



Ethics and Gender Specificities in Diseases Transmitted by Mosquitoes

Tamayo MJC^{1*} and Pardo EE²

¹Department of Philosophy and History at Blas Roca Calderio Campus, University of Granma, Cuba

²Professor of the Foreign Languages Department at Blas Roca Calderio Campus, University of Granma, Cuba

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***Corresponding author:** Manuel de Jesus Verdecia Tamayo, Department of Philosophy and History Blas Roca Calderio Campus, University of Granma, Cuba, Tel: +53-51649757; Email: mv.tamayo7023@gmail.com

Abstract

Emerging diseases, caused by mosquitoes, affect people asymmetrically, therefore it is pertinent to study this problem with a gender approach, as it is important not only to carry out an epidemiological follow-up of these diseases, but it is also essential to analyze the economic, psychological, cultural and social factors associated with gender in the affectation that they cause or that make women and girls more vulnerable before them. For this reason, gender emerges as an explanatory element of the roles that men and women play in the different spheres: domestic, community, and social, which shape the risks of exposure to these vectors and open prospects for success in prevention, control, and management of these diseases. In this sense, ethics becomes an essential analytical and practical tool to determine that the real inequality between genders and the mechanisms of social discrimination that feed it place women in conditions of vulnerability regarding these diseases; which above all it is a question of justice and equity; therefore ethical.

Keywords: Ethics; Gender; Mosquito-Borne Diseases; Justice; Equity; People's Health

Introduction

Societies today, in one way or another, face emerging diseases caused by vectors. These diseases represent about 17% of the estimated global burden of communicable diseases and disproportionately affect the poorest populations (WHO) [1]. They also cause everything from biological effects at the individual level to profound social, economic and political repercussions. Consequently, the promotion of biological, epidemiological, pharmaceutical, social research and the rest of the fields of knowledge is required.

This problem makes visible, in the foreground, the issue of safeguarding one of the most precious universal

public goods: the health and well-being of people. Among the best-known disease vectors are mosquitoes, both of the *Anopheles* genus, transmitters of malaria; sandflies of the genera *Lutzomyia* and *Phlebotomus*, transmitters of leishmaniasis; bedbugs or 'whistles' of the genera *Rhodnius* and *Triatoma*, transmitters of Chagas disease, and the *Aedes aegypti* mosquito, transmitter of dengue, chikungunya and Zika [2]; among others.

Since 2014 there have been large outbreaks of dengue, malaria, chikungunya fever, yellow fever, and Zika virus disease. Before the COVID-19 pandemic, dengue was the fastest spreading viral disease in the world and its incidence increased some 30 times in the last 50 years [2]; nearly

half the world's population is at risk of contracting it and between 100 and 400 million infections occur each year [3]. Given the sustained growth in the number of cases with these diseases, the International Community is trying to achieve better coordination with the Global Response for vector control 2017-2030, adopted by the Seventieth World Health Assembly in May 2017.

It is important to highlight that social, demographic and environmental factors are determinants for the spread of vector-borne pathogens [1]. Therefore, the starting conditions of the different societies, as well as the levels of social equity or inequalities, the differentiated attention to specific social groups such as girls and boys, youth, the elderly or women, the characteristics and scope of health systems, surveillance and vector control constitute social strengths or weaknesses in the face of these diseases.

In this sense, it is necessary to point out that emerging diseases, caused by mosquitoes, affect people asymmetrically, therefore the study of this problem with a gender approach, from the social sciences, becomes relevant, as it is important not only to make an epidemiological monitoring of these diseases, but it is also essential to analyze the associated economic, cultural and social factors that cause or make women and girls more vulnerable to them. Gender emerges as an explanatory element of the roles that men, boys, girls, and women play in different spheres: domestic, community, and social, which shape the risks of exposure to vectors and open up prospects for success in prevention strategies control and care of these diseases [4].

The article seeks to reveal the connections that are established between ethics and the gender approach, an essential issue to take into account during the emergency of mosquito-borne diseases. The strategies for control, prevention and management of diseases transmitted by mosquitoes have as a touchstone the ethical framework that supports decision-making regarding this approach and its implementation in social practice. Societies can have robust coping strategies with regional, national and local scope; however, they can become ineffective if risk groups are not taken into account. In accordance with the purposes of the text, it begins by showing an approach to the conceptual problems of the matter addressed. Then, the main manifestations, connections and features that typify the relationship between ethics and gender within the framework of mosquito-borne diseases are exposed. These results shown are part of the international Vecto Caribe project.

Starting Approximations.

One of the basic principles established in the Constitution of the World Health Organization (WHO) for happiness,

harmonious relations and the security of all peoples is "The enjoyment of the maximum degree of health that can be achieved is one of the fundamental rights of every human being without distinction of race, religion, political ideology or economic or social condition [5]. However, the transmission of diseases through mosquitoes impacts men and women asymmetrically; hence the relevance of incorporating the gender perspective as a way to achieve sustainable control of arboviruses [6].

It is necessary to problematize around what could be considered as gender. This concept shows a notion that alludes to a "...pluriverse perspective of analysis, activism and transformation", a "...unruly set of sentimental practices and activists for the construction of another world" [7]. From the perspective followed in the article, it is necessary to discuss, from a concrete and critical position, the constructions in the relationship/tension between ethics and gender in the context of mosquito-borne diseases; consequently, it is essential to march against the prevailing heteropatriarchal, exclusive and asymmetrical logics.

The diversity of concepts, visions and perspectives of what "gender" is contribute to this category a high difficulty in its treatment. Among the most widespread authors in Latin America is Marta Lamas, who considers the genre as: set of beliefs, prescriptions and attributions that are socially constructed based on sexual difference. This social construction works as a kind of cultural "filter" with which the world is interpreted, and also as a kind of armor with which people's decisions and opportunities are constrained depending on whether they have the body of a woman or a man. . All societies classify what is proper for women and proper for men, and from these cultural ideas the social obligations of each sex are established, with a series of symbolic prohibitions [8].

The vision of gender must be oriented towards reconsidering the social function of women and girls, as bearers and subjects of rights on an equal footing with men. It also implies the epistemological questioning of the critical practice itself where power relations are installed and reproduced in plural scenarios: family, community, work, student, and public.

From this point of view, the notion of gender implies challenging the presence of a limit, of a norm; and, therefore, of a prohibition, made where the law of what men must do or have and what the woman is good for" is once again revealed; gender law. Criticism confronts, however, the idea of some women and girls who do not emerge as subjects of the change in the gender approach, but instead reproduce culturally widespread patterns through a series of acts, tensions, and fears in the face of the paradigm shift in the

face of a consolidated exclusive tradition.

In this context, the search for a definition is imposed, which contains the testimonial arguments of women against practices and mentalities of those who consider the subordination of women as part of the natural order of things. The experiences lived indicate that such mentalities and practices are the creative fruit of complex taxonomies that build the system of production, development and reproduction of gender precariousness. If the rights, duties, and obligations of men and women are effectively democratized and tend to hybridize, in contexts of oppression it could be interpreted as an act of transgression, an accident, an error; The vision of gender must be oriented towards reconsidering the social function of women and girls, as bearers and subjects of rights on an equal footing with men. It also implies the epistemological questioning of the critical practice itself where power relations are installed and reproduced in plural scenarios: family, community, work, student, and public.

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Over time, a broad set of theoretical perspectives has been accumulated and both gender and ethics have had a diverse use with the purpose of imposing a certain meaning for the use of each one of them. This is a consensual distinction, that is, it depends on how the use of the terms can be accepted; hence the existing dispersion of meanings. Given the instrumental function that they fulfill, both one concept and the other must contain a purpose in order for

them to make sense; in the social field, both terms tend to have the purpose of achieving legitimation through well-defined actions of human conduct.

Ethics and Gender: Its Implication in the Transmission of Diseases by Mosquitoes

Determining the factors that cause or contribute to the rapid geographic spread of mosquito-borne diseases is a priority for better effectiveness in the surveillance, control, and management of arboviral diseases. Among these factors are considered the lack of immunity of the population as well as environmental and social determinants that favor the proliferation of these vectors. However, the gender perspective and the ethical implications in the treatment of these diseases must be incorporated, considering this as an unavoidable issue, but on which there are a series of absences and non-visible issues that need to be faced and considered in order to advance in a necessary integrated and transdisciplinary management of these diseases.

Both ethics and gender are articulated with mosquito-borne diseases in the practical aspect, in their concrete manifestation: the sick person given their vulnerability, conditioned by a set of social and cultural determinants that give rise to forms of discrimination based on the sex of specific people: girls and women. Although it is true that mosquitoes, especially *Aedes aegypti*, the vector that transmits dengue, Zika, chikungunya and yellow fever, are predators that evaluate male or female people with equal opportunities to make their victims; the critical problem is when girls and women, due to their gender condition, when assuming certain roles or being subjected to certain stereotypes, are placed in fragile conditions regarding this dangerous aspect.

The question is not whether women and girls are more likely than boys to contract mosquito-borne diseases, but whether they are specifically affected by them: from assigned roles, associated functions and venues, outcomes from health and pregnancy to a greater burden of associated unpaid care, both at home and in the health sector [9]. Ethics when referring to the meanings and rules of use of terms such as “good”, “bad”, “right”, “wrong”, “duty”, “obligation”, “responsibility”, “justice”, “injustice” when applied to the frameworks of this work, that is, applied to actions, practices and social agreements regarding what contributes to female vulnerability before the mosquito bite.

Consistent with the purposes of the article, justice must be projected as a support for equity, that is, that girls and women are acting in conditions of equality that men are good and it would be unfair if they are subjected to conditions that make them vulnerable to these diseases. In the gender-

ethical interaction, in the context of diseases transmitted by mosquitoes, the values or virtues of the really existing people become defining, without them the essential levels of social and moral cohesion cannot be reached so that people can live together fairly. Here equity indicates that the notion of what is good is a condition to achieve what is just [10].

When relating ethics to gender, it must be taken into account that both are integrated into the performance, in the course of actions. The asymmetries between males and females, in the face of these diseases, must be analyzed as moral facts and the type of knowledge necessary when making ethical statements must be examined and the grounds for justification, appropriate for moral judgments in search of the greatest possible justice, must be sought.

The gender-ethical links, in contexts of diseases transmitted by mosquitoes, locate the vulnerability of girls and women as a matter related to practical morality that constitutes part of the experiential experience of each one of the people involved, hence it is a social problem. In this case, it is the health professionals and epidemiologists who are permanently monitoring the patients, the clinical event, but the rest of society raises questions or can issue value judgments on a matter to which is added a moral assessment of the behavior of actors and people involved.

Above all, the social and cultural factors that contribute to women's vulnerability to these diseases configure family, community, work, and social scenarios of inequity in health; while it is a set of avoidable, unnecessary and unfair inequalities [11]. Such inequity in health is therefore, above all, an ethical problem, which must be discussed from a gender perspective based on justice for all.

Within the framework of the VectoCaribe Project, a study is carried out on the gender approach, as a dimension for the effective management of mosquito-borne diseases, as it is necessary to find and measure inequalities; that is, to overcome the discursive rhetoric in the treatment of social problems, and injustice especially. Consistent with the identification and description of gender inequalities, democratic social mobilization and participation is demanded, articulated and integrated with community actors and within the family in order to avoid such inequalities and gradually dismantle the prevailing patriarchal system.

In this process, the actions carried out by communities and families play a fundamental role as mosquitoes settle and reproduce, to a greater extent, due to the favorable conditions found in these scenarios. These actions must have a differentiated approach to rectify, in an effective way, the conditions of inequality given that each one of them and in each place present a content and are manifested in different

ways. In addition, from the community and family spheres, a real management system can be built to solve gender inequities in the transmission of such diseases in a specific nation and globally.

Gender vulnerability, in the context of mosquito-borne diseases, accumulates socially, historically, and culturally as a consequence of systems of domination centered on masculinity; it is expressed in decisions that generate public policies, modes of action, production, work, thought and development, without thinking about the benefit of all people. To overcome asymmetries, it is necessary to focus on health and equity for all people as an inalienable human right, guaranteeing equality in its multiple spheres of materialization [12].

Gender issues such as ethics are a historical product of human experience that materializes in practices and lessons learned over time. Therefore, ethical decisions to solve the vulnerabilities of women and girls against diseases transmitted by mosquitoes must reach a rational and not only emotional character, in the field of social and distributive justice in order to reduce the affecting and saving the greatest number of female lives based on the principles of social ethics, contrasting the ethical principles of the individual sphere such as autonomy that is privileged when it does not harm others and justice that limits it when rights are deprived of other people for gender reasons.

The gender approach with an ethical perspective, within the framework of these diseases, shows the importance of articulating in a consistent and humanistic way the universal right to health and social well-being with global and health justice exercised in the different dimensions of global health, as a concrete and tangible expression of the sanitary and epidemiological injustice and inequity that the patriarchal and macho systems of female alienation and subordination have generated.

The harmony of ethics and the gender approach indicates the need to apply correct public policies, decision-making and conflict solutions, preventing instrumental rationality from acting motivated by sexist criteria, stereotypes, mentalities and practices that exclude women. Women and girls do not reverse the inequities that deepen inequalities to the detriment of the well-being and fullness of all people. Precisely, the analysis of the facts and the values contained in them must be integrated, as well as the duties that arise from access to health services and the realization of the values based on the facts that are socially and historically constructed so that all enjoy the same rights.

In addition, what is good and fair conditions the systemic functionality of social rules converted into codes, norms

or laws that make group and family coexistence possible, establishing norms of conduct and solidarity at a social level. The deep-seated issue is that women, given their living conditions, work, precariousness and vulnerable location, with respect to mosquito bites, are subject to the violation of the principle of non-discrimination and also deprivation of the defense of value of human life and the most precious value for its achievement: health. Approached in this way, such an issue becomes a problem linked to justice at a social level, the need to consider the collective dimension of health is evident, especially linked to guaranteeing basic and fundamental benefits for the entire society: men and women. Ethics and gender are structured when gender equality is addressed, while projecting the adoption of norms that guide institutional, individual, group and social reforms in order to help empower women and girls to claim their rights in access and health participation, especially regarding the confrontation of gender gaps in contexts of diseases transmitted by mosquitoes.

Gender vulnerabilities, associated with diseases transmitted by mosquitoes, involve not only women and girls, but also men, without exclusion due to their diversity in terms of age, skin color, ethnicity, sexual orientation and gender identities reach a more comprehensive approach. Education is an essential element to achieve existential equality for women and provoke change in mosquito bite in private and public life. Consequently, it is necessary to change the prevailing cultural patterns throughout history and that social development itself imposes in terms of the way that is shared between men and women regarding equal access to resources and health services, as well as culture, employment, responsibilities and levels of participation within the family, community and society.

Conclusion

Nations must ensure that the systems for the prevention, control and management of diseases, transmitted by mosquitoes, articulate ethics with gender through a correct gender approach based on robust ethical foundations. This issue is essential to guarantee universal access to health, while ensuring that all people have adequate and sustainable resources. In order to guarantee gender equity in the study of these diseases, public policies should continue to cushion the inequities that place girls and women in vulnerable conditions at home, work or study centers, the community and society in general through substantial and well-targeted measures, apart from providing support to families who suffer the consequences of precariousness in their daily lives.

Although it is true that several actions have been implemented in search of gender equality in this problem, the results achieved are variable. Reality inexorably indicates

that an urgent change of paradigm in social engineering is required, since it deals with historically accumulated and legitimized roles, stereotypes, attributions, distribution of power, referring to what men should do and where they should be and the females.

The articulation of ethics with gender, in the context of diseases transmitted by mosquitoes, operates structurally harmonizing each other when defending the common good, justice, equity, the good, life, democracy, human rights and the most precious asset: health is about. The access of all and all people to health and well-being becomes essential to achieve full development at a national, regional and global level; for which it is imperative to provide a solution and response to the needs that gender inequities configure and place girls and women in conditions of vulnerability.

In addition, the international community should give national and regional initiatives, such as the study of gender vulnerability associated with mosquito-borne diseases in the framework of the VectoCaribe project, greater support, among other ways by offering financial assistance to countries with a limited economic, sanitary and epidemiological capacity. In order to guarantee gender equality, in the context of these diseases, economic, social, environmental, epidemiological, cultural and health factors must be articulated. The values or virtues that make up the ethos focused on the defense of life, equity, justice, goodness and democracy must prevail at all times over individualistic interests for all, girls, boys, men and women.

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