

Eid Al-Adha 2022

Risk Communication and Community Engagement Guidance

Key Messages

To policy- makers:

- Ministries of Health should closely collaborate with agriculture and animal sector to implement safe sacrifice practices
- Islamic leaders and other stakeholders should be actively engaged in decision making and dissemination of information related to risk communication and community engagement
- Communities should be involved and encouraged to adhere to safe practices aimed at addressing acute health risks in relation to Eid Al-Adha by increasing community awareness
- Strict measures should be adopted around the selling and slaughtering of animals, and the handling and distribution of meat, in line with common safe practices

To the general public:

- Foodborne illnesses are a result of eating foods contaminated with bacteria, viruses, parasites, or chemical substances. Contact your healthcare provider if you think you have eaten contaminated foods
- During Eid Al-Adha there is a higher risk that individuals may get sick from certain diseases spread from slaughtered animals. Reduce your risk by following proper animal management practices
- If you have fever, muscle or joint pain, headache, sore eyes after being in contact or slaughtering an animal, contact your nearest health facility.
- Eid Al-Adha is a time to care for others. COVID-19 continues to spread and is a risk for everyone, especially the elderly, the sick and pregnant women. Avoid gatherings or events if you're feeling unwell

Background

Eid Al-Adha is a holiday celebrated among Muslims all over the world in remembrance of Prophet Ibrahim's willingness to sacrifice his son Ismail (Ishmael) as an act of obedience to Allah's command. A yearly festival, in 2022 this will be celebrated from the 9 to 12 June 2022.

Instead of sacrificing his son, Prophet Ibrahim was offered a ram for sacrifice, and Muslims honor this act of faith through the ritual sacrifice of animals. Accordingly, annually during the celebration of Eid Al-Adha Muslims around the world will gather in celebration and prepare large feasts, slaughter domestic animals – usually goat, sheep, cow, buffalo, or camel – for consumption as well as distribution of uncooked meats to families, friends, charities and people in need.

Historically during this period there has been increased disease transmission and outbreaks associated with mass gatherings, increased travel and population movement, food preparation and distribution in communities, as well as zoonotic disease transmission resulting from animal slaughtering. In the context of the ongoing COVID-19 pandemic, it is strongly recommended that Governments, in particular Ministries

for health, agriculture, Islamic affairs, in collaboration with relevant stakeholders implement measures that reduce the risk of disease transmission and outbreaks associated with the following:

1. [Foodborne illnesses](#) associated with consumption of contaminated food
2. Viral hemorrhagic fevers, including [Rift Valley Fever](#) (RVF) and [Crimean-Congo haemorrhagic fever](#) (CCHF) associated with transmission from infected animals
3. [COVID-19](#) and other respiratory diseases associated with mass gatherings and travel

Objectives

This risk communication and community engagement (RCCE) guidance aims to support Governments, UN partners, private sector and civil society groups to proactively address risks associated with Eid Al-Adha by implementing various RCCE interventions. Recommended interventions are categorized according to key priority groups who have been identified as either higher risk of infection (e.g. butchers at higher risk due to occupation), or because they are instrumental in applying risk-reducing measures (e.g. women who are typically responsible for household food preparation). Recommended interventions aim to increase awareness and compliance with precautionary and preventative measures, as well as support the early detection, reporting and response to cases.

This guidance includes:

- Recommended interventions for priority groups, including simplified matrix per risk (*Table 1*)
- Sample key messages (*Table 2*) for use via social media, radio and other channels
- Available resources and materials

Strategic Approach

The following recommended interventions seek to increase public awareness and risk perception via risk communication messaging, as well as engage communities in various preventative interventions.

These interventions are developed as examples, and it is strongly recommended that they be considered and adapted to respond to your national contexts and disease epidemiology.

- **Risk communication messaging:** Due to commonalities in preventative behaviours for multiple disease specific risks, the risk communication messaging focuses on common preventative behaviours that will address multiple disease risks.
- **Community engagement:** It is strongly recommended that efforts are undertaken to collectively engage with key stakeholders, in particular relevant government ministries, faith leaders, private sector partners and NGOs to identify appropriate interventions and encourage a collective response. In particular:
 - municipal governments, animal syndicates and private operators who are involved in animal husbandry, livestock management, and oversighting the sale of animals;
 - mosques and imams to disseminate awareness and encourage safe practices associated with gatherings, food preparation and slaughter;
 - NGOs and CBOs who are supporting sacrificial sukk activities;

- Community health workers working in different settings to increase public awareness and compliance, as well as support the early detection and response to suspected cases.

Recommended RCCE interventions

The following section provides recommended RCCE interventions for different priority groups with one or multiple risks. A simplified matrix of recommended interventions by risk is provided in (Table 1).

Households, in particular women and girls involved in food preparations

- **Specific health risk:** Foodborne illnesses, COVID-19 and other respiratory diseases
- **Rationale:** Interventions targeting households aim to mitigate the risk of contaminated foods being served to families and distributed to vulnerable households, as well as COVID-19 risks associated with family and mass gatherings during Eid celebrations. Women and girls are typically responsible for food handling, storage and preparation in households, thus priority for ensuring food safety practices.
- **Focus:**
 - Increase awareness on food safety measures to reduce the risk of foodborne illnesses.
 - Increase awareness about the ongoing COVID-19 pandemic and reinforce the need to continue preventative measures, including self-isolating if symptomatic and vaccination.
 - Increase awareness of signs and symptoms of foodborne illnesses and COVID-19, and what actions to take if suspected among vulnerable groups, in particular, pregnant women, children and elderly individuals.
 - Partner with trusted community leaders, in particular mosques and imams, to support awareness raising and community adherence to preventative measures
- **Suggested interventions:**
 - Use community radio and social media for mass communications
 - Engagement with women's groups to raise awareness of food safety measures
 - Health promotion activities via community health workers
 - Direct engagement with CSOs involved in food collection and distribution to vulnerable households
 - Partner with faith and community leaders to conduct health education and information sharing on health risks (food safety and COVID-19) and support community adherence to preventative measures

Producers, livestock workers and the rural public, especially women and young

- **Specific health risk:** Viral haemorrhagic fevers
- **Rationale:** High risk of exposure to viral haemorrhagic fevers, in particular RVF and CCHF, during livestock management and home slaughter
- **Focus:**
 - Promotion of safe animal husbandry practices, including use of animal insecticides

- Use of personal protective measures for home slaughter
- Individual and household adoption of protective measures for vector borne diseases, including use of bed nets, repellants (tick and mosquito), wearing protective clothing and early and correct removal of ticks
- Increase public awareness of common signs and symptoms of RVF and CCHF, and what action to take if is suspected (early detection and reporting)
- Increase public awareness on the signs of RVF infection in animals and what action to take to take if animal case suspected (early detection and reporting)

→ **Suggested interventions:**

- Conduct community outreach in partnership with veterinary and local municipal authorities
- Use community radio and social media for mass communications
- Partner with CSOs, CBOs and NGOs, involved in rural livelihoods programmes
- Direct community engagement, including conducting health education sessions, with community leaders to increase community participation and awareness on preventative measures and early detection and reporting of suspected animal and human cases
- Community health workers conduct outreach with communities to encourage compliance with preventive measures at community level and early detection of human cases.

Value chain stakeholders (slaughterhouse workers, butchers, retailers, by-product workers, charitable organizations undertaking sacrificial sukuk etc.)

→ **Specific health risk:** Viral haemorrhagic fevers, foodborne illnesses

→ **Rationale:** High risk of occupational exposure to RVF and CCHF, as well as their role in ensuring the distribution of safe meat products to the broader community

→ **Focus:**

- Increase awareness and adherence to needed precautions for safe slaughter and food safety practices
- Advocate with value chain management for the distribution of necessary supplies to the workforce to ensure safe slaughter practices and address occupational risks
- Encourage municipal government and authority's role in enforcing safe slaughter practices, food safety and appropriate OHS practices
- Increase workforce awareness of signs and symptoms of RVF and CCHF, and what action to take if is suspected (early detection and reporting)
- Health education sessions with value chain stakeholders to support early detection and reporting of both human and animal suspect cases

→ **Suggested interventions:**

- Provide training materials (refresher or updated) on the risk of exposure during slaughter and the handling of fresh animal source foods
- Distribution of appropriate personal protective equipment (gloves, masks) to be worn during animal slaughter activities
- Engage with Value chain management to support the application of safe slaughter practices

- Partner with municipal governments to conduct quality assurance checks on value chain stakeholders to enforce safe slaughter practices, food safety and appropriate OHS practices for the early detection and quarantine of infected or sick animals
- Engage faith and community leaders as trusted leaders to provide key messages preventative measures and signs and symptoms to support early detection and reporting suspect cases

General population, with a focus on vulnerable communities (e.g. refugee/IDP, rural and remote areas, informal settlements)

→ **Specific health risk:** COVID-19 and other respiratory diseases, foodborne illnesses

→ **Rationale:** Higher risk of exposure and with reduced access to health services

→ **Focus:**

- Increase awareness on food safety measures to reduce the risk of foodborne illnesses
- Increase awareness about the ongoing COVID-19 pandemic and reinforce the need to continue preventative measures, including self-isolating if symptomatic and vaccination
- Increase public awareness of signs and symptoms of COVID-19 and foodborne illnesses through communication of common symptoms, and actions to take if is suspected

→ **Suggested interventions:**

- Use community radio and social media for mass communications
- Use community health workers and health ambassadors to support with health education and awareness raising during outreach activities
- Partner with CSOs, CBOs, NGOs, in particular those working with vulnerable groups or areas, to conduct community outreach on health risks
- Provide health education/training on food safety practices to CSOs, CBOs, NGOs involved in food preparation and distribution to vulnerable households
- Partner with faith and community leaders conduct health education and information sharing on health risks (food safety and COVID-19) and support community adherence to preventative measures

Table 1: Simplified matrix of recommended interventions by risk

Risk	Target Audience	Interventions	Products/Deliverables
Foodborne health hazards	<ul style="list-style-type: none"> • Households, with a focus on women and girls involved in food preparation • Men involved in home slaughter and ensuring food safety practices are upheld • CSOs involved in food and meat distribution 	<ul style="list-style-type: none"> • Community radio • Social media • Direct engagement with CSOs involved in food collection and distribution to vulnerable households • Community based workers and faith leaders 	<ul style="list-style-type: none"> • Radio script • Social media tiles • Community engagement sessions, in partnership with community leaders, CSO/CBOs, NGOs • Key messages with Imams and faith leaders

<p>Viral haemorrhagic fevers, including CCHF, RVF, associated with animal husbandry, slaughter and dealing with fresh animal source foods</p>	<ul style="list-style-type: none"> • Producers, livestock workers and the rural public, especially women and young • Industrial value chain stakeholders (slaughterhouse workers, butchers, retailers, by-product workers, etc.) • Households undertaking home slaughter and dealing with fresh animal source foods 	<ul style="list-style-type: none"> • Engagement with Ministry of Agriculture/Interior /for veterinary syndicates/animal breeders associations • Direct engagement and outreach in partnership with veterinary, NGOs and municipal authorities • Engagement with charitable organizations involved in sacrificial sukuk • Refresher training for workforce on safe slaughter practices • Partner with CSOs/CBOs, NGOs and community stakeholders to implement vector control initiatives e.g. distribution of repellents • Community radio • Social media 	<ul style="list-style-type: none"> • Posters • Social media tiles • Radio script • Refresher training package for value chain workforce • Health Education Seminars
<p>COVID-19 and other respiratory disease risks associated with mass gatherings and travel</p>	<ul style="list-style-type: none"> • General population with a focus on at-risk groups including unvaccinated, pregnant women, people with comorbidities and the elderly 	<ul style="list-style-type: none"> • Social media • Partner with faith and community leaders conduct health education and information sharing on health risks • MOH public awareness campaign 	<ul style="list-style-type: none"> • Social media tiles • Community outreach to mosques and Iman’s to encourage and advocate COVID-19 safe measures and health education • Radio and TV slots

Table 2: Key Messages

A comprehensive set of risk messages and social media tiles are available via the following [link](#). It’s strongly recommended you select and adapt the messages relevant to your national context and epidemiology.

Foodborne illnesses associated with consumption of contaminated food

1. 1 in 10 people get sick each year from contaminated food. Follow these simple steps for safe and healthy meals during Eid Al-Adha.

- Keep your cooking area clean
- Always wash your hands before cooking
- Separate raw and cooked foods
- Use a different knife and cutting board for meat and vegetables
- Cook food thoroughly, especially meat
- Refrigerate food at a cool temperature or eat immediately
- Use clean water, especially when washing fruits and vegetables

- 2. Foodborne illnesses are caused when a person eats food contaminated with bacteria, viruses, parasites, or chemical substances. Common symptoms:**
 - Stomach pain
 - Vomiting
 - Diarrhea
 - Fever
- 3. If you think you eaten contaminated foods and are experiencing symptoms for more than 3 days, contact your health facility.**

Viral haemorrhagic fevers (e.g. CCHF, RVF) associated with animal husbandry, slaughter

- 4. During Eid Al-Adha there is a higher risk that individuals may get sick from certain diseases spread from slaughtered animals. Reduce your risk by following proper animal management practices. Remember:**
 - Only buy animals from a trusted seller
 - Check the animal's health before buying
 - Do not buy or slaughter sick animals. Sick animals should be isolated from other animals and humans to avoid the illness spreading.
 - Only buy animals free from parasites, insects and vaccinated.
 - Keep the animals in clean spaces
- 5. When slaughtering animals for Eid Al-Adha, follow these simple measures to protect your family from diseases transmitted from animals and ensure the meat is safe.**
 - Select 1 person in your family to slaughter the animal
 - Ensure the person has no sores or cuts on their hands
 - Wash hands before slaughtering and preparing the meat
 - Wear clean protective clothing, including long sleeved shirts, pants, closed shoes
 - Use a clean knife
 - Lay down a tarp or plastic to protect the meat from the ground
 - When cutting up the animal, remove the dirtiest parts first (feet, tail, organs)
 - If clean water available, wash the carcass
 - Keep the fresh cut meat in a clean, cool area and away from flies and other pests.
- 6. If you have fever, muscle or joint pain, headache, sore eyes after being in contact or slaughtering an animal, contact your nearest health facility.**
- 7. If distributing meat during Eid Al-Adha, take extra precautions to avoid exposing others to illnesses. If donating meat, remember:**
 - Only slaughter healthy animals. Sick animals may carry diseases that can make humans sick.
 - Ensure the meat is safely slaughtered and clean.
 - Keep the meat in a clean, cool area before and during distributing. If not possible, cook the meat thoroughly and distribute immediately.
 - If available, give to a local charitable organization who provides sacrificial sukk. This will ensure no meat is wasted and safety standards are met.

COVID-19 and other respiratory diseases associated with mass gatherings and travel

8. Your activities during Eid Al-Adha may impact your health. Make smart and safe decisions related to your health this Eid.

- Wear a mask when in closed spaces
- Keep windows open
- Keep a safe distance
- Cough/sneeze in your elbow
- Keep your hands clear
- Don't forget to get vaccinated!

9. Eid Al-Adha is a time to care for others. COVID-19 continues to spread and is a risk for everyone, especially the elderly, the sick and pregnant women. Avoid gatherings or events if you're feeling unwell or have any of the following COVID-19 symptoms:

- Fever
- Cough
- Headache
- Sore throat
- Tiredness

Available resources and materials

1. Food safety factsheet: <https://www.who.int/news-room/fact-sheets/detail/food-safety>
 - Poster, flyer: <https://www.who.int/teams/nutrition-and-food-safety/multisectoral-actions-in-food-systems/five-keys-to-safer-food-poster>
 - Food safety short video: <https://www.who.int/activities/promoting-safe-food-handling#>
2. Rift Valley Fever (RVF) factsheet: <https://www.who.int/news-room/fact-sheets/detail/rift-valley-fever>
 - Community poster: <http://www.emro.who.int/health-topics/rift-valley-fever/resources.html>
3. Crimean-Congo haemorrhagic fever factsheet: <https://www.who.int/news-room/fact-sheets/detail/crimean-congo-haemorrhagic-fever>
 - Community Poster: https://applications.emro.who.int/docs/EMROPUB_2019_en_22326.pdf?ua=1
 - Health education training: https://cdn.who.int/media/docs/default-source/documents/health-topics/crimean-congo-haemorrhagic-fever/introduction-to-crimean-congo-haemorrhagic-fever.pdf?sfvrsn=14c8c199_2&download=true
4. COVID-19: advice for the public: [Advice for the public \(who.int\)](#)
5. Social media: Tiles and other content: [WHO EMRO | Protect yourself and others | COVID-19 | Health topics](#)

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