

2021: The Year of Health Care Workers

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World Health Organization (WHO) has announced that 2021 has been designated as the International Year of Health and Care Workers (HCW) in “appreciation and gratitude for their unwavering dedication in the fight against the COVID-19 pandemic”. The theme of this one-year-long campaign is “Protect. Invest. Together.” which highlights the urgent needs such as equity and economic opportunity (1).

There are five main objectives:

- Vaccination of HCW in the first 100 days of 2021.
- Commemorating HCW who have lost their lives.
- Accelerating the achievement of protective equipment and other items along with COVID-19 recovery tools by mobilizing the sources from member states, philanthropic partners and international financing institutions.
- Protecting the HCW’s rights and offering them a safe occupational environment by engaging member states and stakeholders.
- Building up solidarity for supporting HCW’s well being and rights by bringing communities, influencers, political and social support altogether.

It was also stated that all HCW should be supported all the time, not only during the COVID-19 pandemic.

Governments have acted to increase healthcare capacity to deal with the high COVID-19 case numbers from early 2020. It was clear that protecting HCW was crucial in response to the COVID-19 pandemic. WHO published recommendations on the rational use of personal protective equipment (PPE) in hospitals and community settings in March 2020 (2). However, protecting HCW has remained a challenge for most countries where shortages of adequate personal protective equipment (PPE) was a great concern, and nowadays, vaccination of HCW became a new challenge because of the vaccine shortage.

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Although there is an important need to address the incidence of COVID-19-related illness in HCW, unfortunately, the number of COVID-19 infections and deaths among HCW in the world is not precise. WHO declared that nearly 14% of COVID-19 cases reported were among HCW, although they represent 3% of the population in the vast majority of countries and less than 2% in nearly all low and middle-income countries (3). This notice is important, but we are still not aware of HCWs' actual situation. There are some numbers in scientific articles, but exact numbers of infections and deaths among HCW are not available. In an article published in October 2020, 152 888 infections and 1413 deaths were reported (4). The overall infection and death trends among HCW followed that of the general population. Infections occurred mainly in women, but deaths were mainly in men. Infections were seen more in nurses, deaths more in doctors. Europe had the highest number of infections and deaths but the lowest case fatality rate. The Eastern Mediterranean region had the highest case fatality rate; regions such as the Indian subcontinent and Africa reported a relatively low number of infections and deaths by population (4). On the first days of September 2020, the Director of The Pan American Health Organization (PAHO) reported that the PAHO region has the highest number, with 570 000 infected HCW, and more than 2500 succumbed to death (5).

The situation of HCW regarding COVID-19 in Turkey has not been reported formally. The numbers regarding HCW were given only four times during the past year by the Minister of Health during press briefings. The dates and the numbers are as follows, but any demographic data, such as profession and age, are not included by the minister. On April 1, 2020, the Minister of Health announced 601 HCW had COVID-19. The number increased to 7428 on April 29, 2020. On September 2, 2020, it was announced that 29 865 HCW were infected and 52 died; on December 9, 2020, the number increased to 120 000 cases and 216 death. Since then, any number of HCW with COVID-19 was not shared by the government. Turkish Medical Association has established a website (named "Black Ribbon" in English) to record and broadcast the HCW died because of COVID-19. As of March 29, 2021, 391 HCW died because of COVID-19 in Turkey (6).

Amnesty International announced at the beginning of March 2021 that at least 17 000 HCW died worldwide because of COVID-19 in the first year of the pandemic. This number implicates that one HCW dies every half an hour (7). Infected HCW are likely underreported, and the actual situation is probably worse.

HCW also suffer from COVID-19 other than contracting the disease. The mental health of HCW is significantly affected both because they stand in the frontline, are overwhelmed and under the pressure of very high workload, and living in constant fear of disease exposure, which, in turn, causes separation from family and facing social stigmatization. A systematic review of 13 published studies in the early period of the pandemic, including data of 33 062 HCW, showed that anxiety was present in 23.2% of HCW, depression in 22.8% and insomnia in 38.9% (8). These percentages are increasing as the pandemic continues at full speed. A considerable proportion of HCW experience mood and sleep disturbances that might result in compromised mental health.

The alarming rise of verbal harassment, discrimination and physical violence to HCW in the pandemic era is also a great concern, as mentioned by WHO. Governments, international conventions,

healthcare leaders, stakeholders should address these persistent threats. The Universal Declaration of Human Rights, by its Article 23, affirms that the right to work includes “just and favourable conditions of work” as a fundamental human right. Safe, secure and supportive working environments is essential for all workers (9). Another critical issue emphasized by WHO is that globally women make up approximately 70% of the health workforce which

promotes elimination of discriminatory work practices and the empowerment of women (10).

On World Patient Safety Day, which is marked every year on September 17 by WHO, the slogan was determined as “Safe HCW Safe Patients” (3). This slogan clearly shows that the health, safety and well-being of health care workers is a prerequisite for an effective response to the COVID-19 pandemic.

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