Health situation of black and poor women facing COVID-19: Victims of Inequalities

Pascal David*

Division of Pediatric Neurology, School of Medicine, Indiana University, Indianapolis

A woman dies every seven hours in Brazil victim of feminicide. Maternal mortality of black women due to COVID-19, the new coronavirus, is almost twice as high as that of white women. Studies were identified using large-circulation international journals found in two electronic databases: Scopus and Embase. This idea of the black and poor woman as disposable or unnecessary has an enormous race influency. In this context, the burden that the pandemic can cause to the country's health system may further expose the structural racism that goes through health care. Maternal mortality of black women due to COVID-19, the new coronavirus, is almost twice as high as that of white women. Thus, the concentration of efforts to approach COVID-19 in medical-centred care measures

decontextualized, not only in relation to people's way of living and getting sick, but also, with other knowledge, also corroborate the

Keywords: Communicable disease; Mouth; Nose; Eyes

high incidence and lethality rates of COVID-19.

Address for correspondence:

Pascal David

Division of Pediatric Neurology, School of Medicine, Indiana University, Indianapolis; E-mail: Dpascal22@hotmail.com

Word count: 615 Tables: 00 Figures: 00 References: 05

Date of Submission: 25 June, 2021, Manuscript No. ipaom-22-12982; Editor Assigned: 28 June, 2022, PreQC No. P-12982; Reviewed: 17 July, 2022, QC No. Q-12982; Revised: 22 July, 2022, Manuscript No. R-12982; Published: 30 July, 2022

INTRODUCTION

The Covid-19 is pedagogical pandemic. However, the pedagogy is appalling: according to the World Health Organization, every month hundreds of thousands of women seek for health services to take care of incomplete abortions. In Argentina, it is estimated that there are 3.330 women in this situation; 1.522 in Chile; 7.778 in Colombia and 18.285 in Mexico. For each woman who is admitted at a hospital for an incomplete abortion, the same individual may use the services twice: first, for abortion care and second, for the risk of COVID-19 infection There is a global presumption that exist a house in which peoplewho have bodies, who have genders, class and race- can be in social distancing .

ABOUT THE STUDY

Agreeing with Deborah Diniz we all need to be looked after. This role, in the overwhelming majority of cases, is played by women, and this task distribution is uneven. Diniz hopes a post pandemic COVID-19 world in which feminist values could be part of our common vocabulary. When speaking about women, we regard those who walk for hours to get attention in reproductive health clinics to access contraceptive methods, because they do not want to become pregnant in the middle of a crisis; we are speaking about women helping other women to seek protection, away from their aggressor partners, at the same time that violence grows in times of social isolation. More than half of the Brazilian population is made up of women. Black indigenous, white, in rural areas or in cities. Even with the government disregard, reality jumps into the eyes and shows faces and skin tones For Débora Diniz poor women, who are mostly black, have no way to escape the contagion. Besides that, they will face unemployment, if not death, and an immersion in the risk of a very large contamination.

Classification

Cerebral palsy is classified based on how it affects people's movement, the body portion affected, and the severity of the effects. Ataxic cerebral palsy: Clumsiness, imprecision, and instability are all characteristics of ataxic movements. The movements are not smooth and may appear choppy or dis organized. When a person with ataxia tries to make voluntary motions like walking or picking up objects, they experience incoordination. Ataxia is characterized by a loss of muscle control in the arms and legs, which leads to a loss of balance and coordination.

Ataxia patients may have the following symptoms:

Tremor or unsteady, wobbly movements: Maintaining equilibrium is difficult. Because their sense of balance and depth perception are compromised, people with ataxia appear unsteady and shaky. Dyskinetic cerebral palsy: People with dyskinetic cerebral palsy exhibit involuntary movement that is varied (outside of their control). When a person tries to walk, these involuntary motions become more obvious.

Dyskinetic motions can include the following:

Dystonia is a condition that causes twisting and repetitive movements. Athetosis is a term for slow, 'stormy' movements. Chorea is a dance-like movement that is irregular and unpredictable. Spastic cerebral palsy: The most prevalent type of cerebral palsy is plastic cerebral palsy. People with spastic cerebral palsy have tight muscles, and their motions may appear stiff and jerky. Hypertonia, or increased muscular tone, is a type of spasticity. As a result, muscles become rigid, making movement difficult, if not impossible [1-5].

CONCLUSION

The restrictions imposed by the pandemic have increased the barriers to access clandestine abortion by poor women. The spaces of death- clandestine abortion onesmade some bodies bleed, while other individuals protect

themselves from the pandemic far from the threat of the virus or criminal law. Numbers are outrageous and they also distance people from the reality, since in statistics the stories of these women are covert. Every maternal death is preventable, if access to the health service were appropriate. But maternal deaths never present itself alone in a public health emergency. The Brazilian rate is four dead women for every 100 thousand women, 74% higher than the world average. In addition, a woman dies every seven hours in Brazil victim of feminicide. They are women who, if they challenge the rules of domestic reclusion and submit to the servitude of work, they may fall ill as caregivers of those who ignore their rights, their life or their name.

CONFLICTS OF INTEREST

The author declares no competing interests.

Author declares that the material has not been published elsewhere, or has not been submitted to another publisher.

DATA AVAILABILITY

Author declares that all related data are available concerning researchers by the corresponding author's email.

ACKNOWLEDGMENTS

The views presented in this paper are of the authors and not of the organizations they represent.

REFERENCES

- Lameire N, Van Biesen W, Vanholder R. Acute renal failure. Lancet. 2005;365:417-430.
- Spital A, Valvo JR, Segal AJ. Nondilated obstructive uropathy. Urol. 1988;3:478-482.
- Onuigbo MAC. Symptomatic uremia from bilateral obstructive uropathy secondary to metastatic urinary bladder cancer showing
- only unilateral hydronephrosis: A case report. *NDT Plus*. 2009;2:387-389.
- Naidich JB, Rackson ME, Mossey RT, et al. Nondilated obstructive uropathy: Percutaneous nephrostomy performed to reverse renal failure. Radiol. 1986;160:653-657.
- Lyons K, Matthews P, Evans C. Obstructive uropathy without dilatation: A potential diagnostic pitfall. Br Med J. 1988;296:1517-1518.