

# Editorial

Theo Gavrielides

A very happy 2021 and welcome to the first issue of this year! I am very excited about the research that we have lined up for this year. We are living unrepresented times. COVID-19's health and socio-economic impacts highlighted the need for not only more global thinking and solutions but also tailored and specialist health and social care services. It is now clear that even the coronavirus discriminates with BAME, migrant and refugee communities being impacted the most. Coupled with the well-established fact that we were already experiencing wide health inequalities, the post-COVID-19 era will require everyone's effort.

As I write this Foreword, here in the UK, Margaret Keenan, who turns 91 next week, has become the first person in the world to be given the COVID-19 vaccine. It is with humility that I look back at the work of the many researchers and scientists who brought us the vaccine. The shared global thread made us all think differently and along with the deaths and suffering; it also brought out the best in us. I have personally been involved in a COVID-19 emergency relief project named "You are not Alone" ([www.fredcampaign.org/covid19/](http://www.fredcampaign.org/covid19/)). The number of volunteers, donors and supporters who offered their help has been simply inspiring. Never before have I seen so much and so coordinated community and voluntary action.

But we still have a lot to learn about the virus, its consequences and best practice. That is why I am thrilled to be hosting a special issue this year titled *Human rights in healthcare during COVID-19 and other pandemics*. It is an honour to work alongside the Guest Editors Jan Michael Alexandre C Bernadas (De La Salle University Manila) and Lee Edson P Yarcia (Alliance for Improving Health Outcomes) to prepare this timely special issue.

In addition, we have two more special issues lined up! *A Human Rights Approach to Mental Health Services, policy and legislation* will be edited by Guest Editor Michael Elnemais Fawzy, MD Consultant Psychiatrist at the Al Abbassia Mental Health Hospital, Cairo, Egypt. This special issue will reflect 15 years of human rights legislation and advocacy focussed on improving the lives of people with mental health challenges. *Sexual and Reproductive Health Rights: Towards Universal Health Coverage Policy and Programming* will be edited by Guest Editor Dr Ritu Mahendru and will focus on the 2030 Sustainable Development Agenda. It will contribute to the monitoring and learning of three transformative results to:

1. end maternal death;
2. unmet need of family planning; and
3. end gender-based violence and all harmful practices by 2030.

Turning to this issue, our first paper could not be more timely. *Stigma and COVID-19 in Iran: a rapid assessment* investigates the perceived stigma among residents of Sanandaj, west of Iran, following the COVID-19 pandemic. The paper is based on a cross-sectional study that was conducted from March to April 2020 with a sample of 1,000 participants. The study shows that the "COVID-19 stigma" is high among Iranians and more common among men, youngsters and the self-employed.

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*Perceived barriers to whistle blowing in healthcare amongst healthcare professionals: An integrative review* explores perceived barriers of whistleblowing among health-care professionals of all grades and the possible influences on the whistle-blower.

An integrative review of both quantitative and qualitative studies published between 2000 and 2020 was undertaken. This study points out that fear is predominantly an existing barrier preventing individuals to report wrongdoing in care and further highlights the significance of increasing an ethos of trust and honesty within health care.

The third paper, *Health care access issues among young African American and Hispanic men* aims to clarify the relationship between characteristics that contribute to health-care access issues and individual behaviour seeking health care. The paper is a key milestone for the future resolution of racial and ethnic health-care disparity and access. A descriptive case study analysis was adopted using a face-to-face, semi-structured approach of a case study, including ten depth interviews representing African American and Hispanic men who are experiencing health-care access issues. The data were complemented by archival data analysis, description of personal accounts of the African American and Hispanic men and articles pertaining to racial and ethnic health disparities.

*Chronic pain management a fundamental human right: adaptation and examination of psychometric properties of pain anxiety symptoms scale among osteoporosis sample from Pakistan* argues that proper instruments should be administered to assess chronic pain clinical issues. The study calls for a reassessment of existing tools according to diverse cultures. The research suggests a three-factor structure scale with 19 items in opposition to the original four structured 20 items scale.

*Do front-line employees in the Chinese commercial banks have the rights to experience psychological well-being?* aims to understand the relationship between job autonomy, transformational leadership and psychological well-being mediated by job satisfaction among front-line employees in Chinese commercial banks. A cross-sectional study was conducted consisting of 96 respondents from five Chinese commercial banks. The results reveal that transformational leadership and job autonomy are significantly positively related to job satisfaction and directly related to the psychological employees' well-being. The paper points out that employees are not mere means for making profits but also have the right to experience psychological well-being. Employees with a high level of job satisfaction and psychological well-being benefit both their own health and organisational performance in the long run.

Subsequently, *Cultural competence as a technology of whiteness: race and responsibilisation in Scottish health and social care* extends our understanding of the concept of cultural competence in relation to whiteness, particularly in relation to health and social care. It provides a critical review of the academic literature on cultural competence in health and social care, focussing on Scotland. The paper argues that cultural competence is associated with individual responsibility tropes that undermine state-funded welfare provision and re-inscribe traditional inequalities.

Various published accounts have linked vertigo to psychological and psychiatric symptoms, which include stress, anxiety and depression. The final paper *Indigenous context of vertigo: translation and validation of dizziness handicap inventory for diagnosis and evaluation of patients in Pakistani hospitals* examines the validity and reliability of Dizziness Handicap Inventory (DHI) Urdu version. Fieldwork was carried out with 222 vestibulocochlear disorder patients having chief complaints of tinnitus and vertigo, age ranged from 18 to 89. Significant correlations were noted between dizziness symptoms rating on the translated scale. A three-factor solution was obtained for DHI; the factors obtained were associated to the subscales vestibular handicap, vestibular disability and visuo-vestibular disability, demonstrating a strong factorial validity in the Pakistani cultural context.

I hope that you find the first issue of 2021 useful in your practice and research. A huge thank you to all those working on the front line saving lives and the researchers working to understand the virus. Your feedback is always welcome; you can submit your views via our website and your work for peer review and publication at [www.emeraldgrouppublishing.com/journal/ijhrh?id=IJHRH#author-guidelines](http://www.emeraldgrouppublishing.com/journal/ijhrh?id=IJHRH#author-guidelines). We review papers on an ongoing basis and have a target of returning them to the author within five–eight weeks of receipt. Warm wishes from everyone at the *IJHRH* and stay safe!

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