



Revealing the Influence of Social Inequity on the COVID-19 Pandemic: Examining the Multidimensional Crisis

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Dear Editor,

COVID-19 can spread through human-to-human contact, and its progression occurs more frequently in people with chronic diseases such as diabetes, hypertension, and metabolic, cardiovascular, and respiratory disorders. To date, this devastating pandemic has resulted in millions of cases and fatalities (1).

Social inequalities result in unequal opportunities and resources within a society, leading to disparities in health outcomes, including vulnerability to the COVID-19 pandemic. Limited access to clean water and overcrowded living conditions increase the risk of respiratory infections. Informal workers experience financial hardships due to business closures. Socioeconomic factors like household income and education level impact vulnerability, and groups like women, minorities, and immigrants are disproportionately affected by the pandemic (2).

As a result, individuals with low socioeconomic status are disproportionately affected by the COVID-19 pandemic due to a range of factors that increase their exposure to the virus. First, those who are financially disadvantaged, such as warehouse and supermarket workers and those employed in public transportation, are often employed in roles that require them to be physically present at their workplace. Tragically, these individuals account for the highest number of fatalities.

Second, the economically disadvantaged are more likely to live in overcrowded households, which heightens the risk of respiratory infections. Poor housing conditions, limited access to personal outdoor space, and overpopulation make it difficult for these individuals to adhere to social distancing guidelines, further compounding their susceptibility to COVID-19 (3).

Third, individuals with low socioeconomic status frequently work in precarious employment conditions and for inadequate incomes. These conditions have been exacerbated by the COVID-19 pandemic and its associated ramifications. The resultant financial instability has a detrimental impact on their psychological well-being. Such psychological distress is likely to compromise their immune system, rendering them more susceptible to illnesses such as COVID-19 and increasing the likelihood of engaging in health-risk behaviors (4).

Fourth, an individual's ability to receive treatment while prioritizing their interests and health is crucial to accessing healthcare services.

Fifth, patients with poor socioeconomic status often delay seeking medical attention until their health condition has worsened, resulting in unfavorable health outcomes. This delay in seeking healthcare can be attributed to patients' attitudes toward healthcare providers, language barriers, as well as the behavior, attitudes, and practices of healthcare professionals toward minority groups. These factors significantly impede the treatment of COVID-19 for individuals with poor socioeconomic status (5). Finally, due to the aforementioned factors, individuals with a poor socioeconomic status are at a higher risk of death related to the COVID-19 pandemic, particularly when combined with other chronic diseases (6).

To address the healthcare and economic inequities of the pandemic, governments, and international organizations should implement supportive measures for healthcare systems and offer financial assistance to individuals with lower incomes. While these efforts are crucial for addressing immediate challenges, they fail to address the mentioned issues fully. Factors such as access to technology, working



conditions, social support, housing, and overall healthcare facilities significantly influence individuals' ability to cope with the crisis. A more equitable distribution of wealth and resources can help reduce the pandemic's consequences on health and the economy. This underscores the importance of addressing inequalities and creating a more just society to enhance preparedness for future health crises (7).

Conclusion

In summary, the COVID-19 pandemic affects individuals with chronic diseases such as diabetes, hypertension, and respiratory disorders more seriously. Social inequalities play a role in increasing vulnerability to the virus due to the unequal distribution of resources. Factors such as limited access to water and overcrowded living conditions increase exposure to the virus, especially for those of low socioeconomic status. Financial instability, precarious employment, and delayed healthcare-seeking behaviors also contribute to susceptibility to the virus. Individuals with poor socioeconomic status are at a higher risk of severe outcomes and death from COVID-19. To address these disparities, governments and organizations must provide support to enhance healthcare systems, offer financial aid, and address underlying issues such as social support and working conditions. A more equitable distribution of wealth and resources is crucial for mitigating the negative impacts of the pandemic and improving preparedness for future health crises.

Authors' Contribution

Investigation: Nader Aghakhani.

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Resources: Samira Firoozian.

Supervision: Nader Aghakhani.

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Competing Interests

The authors declare that they do not have any conflict of interest.

Ethical Approval

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