

Syndemic: A Synergistic Anthropological Approach to the COVID-19 Pandemic

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This review describes the relationship between the coronavirus-related pandemic and health inequities. The latter are linked to pre-existing social and economic discriminations in terms of access to healthcare for people affected by chronic diseases. We believe that we are living in a “syndemic pandemic”. The term “syndemic” was originally developed by the medical anthropologist Merrill Singer in the 1990s in order to recognize the correlation between HIV/AIDS, illicit drug use, and violence in the United States. This complex interplay exacerbated the burden of the disease and the prognosis of the patient. Similarly, in COVID-19 infection, socio-economic, ethnic, and racial inequities result in higher morbidity and mortality in certain sections of society. Unfortunately, such differences are becoming too common during the COVID-19 pandemic, in terms of the incidence and prevalence of the disease, as well as unequal access to new medical advances and life-saving therapeutics for those with COVID-19, such as vaccines and monoclonal antibody treatment. Lockdown measures, imposed internationally as a response to the COVID-19 pandemic, are causing economic inequities, which complicate the issue even further. An appropriate syndemic anthropological approach is necessary to ensure that this pandemic does not increase health inequities in access to appropriate treatments.

COVID-19

syndemic

pandemic

health

inequality

A pneumonic illness of unknown origin was first identified in Wuhan, Hubei province, China, in December 2019. The World Health Organization (WHO) recognized the disease as being caused by severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2). The acronym COVID-19 (coronavirus disease-2019) was then coined to term the illness. Since its first appearance, it has spread all over the world, thus representing a true global public health challenge. The WHO declared that the disease was a “*public health emergency of international concern*” on 20 January 2020. Following that, it was declared as a “*pandemic*” on 11 March 2020. As of 22 January 2022, the pandemic has caused more than 346 million cases and 5.58 million deaths, undoubtedly making it one of the worst infections in human history [1]. However, the epidemiological study of the pandemic is still ongoing, and, thus, it is affected by the need to steadily update data, which are often incomplete, owing to the emergency-induced chaos [2].

Of note, the COVID-19 pandemic has been found to have a strong link with socio-economic phenomena.

References

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