

Women's health services still suffering from COVID

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Women's health services are far from fully being restored following disruptions caused by the COVID-19 pandemic, the World Health Organization (WHO) says.

According to the WHO, many African countries are reporting continued disruptions to sexual, reproductive, maternal, newborn, child and

adolescent [health services](#).

The WHO global pulse [survey](#) on continuity of essential [health](#) services during the COVID-19 pandemic carried out between November and December 2021 shows that the majority of the 36 African countries that provided full data reported up to 25 percent disruption of services.

"The gravity and extent of these consequences cannot be overemphasized," Matshidiso Moeti, WHO regional director for Africa, told a press conference last week. "Interruptions to health services are exacerbating women's often already limited access to [health care](#), especially in the African region."

COVID-19 is also inflicting extensive economic damage, pushing women and girls into extreme poverty, the global health body says.

According to Moeti, [gender equity](#) plays a vital role in [health outcomes](#) and must be woven into the design and delivery of public health interventions.

"Investing in women's economic participation, livelihoods and health is an investment in the health of future generations of Africans," he said. "African countries cannot afford any further reversals of the fragile gains made in pursuit of equitable care for women and girls."

Eleanor Nwadinobi, president of the Medical Women's International Association, said violence against women and girls was already a serious problem before COVID-19, and the pandemic has made it worse.

"During the lockdown, we had victims locked in with their abusers," she said. "There was reduced access by human rights defenders to address issues of harmful practices against widows, early marriages and female genital mutilation that increased with school closures."

"No longer should we say that we are not prepared for increased violence against women and girls when we know that it already exists and it is 100 percent preventable," Nwadinobi warned.

Nwadinobi said that task forces should be set up to ensure that any pandemic response is inclusive of men, women and people living with disabilities.

"We have lived through four waves, the fourth wave was so dramatic in its scale and not so lethal in terms of the mortality, it is coming down now and, what's most important is for us to anticipate what's going to happen next," she said.

Moeti added: "We need to be now preparing, based on the experience of the four waves, for what we have seen in the past, including ramping up significant vaccinations, so we don't get severe illness and death."

According to Moeti, a survey of 11 African countries saw a 16 percent increase in [maternal deaths](#) as a result of the COVID-19 pandemic between February and May 2020.

Norah Obudho, East Africa program director at WomenLift Health, a project that encourages women to contribute in global health outcomes said that although many men have lost their jobs, women have experienced a triple-negative effect from COVID-19.

"Women and girls faced and continue to face decreased to no access to reproductive, maternal, neonatal, child and adolescent health services due to the restrictions that came with the COVID-19 containment measures," she told SciDev.Net.

Obudho believes that [health systems](#) need to be strengthened to ensure that services can adapt to any shock, including epidemics and disasters.

And he says more women must be given leadership positions in public health to effect change.

"Only when there is parity in leadership can the health system be responsive to the needs of [women](#) and their households," Obudho said.

Provided by SciDev.Net

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