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Social Entrepreneurship in COVID-19 Pandemic Experience from Sri Lanka

Vishaka Kerner,¹ Pathum Kerner,² Shrikant D Pande³¹Department of Anaesthesiology, Post Graduate Institute of Medicine, Sri Lanka²University of Colombo, Sri Lanka³Department of Rehabilitation Medicine, Changi General Hospital, Singapore

The COVID-19 outbreak has overwhelmed healthcare systems worldwide and was declared a pandemic by the World Health Organization on March 11, 2020.^[1] This has resulted in scarcity, stockpiling, rationing, prolonged use, and re-use of personal protective equipment (PPE) against COVID-19 infection prevention.

Sri Lanka is an island in South Asia. It has a well-established primary healthcare system that provides free healthcare services to all citizens (~21 million) despite its budgetary constraints.^[2]

The first case of COVID-19 in Sri Lanka was recorded on January 27, 2020.^[3] Subsequently, the government developed public health surveillance systems, contact tracing mechanisms, quarantine centers, and an early lockdown on March 20, 2020.^[4] By end of June 2020, the country remained at the clusters level without community transmission with just over 2000 cases and only 11 deaths.^[5]

Our experience with past disasters has shown that a high degree of community-based volunteer activities can lead to social entrepreneurship, which can mitigate the situation. However, the essential factors of success were meticulous planning, determination, perseverance, dedication, and execution.

Authors aimed to provide a modified version of the intubation equipment, PPE (face shield cap, gown, and boot covers), and throat swab collection booths to hospitals across Sri Lanka. Quality and safety monitoring were performed by experts in related fields. The overall cost of these three projects was \$25,000.

The intubation equipment, "Aerosol Box" for intubation, was modified and redesigned with Acryl.^[6,7] After simulation testing of three different models (square, curved, and angulated ceiling), the curved version was selected. It was further modified to facilitate direct laryngoscopy. A modified pediatric version was redesigned. Due to the prevalence of COVID-19, the distribution of 180 aerosol boxes to 84 hospitals across the country was done voluntarily by four medical doctors.

Providing these essential items to enhance the safety of the front-line workers has shown the value of social entrepreneurship by volunteers during a pandemic.

The current pandemic has demonstrated that countries worldwide were struggling despite their healthcare infrastructure.^[8] During these unprecedented times of fear and anxiety, the involvement of community-based projects are essential since they reduce the psychological distress of the affected communities. This successful project can be a model to countries that are experiencing scarcity of PPE.



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Address for correspondence:
Dr. Vishaka Kerner, Post
Graduate Institute of Medicine,
Sri Lanka

Phone: +94770777198

E-mail:
vishakakerner@yahoo.com

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REFERENCES

1. Cucinotta D, Vanelli M. WHO declares COVID-19 a pandemic. *Acta Biomed* 2020;91(1):157-60.
2. WHO. Primary Health Care Systems (PRIMASYS) - New case studies available. Available at: <https://www.who.int/alliance-hpsr/projects/primasys/en/>. Accessed Aug 12, 2020.
3. Epidemiology unit, Ministry of Health and Indigenous Medicine, Sri Lanka. Novel Coronavirus (2019-nCoV) - Situation Report – 2020.01.28. Available at: https://www.epid.gov.lk/web/images/pdf/corona_virus_report/sitrep-sl-eu-28-01.pdf. Accessed Dec 21, 2020.
4. Ranaraja M. Notes from Colombo: Sri Lanka weathers the Covid-19 storm. The Asia Foundation; 2020. Available at: <https://asiafoundation.org/2020/07/08/notes-from-colombo-sri-lanka-weather-the-covid-19-storm/>. Accessed Dec 21, 2020.
5. Epidemiology Unit, Ministry of Health and Indigenous Medicine, Sri Lanka. Coronavirus disease 2019 (COVID-19) - Situation Report – 25.05.2020 – 10.00am. Available at: https://epid.gov.lk/web/images/pdf/corona_virus_report/sitrep-sl-en-25-05_10.pdf. Accessed May 25, 2020.
6. Lai HY, Design A. Aerosol box-design. Available at: <https://sites.google.com/view/aerosolbox/design>. Accessed Mar 29, 2020.
7. Canelli R, Connor CW, Gonzalez M, Nozari A, Ortega R. Barrier enclosure during endotracheal intubation. *N Engl J Med* 2020;382(20):1957-8. [\[CrossRef\]](#)
8. Emanuel EJ, Persad G, Upshur R, Thome B, Parker M, Glickman A, et al. Fair allocation of scarce medical resources in the time of Covid-19. *N Engl J Med* 2020;382(21):2049-55. [\[CrossRef\]](#)