

Guest Editorial

CORONAVIRUS (COVID-19) IS HERE TO STAY!

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The beginning of this year, 2020, has been a very challenging one as all over the world, we were caught right in the midst of the Coronavirus (COVID-19) pandemic. This pandemic is a serious global health threat, and its devastating effects are felt in all aspects of life. The World Health Organization (WHO) reported that as of 17th May 2020, we have 4,534,731 confirmed cases of COVID-19, and 307,537 deaths in total, throughout the world. In the WHO Western Pacific region, there were 167,546 confirmed cases, and 6,730 deaths while in the WHO Southeast Region, the COVID-19 accounted for a total of 136,314 confirmed cases, and 4,425 deaths (1). In Malaysia, the figure stood, thus far, at 6,872 confirmed cases, and 114 deaths while in Indonesia, there were 17,514 confirmed cases, and 1,148 deaths (2). Different countries are at different phases of this pandemic. While the curve may have flattened in some countries, there might still be spikes here and there. The COVID-19 pandemic has not disappeared; it is here to stay!

Scientists and researchers from around the world are working tirelessly to understand the virus, and to develop potential vaccines, therapeutics, and other technologies, in the shortest time possible. Healthcare organizations, and higher institutions of learning are working together to limit the human-to-human transmission of COVID-19,

aiming to minimize its impact among the vulnerable population, and in low-resource settings with limited capacity, thereby reducing the current threats posed to future risks. The past has shown us other infectious diseases and epidemics, and the lessons we have learned through addressing dengue, influenza, the HIV, Zika, Ebola, and other diseases can be applied in response to the COVID-19 pandemic. We need to strengthen our capacities in order to prevent, identify, monitor the cases, and to control further outbreaks of COVID-19. We also need to ensure that reliable public health information that is related to the COVID-19 pandemic is available to the general public, and to those healthcare providers involved in the response. Over the past few months, we have seen that several countries across the world, such as China, South Korea, and Taiwan, have implemented a comprehensive strategy that can effectively contain and suppress the spread of the virus while minimizing the impact on lives and livelihoods. The pandemic has shown us that investing in health should be our utmost priority, and perhaps, the smartest thing to do.

Binns and Low (3) explained that COVID-19 is spreading so rapidly because of the high transmission rate. In anticipation of a second wave of COVID-19, all borders will have to remain closed so as to be able to trace and

isolate all confirmed cases. Through this way, new infections will then stop. Singapore, as an example, has recently experienced a second wave as the virus has entered migrant labor camps where people lived in closed confines. As countries relax restrictions, new infections can be expected until a vaccine is available (1). Following this, health promotion programs need to emphasize on the avoiding of crowds, social distancing, hand washing and hygiene, and extensive testing of those persons at risk. Vaccine development is a slow process which may take a year or two before it can become a component of the public health interventions (4). Thus, this is the time for the public health leaders to ensure that we all work together to optimize the COVID-19 response, and to rebuild our health systems so as to make them stronger. Solidarity within and between countries, non-governmental agencies, private sectors, and the society at large, is important and essential, if we are to overcome this pandemic.

This supplement issue brings an array of articles which illustrate the diversity of public health problems in our region. The articles in this issue are the results of the APACPH-KL Early Career Global Public Health Conference on Implementing Science for Improving Population Health, organized by the Asia-Pacific Academic Consortium for Public Health-Kuala Lumpur (APACPH-KL), in collaboration with the Centre for Population Health (CePH), the Department of Social and Preventive Medicine, Faculty of Medicine, University of Malaya, Kuala Lumpur, and the Faculty of Public Health, University of Airlangga, Surabaya, Indonesia, in April 2019. We hope the collection of papers compiled in this proceeding will make a substantial contribution to public health in this region.

References

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