

COVID-19, social determinants and frontline workers

Against a background of a world in the grip of COVID-19, the global health community is celebrating the work of nurses and midwives on [World Health Day](#) and remembering the critical role they play. All healthcare workers, from the global North to global South, are at the sharp end of healthcare delivery, day in and day out, often undervalued, under-resourced and underpaid - if they are paid at all.

At [Health Action International \(HAI\)](#) we are fully aware that a health system, and all that that includes, is worth nothing if the final delivery of interventions is not there - and that will depend on a health care worker. The best medicines supply chain in the world will ultimately depend not only on the last mile, but on that last meter of delivery (to mix my metric measurements), and that last meter is in the hands of a healthcare professional.

In the UK, where I am writing this while [working from home](#), we have arguably one of the best health systems in the world, which is free at the point of delivery. Even so, we hear daily that healthcare workers on the front line combating COVID-19 do not have the equipment to protect themselves against infection. Elsewhere in Europe the situation is rapidly deteriorating. In Spain, at the time of writing, nearly 14 percent of confirmed coronavirus cases are medical professionals. In Italy, France and Spain, more than 30 health care professionals have died as a result of coronavirus infection, and thousands of others have had to self-isolate.

And all this is happening in countries where we have the privilege of being able to contain the spread of COVID-19 through isolation. The same will not be true in Africa where our colleagues and partners are sceptical about measures that will curb the spread of disease, and the local context will mean social distancing is simply not possible. Indeed, when people are living on an income paid daily to feed families, going out to work is unavoidable and the major public health measures - social distancing and hygiene - become extremely difficult, if not impossible to implement. It will only be the rich who can afford to self-isolate, as COVID-19 has the potential to rip through the majority of populations. And at the end of the day, it is healthcare workers, and especially nurses and midwives, that will be exposed to infection, without appropriate protective equipment.

If and when we have a treatment for COVID-19, or a vaccine to prevent infection and spread, the recurring pattern of inequality must not be allowed to continue. It must be affordable for all and must be available where there is greatest need - where the burden of disease will have the greatest social and economic impact, and where public health measures will not work. That means starting in low- and middle-income countries, not in the North where, by the time treatments are available, the curve of infection will have flattened according to most estimates.

And to return to the focus of this World Health Day - health workers - let's make sure they have the tangible economic, social and psychological resources they need, and not platitudes of encouragement. It is nurses and midwives who save lives on a daily basis, often at personal risk, and will now be called up to the front-line in the detection, treatment and prevention of COVID-19, for everyone, everywhere.