

19 August 2020 – Recently, we reached another grim, global milestone, with more than 21 million cases of COVID-19 reported. In our Region, we are on the brink of reaching 2 million cases. But still, it is never too late to turn the outbreak around.

There is a lot of hope on the discovery of an effective vaccine for COVID-19, and a lot of news and information – both accurate and not so accurate – is circulating.

So far, there is no vaccine that is pre-qualified by WHO to prevent COVID-19. However, an enormous amount of work is under way across the globe to develop one that is effective and safe. WHO is working with companies and sponsors, as well as with Gavi - the Vaccine Alliance, the Coalition for Epidemic Preparedness Innovation and others through the Access to COVID-19 Tools (ACT) Accelerator to expedite vaccine testing, as well as the scale-up of manufacturing so that countries will have equitable access if and when a vaccine is available.

There are currently 29 candidate vaccines in clinical trials and 138 candidate vaccines in pre-clinical evaluation around the world. Nine vaccine candidates have shown promising results and are already going through Phase 2 or 3 trials.

But there are still many unknowns in this process. Developing a vaccine against COVID-19 is the most pressing challenge of our time. Developing one or more safe and effective vaccines is also one of the most complex challenges we face. Unlike with past vaccine development, scaling up manufacturing and completing human trials for vaccine candidates must be done in parallel.

It is hoped that if a successful vaccine is found by the end of the year, there will be enough doses available to protect the population groups who are at most risk in all countries in a cascade manner during 2021.

But although we are cautiously optimistic, we must not rely on a future vaccine to fight this pandemic. We must use all of the tools we already have at our disposal. For countries, this means having to implement the fundamental public health measures to find, isolate, test and care for cases; and trace and quarantine their contacts. For individuals this means doing

everything to protect oneself and those around us. This means keeping your distance from others, cleaning your hands, avoiding crowded and enclosed areas, and wearing a mask where recommended.

And as the search goes on for a safe and effective vaccine against COVID-19, we must also remember that there are safe and effective vaccines already available for other diseases but their use has been declining over the past 7 months due to the ongoing pandemic.

According to new data, disruptions in the delivery and uptake of immunization services threaten to reverse hard-won progress to reach more children and adolescents with a wider range of vaccines. For example, due to a substantial drop in the number of children completing 3 doses of the DTP3 vaccine against diphtheria, tetanus and pertussis during the COVID-19 pandemic, the world could see a reduction in DTP3 coverage for the first time in 28 years.

If regular vaccination for all vaccine-preventable disease is not continued and stepped up in the coming months, we risk reversing some of the health gains made in child health in the last few decades.

I would like to take a moment to talk about World Humanitarian Day, which is marked by the United Nations today to acknowledge the bravery, resilience and dedication of humanitarians and health care workers across the Region and beyond.

Health workers and humanitarians in our Region work under some of the most challenging contexts in the world, where many countries are facing political instability, violent conflict, natural disasters, and multiple disease outbreaks. In fact, our Region comprises 9% of the world's population but is home to 43% of those needing humanitarian assistance. In previous years, attacks on health care workers in our Region have consistently been presented as some of the highest numbers worldwide.

This year, the already difficult work carried out by humanitarians in our Region has been made even more so by the COVID-19 pandemic. Health care workers are at increased risk of infection, they are overwhelmed, sometimes working with limited resources, and many have chosen to remain away from their families so as not to expose them to potential infection. Some have been exposed to attacks and discrimination, adding to their stress and compromising their

safety.

Just last week, we all witnessed the bravery of community volunteers, the humanitarian community and health workers in Lebanon following the Beirut port blast that killed almost 200 people, injured thousands and left hundreds of thousands homeless. This response to this major humanitarian crisis has been widely recognised, but today I would like to also acknowledge the bravery and efforts of all those involved. Many health workers were personally affected by the blast or had loved ones who were killed or injured. But they persevered in their mission to save lives and treated the injured anywhere they could – in the streets, on hospital floors, and even in health facilities that had no electricity due to being damaged.

Some lost their lives, and I express my utmost sympathies to their families. Others working under extreme pressure were later found to have been infected with COVID-19, and we are doing all we can as WHO to ensure that they have the supplies they need so that they are protected as the country battles increasing rates of transmission.

Today, I would like to thank all humanitarians and health workers in our Region and beyond all for the sacrifices they make both personally and professionally, for their selflessness, and their unyielding commitment to saving lives. In line with this year's theme for World Humanitarian Day, they are real life heroes!

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