

## Case study on measures in an early stage of the pandemic

In Slovakia, COVID-19 infections fell after the rollout of rapid population-wide testing. Around 20,000 medical and 40,000 non-medical staff were deployed to run the programme which started with a pilot from 23 to 25 October 2020 and was followed by a round of national mass testing on 31 October and 1 November 2020. High prevalence counties were then targeted with a subsequent round on 7 and 8 November 2020.

More than 5 million tests were completed; the scheme involved swabbing by trained medical staff. Although Slovakia's testing was not mandatory, residents who did not attend were told to stay at home for 10 days or until the following round of mass testing. Those who participated received a medical certificate confirming their infection status. A negative test certificate was required by employers in order to enter workplaces, while other venues carried out random checks. Anyone with a positive test was asked to quarantine for 10 days, along with all members of the same household and their self-traced contacts.

### Please reflect on the following questions:

- What are the particular benefits of testing a whole population?
- What are the limitations of this strategy?
- What impacts does such a strategy have on individuals and society?
- What could have been done to overcome the limitations? At what costs for individuals and the society?
- Following the mass tests, a drop of infections was noted. Does this necessarily have to be a direct result of the testing?
- The testing has not been repeated to detect other varieties of the COVID-19 virus. What could have been the reason for this?
- What lessons can be learned in this context from the Covid-19 experience?