to accommodate and isolate all COVID-19 positive cases. Quarantine centers were created when home quarantine was unsatisfactory. High risk areas were identified and mobility restrictions were placed and expanded as lockdowns or curfews. Communication channels were developed between hospitals and public health systems. Police, military and government administrators and community leaders were actively involved with health officials in containing the pandemic to population clusters.

**Conclusion:** From a public health perspective, Sri Lanka was able to confine COVID-19 to population clusters using the 'test, trace and isolate' policy. There is concern regarding the long term feasibility of this policy, the economic impact of lockdowns and the threat for rapid spread on relaxing current public health measures.