

9 February 2022 – In just a few days, we will see the 20th million person in our Region infected with COVID-19. Over the past 2 years, the losses due to the pandemic have been staggering, with more than 324 000 lives lost, major economic decline, social divisions, and family disruptions.

The virus continues to indiscriminately target people in all countries of the Region, regardless of age, gender, profession, or geographical location. But we know those who are most at risk of severe disease and death – the elderly, those with pre-existing conditions, the immunocompromised and front-line health workers. In our Region and other WHO regions, even the strongest health systems have become severely stressed.

There has been a dramatic increase in the number of COVID-19 cases over the past 6 weeks, with a daily average of over 110 000 cases. A rise in deaths has also been reported over the past 3 weeks, with a daily average of 345 deaths, but this increase is at a lower level than during previous waves, and vaccines are also providing protection against severe forms and deaths.

Vaccines remain one of the best tools to save lives. Despite several challenges, more than 35% of the Region's population is now fully vaccinated. Although rates of full vaccination vary enormously among countries, ranging from between 1% and 94%. Once again, inequity is a hallmark of this pandemic. And while vaccines remain a critical tool, our success requires a comprehensive approach with governments and communities at the heart of the response.

For more than 2 years, WHO has emphasized that the response to COVID-19 is not the responsibility of governments and partners alone but requires a whole-of-society approach. Engaging with civil society and communities is crucial in responding to COVID-19, emergencies, and for advancing universal health coverage.

And now, I want to focus on the critical role of communities in determining the course of this pandemic, and why until now, our setbacks in engaging communities have led to a continued increase in transmission, cases, and deaths.

We often say that outbreaks – and pandemics – start and end in communities. Since the beginning of the pandemic, WHO and partners have worked tirelessly to engage with key community stakeholders, including community leaders, religious leaders, health care workers, civil society organizations, and the media. This includes providing them with the knowledge, resources, and space to be involved in decisions on how to implement and apply COVID-19 response measures.

Throughout this pandemic, we have learnt that we need to do more to engage our communities and empower them to be active responders. Our goal is to highlight the critical role these groups have in empowering individuals and families to protect themselves and others, as well as ensure that COVID-19 response efforts are acceptable and accessible to those we are working hard to protect.

At the beginning of the pandemic, understanding the need for a joint approach to engage with communities, WHO established a regional risk communication and community engagement interagency working group for the Eastern Mediterranean Region/Middle East and North Africa, in partnership with the International Federation of Red Cross and Red Crescent Societies (IFRC) and UNICEF.

More recently, our long and strong partnership with IFRC was formalized in a memorandum of understanding between the 2 agencies. Central to this partnership has been our shared investment and efforts to engage with and empower communities to be active responders in the COVID-19 response, especially in conflict-affected countries and hard-to-reach communities.

Over the past 2 years, we have done this successfully through projects aimed at strengthening community partnerships for COVID-19, establishing community feedback mechanisms so that voices of the community are heard, and conducting training, as well as capacity building, for community partners, including faith leaders, health workers, community leaders and others.

Today we are joined by our colleague from IFRC, Mr Muhammad Shafique, who will share with us some of the joint efforts under way to strengthen community engagement in the Region.

But we still have a long way to go. To build resilient communities, we need the communities themselves to be conscious of the critical role they play in becoming more active players in the

battle against COVID-19. We need a tailored and comprehensive package of measures that strike a balance between protecting the rights, freedoms and livelihoods of individuals while protecting the health and safety of the most vulnerable members of communities. And we need political commitment, partnerships with civil society, and clear opportunities and arrangements where we include community partners in all aspects of our response. Under the umbrella of our regional 2023 vision of “Health for all, by all”, this pandemic will not end without collective solidarity and action by all people, including communities and individuals.

It is up to all of us – as individuals and community members – to take actions that can and will determine the course of this pandemic and ensure that future generations are spared from what we are currently enduring.

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