A FAITH-BASED RESPONSE TO THE CORONAVIRUS (and epidemics in general)
February 2020

“I was hungry and you gave me food, I was thirsty and you gave me something to drink, I was a stranger and you welcomed me, I was naked and you gave me clothing, I was sick and you took care of me, I was in prison and you visited me.” Matthew 25:35-36 NRSV

But if anyone has the world’s goods and sees his brother in need, yet closes his heart against him, how does God’s love abide in him? – 1 John 3:17 ESV

From the beginning of our faith, Christians have been active in caring for the sick and providing for their neighbors in need. Individually and collectively, churches run community meals and food pantries, provide medical care and compassionate end-of-life care, offer emergency and longer-term housing, assist people with transportation, education, and many other needs. We have risen to the occasion in the day-to-day and in times of crisis, when communities have been upended by the unexpected.

As the United States responds to a severe flu and cold season, and prepares for the spread of the novel coronavirus (COVID-19), we invite our members to approach this situation as grounded faith leaders. From the experiences of communities facing crises around the world, we know that faith leaders can play a transformational role in calming fear, disseminating accurate information, and modifying religious practices to help keep people safe while providing spiritual care and honoring important community traditions.

To this end, the Wisconsin Council of Churches will be providing information and resources through our website, social media and other means. As always, we acknowledge there may be particulars of your religious tradition on which you need to consult your ecclesiastical authorities before adjusting church practices. Please accept the recommendations below as a starting point, and adapt them as makes the most sense for your own setting and traditions.

Join us for a webinar on Epidemic Preparedness for Faith-Based Organizations at 1 pm on Tuesday, March 10 with Cheryl Skjolaas, UW Center for Agricultural Safety and Health, and National Chair of the Extension Disaster Education Network (EDEN). Register via our website, Facebook or Eventbrite.

Contents:

- What is our role?
- What do we need to prepare for?
- A church view on keeping people healthy
- Responding to Our Neighbors’ Needs
- Ministry Amid Social Disruption
- Where can I find trustworthy information about the current public health situation?
- Denominational Resources
WHAT IS OUR ROLE?

Our role as churches, leaders and compassionate Christians, is to:

- Combat fear with knowledge in order to encourage preparedness and decrease stigma
- Maintain operational continuity and continue expressions of Christian life in the case of quarantine and disruption
- Show God’s compassion and care to those in our communities who are affected

- Adapted from Episcopal Relief and Development

WHAT DO WE NEED TO PREPARE FOR?

Some general considerations to organize your planning:

1) Think about how you will reduce people’s chance of getting sick or dying from an epidemic.
2) Think about how your faith community will respond to needs of those who are sick, anxious, in economic need, and/or grieving.
3) Think about how you will adapt your operations and respond to social disruption if many people are ill, or health officials recommend distancing measures.
4) Think about how you will help the church and community recover once the crisis is over.

These are important considerations for any crisis management plan, and worth your consideration whether they become a significant factor with respect to COVID-19 or a future community emergency.

The Council will be sharing resources on each of these. Bookmark this page and follow us on social media for updates as additional information becomes available.

A CHURCH VIEW ON KEEPING PEOPLE HEALTHY

Our first and most basic goal is to reduce the chance of people becoming sick or dying from an epidemic. We list a set of basic actions below. If you haven’t already implemented these, this is the place to start. Put a version of these practices into place, and then communicate them thoroughly in a special pastoral message, on your social media, and from the pulpit. You cannot share this information too often; it is the front-line tool for preventing infections. We are community partners with public health and medical professionals, and this is caring for our flock as much as prayer and preaching. The healthier we can keep ourselves, the better we will be able to weather additional situations coming our way.

These practices align with the best recommendations of public health experts at this time.

Basic Health Practices

- Post handwashing signs throughout the church. Downloadable posters available at https://www.cdc.gov/handwashing/posters.html
- Make tissues, garbage cans, and disinfecting hand gel available throughout the church.
- **Remind people it is ok - even preferable - to miss church** (worship, religious education, etc.) if they or someone in their immediate family is ill. If they won't do it for themselves, remind them that this is an act of care for their fellow church members whose immune system may not be as strong.
- Clean surfaces regularly

Adapting Church Practices

- **Handshakes and Hugs**
  - Adapt your practice of Passing the Peace to eliminate handshakes or hugs. Consider gestures of peace (model a peace sign, arms folded over heart, “holy wave” or hands-folded-in-prayer gesture), elbow bump, smile, or institute a song of peace instead of touching hands.
  - If it has been your practice to hold hands for a prayer, song or benediction, it would be a prudent time to introduce a new practice that does not involve physical touch.
  - Similarly, forego shaking hands in a greeting line after worship if that is your custom.
- **Consider your Eucharistic practices, and use those which reduce the risk of transmission.**
  - Have officiants and communion ministers sanitize their hands before serving
  - Serve by intinction in which the communion minister dips the host or bread into the wine or juice and hands it to the communicant (not touching their hands).
  - Offer individual cups and pre-cut bread or host at stations, the server handing the bread to the communicant.
  - Remind those who are particularly concerned that receiving any part of the sacrament is full participation. According to historic ecumenical church teachings, having Communion “in one kind” – receiving the bread/host only – is still receiving communion, if they are concerned about germs contaminating wine or juice. Instruct your members as to the proper procedure – crossing arms over the chest, leaving the communion rail before receiving the chalice, or skipping the chalice bearer’s station – according to your preferences.
- **Food service:** If you offer refreshments during coffee hour, or communal meals, have the kitchen host serve food to guests rather than having them self-serve from a large platter or buffet line.
RESPONDING TO OUR NEIGHBORS’ NEEDS

In times of crisis, when people are anxious and unsure, community support and accountability networks may fray. The church’s actions, through faith leaders and through the actions of the body as a whole, can model for a wider community what it looks like to care for one another.

- **Responding to bias:** At this time, there are reported increases in bias against people of Asian descent, including (but not limited to) Chinese Americans. This racial/ethnically coded stigma is hurtful and inaccurate. Help interrupt racism and fear when you see and hear it. People of Asian descent aren’t any more likely to get the coronavirus than any other American. Similarly, those who have traveled, have been ill and recovered, or have self-isolated to ensure the health of others and are now out and about may be seen as a threat. How can you stand alongside those who are suffering from unjust accusations and stigma?

- **Responding to economic fragility:** It is wise to prepare for possible illness by ensuring that you have additional over-the-counter medicine, tissues, cleaning products and an extra supply of your normal “I feel sick” food staples at your home. Some experts are also recommending buying a bit more than your usual weekly groceries, adding some nonperishables to keep in the cabinet in case of quarantine, or if many people are sick and you want to avoid the public as much as possible. With that in mind, consider this: these are not financially feasible recommendations for everyone. How might your church assist people in your community who can’t afford to purchase extra groceries, medications or cleaning products, for example?

- **Building social networks:** Who are the overlooked people? Are there people nearby who live alone, isolated from family or friends, and may not have much of a support network? Now is the time to reach out to them and ensure there are ways to connect with them, be open about needs, and plan to stay in touch.

- **Reducing anxiety with accurate information:** Are there people among you or near you who are fearful and fretting? Does your church have a parish nursing program or many medical professionals among its parishioners? If so, consider ways you might provide reliable, pastoral information on the current situation to those in your neighborhood “parish,” perhaps in coordination with local health officials.

- **Building response networks:** Because worshipping communities have many complex relationships, we can be crucial connectors. Do any of your members work in agencies and/or have positions of leadership? These may be useful resources to help gain access to services, resources, or information in a time of crisis.

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3 https://blogs.scientificamerican.com/observations/preparing-for-coronavirus-to-strike-the-u-s/?fbclid=IwAR0Icerwn3W_oncQ8wmgSWSY-Zog39DEUjaxaB42unkaqQkg1JQP3C01hwQ
MINISTRY AMID SOCIAL DISRUPTION

As illness spreads, it may become necessary to make even more significant adaptations to church and community life. Clergy and other church leaders should be developing and testing plans now regarding how they will address the following. Be ready to communicate with church members and friends regarding these shifts, to provide reassurance that you are mindful and prepared. It may feel to you as if these are premature considerations, but good leadership is about planning ahead. Pandemics can spread quickly. There may be little time to prepare once one begins.

- **Worship, Christian Education and Fellowship:**
  - If it becomes unwise to gather, how can you share teaching, prayer, and a sense of community with the church? What online tools are at your disposal? Can you record and post a message? Use social media to have a Facebook Live sermon, Bible study or a full prayer service led by pastor or laity? Do you have access to Zoom or another videoconferencing tool? Do you need to help people learn how to access some of these tools?
  - What words from scripture and tradition will we invoke? What songs will we sing? What prayers will we pray? What are the laments, what are the places of trust, what are the words and songs of hope and mercy?

- **Pastoral Care – general, and for the ill/quarantined:** Many colleagues have learned how to offer pastoral care by phone call, text message, FaceTime or Skype, and other technology tools. If social distancing is recommended, these will become critical tools for pastors. While it may be your preference to visit the sick and dying in person, in the case of an epidemic with isolation and quarantines imposed, this may be difficult to impossible. Take the wisdom of clergy who minister in health care settings seriously: entering a quarantined area could keep you from being able to minister to the rest of your flock. If there is an alternate way to provide care, take advantage of it. Pastoral care for the grieving is also impacted in such conditions.

- **Financial Ramifications** - As many churches still rely upon the Sunday offering to sustain their ministry, a decline or pause in Sunday attendance will cause a disruption in finances to support the ministry. This is a good time to encourage a switch to electronic giving, if you have it available. (As an added bonus, it gets away from having a plate or basket passed and touched by many hands.) Consider also that members and friends may experience lost income as a result of economic disruption, and be aware that may affect the church’s income as well.

- **If the Pastor is among the sick** – who will speak a word of hope if you cannot? Have you equipped the saints to do this work? How will you?

We will continue to add ministry practices and references to this section as we have the opportunity to research, review and prepare them.
FACTS ABOUT THE CURRENT PUBLIC HEALTH SITUATION

What is an epidemic? What is a pandemic?

- An epidemic is a disease outbreak in a relatively isolated area, significantly higher than the normal pattern, and/or more severe than usual. An epidemic becomes a pandemic when it affects many nations on several continents.4
- COVID-19 meets multiple criteria of a pandemic.

What is Coronavirus Disease 2019 (COVID-19)? How does it affect you? How does it spread?5

- Coronaviruses are a large family of viruses. COVID-19 is a newly identified virus which primarily affects your lungs and airways. Symptoms are high fever, cough, and shortness of breath. These are similar to other common illnesses like the cold and flu. Symptoms can range from mild to severe.
- Because it's new, we don't know exactly how it spreads from person to person, but similar viruses are spread by droplets in coughs and sneezes. It's possible that a person could get COVID-19 by touching a surface with the virus on it and then touching their own mouth/nose/eyes.

Prevention and Treatment6

- There is no vaccine to prevent COVID-19, but everyday activities to prevent illness can help: avoid close contact with people who are sick, avoid touching your eyes/nose/mouth, stay home when you’re sick, disinfect frequently touched objects with a cleaning spray, wash hands often.
- Treatment is about providing supportive care to relieve symptoms; there is no anti-viral medicine approved to treat COVID-19 at this time.
- Right now, medical professionals are saying you should contact your provider right away if you think you’ve been exposed. Call ahead, and ask for their guidance.
- The CDC does not recommend that people who are well wear a facemask to protect themselves in the community. The facemask should be used by people who have COVID-19 and are showing symptoms, and people who are taking care of someone infected with COVID-19.

What can I expect?7

- More cases are likely to be identified, and person-to-person spread is expected to occur in the US.
- Widespread transmission could mean many people will need medical care at the same time, and there could be an increase in deaths.
- Places where many people gather may see significant absenteeism (workplaces, schools, churches).
- There is likely to be economic disruption, given the global spread.

4 Centers for Disease Control and Prevention (CDC)
DENOMINATIONAL RESOURCES

ELCA Congregational Disaster Preparedness Guidebook
http://download.elca.org/ELCA%20Resource%20Repository/Preparing_for_a_disaster_Congregational_Disaster_Preparedness_Guidebook.pdf

The Episcopal Church Faith Based Response to Epidemics https://www.episcopalrelief.org/what-we-do/us-disaster-program/faith-based-response-to-epidemics/

The Presbyterian Church (USA) – A Call to Prayer from the Stated Clerk of the General Assembly.

Wisconsin Conference United Methodist Church Response to the Coronavirus