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By Benjamin Mateus
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Health and safety of medical workers jeopardized by world leaders' negligent response to the pandemic

On July 16, during a memorial dedication in Madrid, Spain, to those who lost their lives to COVID-19 as well as the health workers who helped fight the pandemic, a nurse named Aroa Lopez made a remarkable and impassioned speech that provided the necessary humanity that has been lacking in the response by national authorities.

She said, “We have given it our all. We have worked to the brink of exhaustion. And once again we have understood, maybe better than ever, why we chose this profession: to care for people and to save lives. We have been the messengers of the last goodbye to older people who died alone, hearing their children’s voices on the telephone. We have made video calls, we have held their hands, and we had had to fight back the tears when someone said, ‘Don’t let me die alone.’ I want to ask the authorities to defend everyone’s health care. To remember that there is no better tribute to those who are no longer with us than to protect our health and ensure the dignity of our professions.”

The pandemic is spiraling out of control as public health officials beseech their leaders to act decisively and in concert. The seven-day global average for daily cases of COVID-19 stands at 226,864, and new daily cases have consistently pegged above 200,000. The seven-day daily fatality rate has climbed from the low of 4,112 on May 26 to 5,111 on July 20. The number of cumulative cases has exceeded 14.8 million, adding another million cases every four to five days. The United States, Brazil, and India combined have lately accounted for more than 50 percent of all cases worldwide. Health care workers,

who have been at the forefront of this global health crisis, have also faced the brunt of this assault.

Dr. Tedros Adhanom Ghebreyesus, director-general of the World Health Organization (WHO), speaking at the Friday press briefing, noted, “Many health workers are also suffering physical and psychological exhaustion after months of working in extremely stressful environments.” By way of an example, Portuguese health workers were surveyed in April 2020 during the height of the pandemic. Seventy-five percent considered their anxiety level “high” or “very high,” and 14.6 percent were facing moderate to severe depression. Many health care workers are demanding fair pay and compensation for the hazards they face.



July 16 memorial in Madrid to victims of COVID-19. (Credit: Sergio Perez)

The United Nations has announced that over 1.4 million or about 10 percent of all COVID-19 cases globally are among health care workers. A brief list is provided below:

In the US, according to the Centers for Disease Control and Prevention (CDC), as of July 5, 92,572 health care personnel have contracted COVID-19 and 507 have died.

* The government of Mexico reported 36,327 COVID-19 cases on May 13; 8,544 among health care workers with 111 deaths, representing 3.1 percent of all fatalities.

* Brazil’s health ministry reported that in June, 83,118 health workers were confirmed with COVID-19. As of July 5, there were 238 COVID-19 deaths among nurses; as of May 21, more than 100 physicians had died.

* The United Kingdom reported that by June 26 there were 268 deaths among medical personnel.

* Spain noted that by May 29, health care workers made up 24.1 percent of all confirmed COVID-19 cases.

* Ukraine's health minister, on June 9, noted that around 18 percent of all confirmed cases were among health care workers.

* Roszdravnadzor, Russia's health care watchdog, announced unofficially that 489 doctors had died.

Amnesty International, which has been monitoring these developments among health care workers, noted that the following countries had the highest numbers of deaths among health workers: US (507), Russia (545), Brazil (351), Mexico (248), Italy (188), Egypt (111), Iran (91), Ecuador (82) and Spain (63).

Data from the UK has shown that there are elevated rates of death among those in health care professions when compared to the general population. Other occupations with high fatality rates due to COVID-19 include taxi drivers, chauffeurs, bus and coach drivers, factory workers and security guards.

According to Amnesty's report published on July 13, over 3,000 health workers have died across 79 countries due to COVID-19, a number they cite being a vast underestimation. Meanwhile, many had faced reprisals from authorities and their employers when they raised concerns about their safety or that of their patients in such places as China, Hong Kong, India, Egypt, Malaysia, South Africa, Russia, Brazil, Nicaragua, Honduras, Mexico and the United States. Some have been arrested and subjected to violence.

Courageously, however, health care workers internationally have spoken out, protested and gone on strike to demand better working conditions, personal protective equipment (PPE), which remains chronically short globally, and supplies and adequate staffing to care for their patients despite the hazards they have faced from their employers, state authorities and backward layers of their communities.

The International Committee of the Red Cross and 12 other medical and global humanitarian organizations representing 30 million health care professionals issued a report in May decrying the violence against medical workers. They wrote, "[M]any responders are experiencing harassment, stigmatization and physical violence. Some health care professionals and the people they were caring for have been killed. At least

208 reports of such incidents have emerged since the beginning of the pandemic, and each day brings new stories of intimidation and harm.” The present surge and alarming levels of inaction by the governments will only further exacerbate such assaults on those working in the health field as well as create conditions that will devastate communities throughout the globe.

In a report delivered to the United Nations on July 13, Mark Lowcock, under-secretary-general for humanitarian affairs and emergency relief coordinator, explained that inaction on the part of industrialized nations to respond to the growing humanitarian crisis caused by the pandemic would lead to series of tragedies that would be more brutal and destructive than the impact of the virus itself. By the end of the year, conditions in fragile and emerging countries would grow more dire as they face starvation and disease. “Decades of development will be undone as the virus runs free,” he said.

“[F]or just \$90 billion,” he said in his report, “less than one percent of the stimulus package to protect the global economy, the UN assessed we could protect the world’s poorest 700 million people from the worst outcomes.” One percent of the trillions siphoned from public monies to enrich a handful of parasites could stave off famine and disease for 10 percent of the planet’s population. The national media, the mouthpiece of the oligarchs, prefer to dabble in Russian and Chinese intrigue or spin another racist narrative rather than address these most pressing of concerns.

At the WHO press briefing, Lowcock said he hoped that the G20 finance ministers would address these issues because inaction had the potential to produce a global calamity. He pointed out that their plan costing \$10.3 billion would assist 63 vulnerable countries and cover the global transport costs to deliver relief. He said, “The pandemic risks the first rise in global poverty since 1990—at least 70 to 100 million may be pushed into the extreme poverty category. One hundred thirty million could be pushed to the brink of starvation by the end of this year, bringing the total to 265 million people—a doubling of people facing starvation.”

He made additional points on the cost of containment measures on education that could generate learning losses that have a present value of \$10 trillion globally, not to mention the earnings on individuals and community disruptions that will impact young women most harshly through issues such as teenage pregnancy. The pandemic has also created conditions that will lead to a rise in instability and local, regional and national conflicts, which will further exacerbate the refugee crisis and food insecurity.

The pandemic, a historic trigger event, has not only exposed and exacerbated the crisis of the capitalism system organized under the obsolete nation-state system. It demonstrates that it is entirely indifferent to the suffering of billions of people facing the need for urgent aid and relief. The utter disregard for the conditions faced by health care workers highlights the deep chasm that separates the concerns of the financial oligarchs from those of every person on the planet regardless of their nationality.

UN Secretary-General Antonio Guterres observed, “[T]he pandemic has revealed, like an x-ray, fractures in the fragile skeleton of the societies we have built. It is exposing fallacies and falsehoods everywhere: the lie that free markets can deliver healthcare for all...the myth that we are all in the same boat. Because while we are all floating on the same sea, it’s clear that some are in superyachts while others are clinging to the floating debris.”

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