

COVID-19:
Guidance for
Faith
Communities



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ABBREVIATIONS

CDC	Centre for Disease Control
CoH	Channels of Hope
COVID-19	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) has been confirmed as the causative virus of Coronavirus disease 2019 (COVID-19)
DRC	Democratic Republic of Congo
F&D	Faith & Development
HIV	Human immunodeficiency virus
MOH	Ministry of Health
SMS	Short message service/text messaging
WHO	World Health Organisation
WV	World Vision
WVI	World Vision International

COVID-19 GUIDANCE FOR FAITH COMMUNITIES: **7 VITAL ACTIONS**

Faith leaders have a central role in guiding their members towards healthy behaviour change and providing spiritual, pastoral and practical support to those in need. There are seven important actions that faith leaders and faith communities of all traditions can take to protect life, reduce the spread of the virus and keep the community strong. Each of these seven actions is described in more detail through this document. Please always follow your national government guidelines and refer to the [WHO recommendations for religious leaders](#).



1

Prevent transmission in places of worship and through religious practices.

Protect your congregations and the wider community through improved hand and respiratory hygiene and social distancing practices.



2

Give accurate information

from the World Health Organisation and your national MOH. Prevent the spread of misinformation and discourage sharing of rumours, myths and fake news. Kill myths by not repeating them.



3

Plan ahead: Whilst your community might not be currently affected by COVID-19, things are changing rapidly. It is advisable to prepare a [continuity plan](#) for your faith community with details of what actions to take as the situation grows worse, and when it eventually gets better.



4

Connect and care for your congregation and the wider community,

especially the most vulnerable and elderly. Support and care for service providers in the community. Identify communication channels and ensure support for those not connected via many virtual methods.



5

Provide psychosocial support

to children, families and wider community. Heightened fear, powerlessness, frustration, fatigue and isolation can lead to psychosocial distress and can place children at increased risk of violence, abuse or neglect.



6

Provide spiritual nurture

as a part of psychosocial support. Nurturing children's spirituality helps to build their resilience and improves their psychosocial strength by bringing them closer to God, nurturing hope and encouraging altruism. Faith leaders and parents or caregivers can encourage and enable children's access to spiritual practices such as prayer or worship, and by using faith texts to address fear and hope.



7

Promote peace and social cohesion, address stigma and xenophobia.

Faith leaders can use their convening power and influence to facilitate social dialogue, promote unity and solidarity, address misleading theologies and promote inclusivity. This will reduce social tensions and reduce the vulnerability of marginalised groups.



PREVENT TRANSMISSION IN PLACES OF WORSHIP AND THROUGH RELIGIOUS PRACTICES

1. Promote good hand and respiratory

hygiene. If your national government guidelines still allow for gatherings, then good hygiene is essential, including handwashing with soap. Do not hand out any solid objects as these can carry the virus. This includes handing out books, having any physical contact or administering the Eucharist/communion.

Ask those attending services to wash their hands with soap as they come into the place of worship, and recommend people do not touch each other.

Provide soap and running water or hand sanitiser dispensers at entrances and ensure there is a good supply of soap or hand gel in cloakrooms, kitchens and any other appropriate areas. Assure those working with children help them wash their hands with soap. Wet-wipes are not effective in killing or removing viruses.

[Download and print WHO posters on handwashing](#) and display in all bathrooms and kitchens: these depict key messages for proper hygiene practices.

Remove all reusable towels for drying off hands and replace with disposable paper towels, no-touch hand dryers, or simply allow air-drying.

Display the WHO public information posters on respiratory hygiene practices, and review it often. Always cover your mouth. Cough or sneeze into a tissue: catch it – sneeze into a tissue or toilet paper; bin it – bin the tissue or toilet paper; kill it – wash your hands with soap or sanitiser; Do not touch your face unless you've washed your hands with soap. Burn it or bury it – destroy used tissue and toilet paper and wash your hands afterwards. Distribute accurate information for your country context on what people should do – or where to call if they develop symptoms.

2. Adjust spiritual practices:

Depending on the stage of the epidemic, reduce sharing of any cups, bowls, or plates, and reduce practices that encourage physical contact between people (touching, holy kisses, handshakes, or sharing the peace).

When to cancel services and events: Follow your national MOH on when and if to cancel services and events.

Suspend shared use of a chalice (common cup) for communion: Try other methods such as pre-poured disposable cups/paper cones, or using a dropper to administer. Discourage 'dipping' of bread using fingers (intinction). Alternatively, offer Communion of only consecrated bread/wafer/host, with the priest/pastor alone taking the wine/juice.

Suspend physical contact practices, including greetings, sharing of peace, blessings or 'laying on of hands'. Use other gestures such as 'prayer hands' or bowing to one another. Discourage holy kissing or touching objects that are touched by others, including crucifixes, icons, cups, jugs, handrails, etc. Suspend catering (teas, coffees, etc.) where multiple people touch mugs, utensils and food items.

During Baptism or ordination: Wash hands with soap before and after touching people, for each candidate. If a baby or small child is being baptised, christened, ordained, blessed or welcomed into the congregation, in some denominations parents/godparents should hold the child. It is preferable for water to be poured on the candidate's head using a baptismal shell or spoon. Suspend Baptism by Immersion, and foot washing as there is a risk for infection by sharing towels or actual touching.

Refrain from passing collection plates around (which can contaminate hands): have people drop donations in a receptacle in a central location.

Reduce overcrowding: If local regulations allow, reduce overcrowding by offering additional services. Consider the options for providing services outside where people can stand/sit further apart. There is evidence that meeting in outdoor spaces (and keeping a distance) may help to limit the spread of viruses (for instance, this could be preferable for prayer groups, Bible studies, or Sunday school).

3. Ensure safe burial practices: The WHO has produced guidelines for safe burials, contained within their [recommendations for religious leaders](#). Please refer to this WHO guide to ensure burials are organised in a way that lends dignity to the family but does not compromise the safety of the community.

4. Ensure faith leaders and workers follow hygiene practices

Ensure **ministers of the Eucharist or communion wash their hands with soap** before and after distributing communion, books or leaflets, etc.

Do not undertake pastoral visits to people who are self-isolating until isolation ends. Offer support and prayer over the telephone when you can. If the person can stand in their doorway for a few minutes, a blessing can be given to them with the priest/pastor standing outside, maintaining at least two-metre distance from the person and caregivers.

If the virus is spreading in your community and you are visiting people at home who have symptoms of COVID-19 (fever and persistent dry cough), try to delay giving sacraments until they are better. If that is not possible and giving sacraments is considered absolutely necessary by your faith, wear a surgical mask, and when administering to the unwell, or in isolation, wash hands with soap before and after giving the sacraments. Provide hand sanitiser or soap for pastoral workers where possible, and have them follow this same guidance.

Resources: prevent transmission in places of worship and religious practices

[WHO: Basic protective measures against COVID-19](#)

Wash vestments worn in services in the hottest water temperature without damaging them, and dry them in bright sunlight if possible. Ceremonial items, which cannot be easily washed should be stored in a well ventilated and brightly sunlit area, for at least 48 hours before re-use.

Ensure **good regular cleaning of surfaces people touch regularly**, including such things as door handles, light switches, etc. using a bleach-based cleaner, after every service.

5. If one of your congregation/ community members is unwell or diagnosed with COVID-19:

Anyone who may have been in contact with someone with the disease and has a fever and a persistent dry cough, or feels unwell and has a fever, dry cough, or shortness of breath, should contact a **health authority or telephone advice line**. Note: elderly people may have only a slightly elevated fever (99.6F or higher) and still have this disease.

Encourage self-isolation for those with symptoms: Request those with a cough, fever or cold symptoms to stay at home during the outbreak and not to attend worship for a 14-day period. Once community transmission is confirmed, it may be advised that older and elderly people (over 60 years), those who are sick or vulnerable, those with immune deficiencies (like HIV), and those with underlying health risks should also avoid communal services until the epidemic has passed and the MOH has given the "all clear."

If you become ill, find some way to stop working. Seek appropriate health authority advice. If a person who recently attended a service is diagnosed with COVID-19, health authorities may need to contact all those who were in close contact with the person whilst they were infectious. Faith leaders may need to assist in this process and explain to people why this is a necessary step. Some of the congregation may be asked to self-isolate. Advice on self-isolation is given in Annex 1.

It may be necessary to deep clean the church/ mosque and/or suspend services for a short period. Receive and act on MOH advice.



Vital Action # 2:

GIVE ACCURATE INFORMATION

Be informed. Stay updated with the latest national health guidelines. The [Centres for Disease Control](#), the [World Health Organisation](#), and your state health department are monitoring the situation closely. Make sure you are in possession of or know where to find, your local health department guidelines. Follow their guidelines. Stay healthy yourself. Role model healthy behaviours for others. Basic and accurate information is widely available. Providing accurate information and actively combatting the spreading of rumours, misinformation, and myths can be part of pastoral care.

Communicate risk responsibly: Watch the [WHO COVID-19 overview 4-minute video](#). Review WHO guidelines on the prevention of transmission of the virus and watch the [short WHO video](#) and ["advice for the public" videos](#) on COVID-19.

Prevent the spread of misinformation/fake news: Even repeating myths when saying that they are untrue can inadvertently spread them and expose more people to misinformation. It is better to not give airtime to misinformation. Instead, provide the correct information and messages regularly so that it replaces the myth. Discourage the spread on non-approved news sources within WhatsApp groups and chats rooms. Encourage people to contact you directly first when they hear a possible myth or misinformation rather than sharing it more widely with other members of your faith community so that you can confirm, look into, or shut down a rumour or myth.

Do's

Do honour the guidance from your government. We follow a God who created a world with structure and order - we need to comply with the guidance from governments to stop the spread of this disease.

Do celebrate God as Immanuel, God with us, especially during times of crisis. Share His faithfulness, and love for the world to the point where Jesus became one with our suffering through His own suffering and death

Do pray for healing, wisdom for scientists, insight for public health officials and politicians, for compassionate responses, for protection of children, and for a speedy end to the crisis.

Don'ts

Don't emphasise or dwell on the negative, or messages of threat, or which drive fear. We need to work together to help keep those who are most vulnerable safe.

Don't use theological language which fuels fear and disempowers people like 'punishment from God', 'curse', etc. COVID-19 is not a punishment from God or a curse but an opportunity for God's people to show love and compassion in the face of pain and suffering.

Don't apply Scripture out of context or in a random manner to make your point.

Resource Links: accurate information

[WHO: Main COVID-19 information landing page: Information and guidance from WHO, including sitreps, technical guidance and training.](#)

[WHO: Key planning recommendations for mass gatherings in the context of the current COVID-19 outbreak](#)

[UNICEF: COVID-19 what parents should know: precautions families can take to avoid infection and guidance for symptomatic women who are breastfeeding, including recommended precautions to prevent transmission to an infant.](#)

[WHO: Getting your workplace ready for COVID-19](#)

[WHO poster visuals: How to wash hands](#)



Vital Action # 3:

PLAN **AHEAD**

Whilst your community may not be affected currently, things are changing rapidly. For this reason, and given that this disease is spreading rapidly throughout the world, it is advisable to prepare a [continuity plan](#) to ensure continued ministry for your faith community now. This plan should include some things that should be done immediately (like hand and respiratory hygiene), additional steps that can be taken later if and when cases are seen in your country (e.g. cancelling public gatherings), and even stricter recommendations (e.g. staying at home as much as possible, worshipping privately in each member's home versus having group worship) when the disease is spreading rapidly.

Resource Links: plan ahead

[Wheaton: Coronavirus \(COVID-19\) church planning template](#)



Vital Action # 4:

CONNECT AND CARE FOR YOUR CONGREGATION AND THE WIDER COMMUNITY

When diseases strike, faith communities often carry a huge burden of community-based care for those affected. As a faith leader, it is important that you ensure that members of your faith community are prepared with accurate information and the right protective equipment for preventing virus spread and caring for affected persons.

Consider who are those most at risk and care for the most vulnerable. Ensure the care of the vulnerable, the elderly, and people who have more trouble fighting off disease, and those with existing medical problems that put them at higher risk of developing severe symptoms from COVID-19 (e.g. those with high blood pressure, diabetes, or heart problems, immunosuppressed). Support and care for caregivers in the community, identify communication channels and ensure support for those not connected via telephone.

Consider how you can care for your community members who are ill or self-isolating and the elderly who are isolated from their families. They should try to avoid visitors but can receive practical support like donated food that is dropped off at their doorstep or collecting and delivering medicine. The disease is much more deadly for older people than younger people. While meeting the needs of the elderly when they are well, it is important to take special care not to put them at risk of infection.

Care for the caregivers: Ensure you can balance the well-being of staff and volunteers with the need to offer support to the community. Monitor the well-being of your staff and volunteers and those caring for others. Encourage them to rest, debrief, talk to others, and take care of their own needs. Tend to your own needs. Lean into your community for support. Take turns with others when providing care. It is tempting to believe in a crisis that we must give or do everything right now. Remember, self-care is not selfish, and rest is a necessity (and sometimes a divine command), not a luxury. As this outbreak continues to unfold, take steps to renew your energy and put your hope in God.

Connect people. Find innovative ways to maintain community despite social distancing restrictions. The human desire to be helpful is incredibly strong. Although a crisis may lead some people to withdraw, it can also be a significant opportunity to pull together and support each other. Faith leaders who convey leadership and creativity can pull people together in organized, caring, and sustainable ways. Support creativity and pray for people via telephone, including healing ministry or last rites. Consider the use of telephone calls, smartphones for video chats, serenading people with hymns from outside of their homes, or other creative ways to encourage people and keep in touch with people without incurring risks.

Resource Links: Connect and care for your community

[*World Evangelical Alliance: Responding to COVID-19 with faith hope and love.*](#)

[*How to stream a sermon.*](#)

[*WHO: Home care for patients with suspected COVID-19 infection presenting with mild symptoms and management of contacts.*](#)



PROVIDE PSYCHOSOCIAL SUPPORT TO CHILDREN AND FAMILIES

Remain calm and be a non-anxious presence.

Try to be emotionally present but free from anxiety. This will build trust and provide the right kind of care in any crisis. In a situation like COVID-19, anxiety comes from our desire to fix the situation, to have answers, and to protect our family. However, in reality, we are all vulnerable, and there are no easy answers. Instead, if we see ourselves as companions alongside our children, able to support each other with love and compassion, then this can reduce anxiety for parents and children. For us to show up non-anxiously means managing our feelings. We should neither try to escape the situation nor flood it with our own emotions or fears. Children will borrow our calm and compassion to assist them in reducing their anxieties. Our compassionate care can be a beacon of light, a channel of hope in this time.

Be present with and listen to children. No matter what turn a crisis takes, the most powerful gift we can offer is to listen. Avoid lectures, criticism or judgement. Provide structure, routine and clarity about what is happening around them. Provide information to children in age-appropriate ways that they can understand.

Help people take the long view. Remind people that God's loving presence was here before the universe itself, and it will be here long after the universe has passed away. Seeing ourselves as part of a much larger picture, and in the hands of a loving God, offers hope. We can trust God's loving presence in our lives, even when circumstances threaten to dim our hope. We do not have hope despite our circumstances, we have hope particularly during our hardest times.

Keep values alive. This means thinking about who we want to 'be' during the crisis, more than what we want to get, or what we need to protect. It means we

keep leaning into God's sustaining presence, looking outwards, loving our neighbours, and facing death with the same purpose and values by which we faced life.

Pray. Spoken prayers for people who are anxious and in great need can reshape a situation's meaning. Encourage prayers in families, where young and old can participate equally together; listen to each other and respond to each other's prayers. Sometimes, in times of trauma and crisis, using too many words can sound hollow—and prayers can sound like judgment or 'preachy' advice. In these times, use minimal words, or perhaps practice silent group meditation. We participate in God's life and one another's lives by showing up, by meditating in silence and renewing our sense of purpose, by bearing honest witness to the situation.

Considerations in the event of bereavement or death: If there is community-wide transmission of COVID-19, there will be deaths, and this will affect your community. Workers and ministers paid and unpaid may be bereaved. Ensuring that care is provided for everyone bereaved will be important. When talking about death, or talking to people who are afraid, confront the issue with calmness. Help people understand that the death due to COVID-19 is due to the disease, and health conditions, and alleviate self-blame or blaming the victim.

Provide pastoral care for the sick and dying. Do not visit hospitalised COVID-19 infected patients unless hospitals can ensure quarantine protection. If patients do not have access to telephones and have requested a priest, avail your contact details to the members of the hospital staff, so they can facilitate telephone contact if you are called upon to administer last rites or similar. Do not visit the patient if you are unwell.

Do's

Do speak to children in an age-appropriate way about COVID-19 and how to protect themselves, explaining why these actions are important.

Do help [parents learn how to speak to children about God and COVID-19](#).

Do help families to have [fun and stay fit](#) during this time.

Don'ts

Don't hide facts or use technical terms when speaking to children, but be sensitive to what they see and hear.



Resource links: Mental health and psychosocial support for children and parents

Priority, faith-based resources:

[Guidelines for faith-sensitive psychosocial programming](#)

[Guidance for humanitarian actors provides practical support to those involved in planning humanitarian programming seeking to be more sensitive to the faith perspectives and resources of the communities within which they are working.](#)

[Arigatou Activity Booklet for Children during the Covid-19 Pandemic – promoting spiritual resilience](#)

[Communicating Coronavirus to children](#)

[A child-friendly picture book from the Salvation Army](#)

[Engaging with religion at the local level for mental health and psychosocial wellbeing following humanitarian crisis](#)

[An article arguing that for those affected by humanitarian crisis, their psychosocial wellbeing and spiritual needs are as significant as their physical survival.](#)

Other, non-faith-based resources:

[Helping children cope with stress during the COVID-19 outbreak \(WHO\)](#)

[A simple poster aimed at parents and children](#)

[How to talk with your child about COVID-19: 8 tips to help comfort and protect children \(UNICEF\)](#)

[WHO training module for psychosocial support to children and adolescents](#)

[A training module providing health and mental health personnel with guidance on a non-disease oriented approach to psychosocial disaster response for children and adolescents.](#)

[WHO - Parenting in the time of COVID-19](#)

[Global Partnership to End Violence Against Children messages and resources for parents and caregivers to support their children's growth and interact with them constructively during this time of confinement.](#)



PROVIDE SPIRITUAL NURTURE TO CHILDREN, PARENTS/ CAREGIVERS, AND FAMILIES

Be present, even if it is not in person. Physical distancing is a key way of preventing the spread of COVID-19, but as faith leaders we can still be present with people in other ways. While it is not the same as being able to reach out and hold a hand, we are fortunate to have other viable options. You are likely already connected to people on various social platforms - WhatsApp groups, Facebook, SMS or email. Use them with sensitivity and respecting people's privacy.

Creative & digital outreach: If wider physical distancing measures are recommended by the health authorities, think about ways to spiritually support your community through email, text messages, community radio, or digital outreach. Consider recording prayers or sermons at home and share via SMS or WhatsApp. Here is a [blog which outlines](#) low cost or free ways to live stream a sermon.

Consider the particular needs of children: Develop COVID-19 specific Sunday school lessons. Ensure children and youth can virtually connect or find other means of continuing to engage with their peers.

Support parents to be creative to incorporate spiritual nurture activities into daily routine within families, which can stimulate children's spiritual growth and build resilience:

- Keep in touch with church/faith networks and congregations: help children to stay connected to peers to feel supported by each other and feel less alone or isolated;
- Incorporate and practice prayer or mindfulness, scriptural storytelling and reading in daily routine to help build healthy coping skills. Parents can model these for children;
- Listen to the views of children and adolescents, including the most vulnerable children. Allow them to share stories, videos, blogs, vlogs, poems, songs, etc.
- Create safe space and opportunities where children can feel free to explore questions about themselves, their identity and their spirituality; encourage relationships with the inner self (realisation of God-given identity and purpose, etc.);
- Spend quality time as a family, which can help you slow down, stay present and come together: having meaningful conversations with children and addressing their questions on what is currently happening; or encountering nature or art; focusing on the good and helping others.

Resource Links: Spiritual Nurture

[World Evangelical Alliance: How to pray with children during the COVID-19 pandemic.](#)

[Max-7 at home: resources for churches and families in quarantine with children to nurture life and faith.](#)

[Mindheart - a child-friendly book on COVID-19 to support and reassure children.](#)

[World Vision: Devotions for times of trial and challenges.](#)

[Tearfund: COVID-19 resources](#)



PROMOTE PEACE AND SOCIAL COHESION, ADDRESS STIGMA AND XENOPHOBIA

Preventing stigma can save lives. We learned from the HIV and Ebola crisis how damaging fear, stigma and misinformation can be - this is also very true for COVID-19. Stigma and fear can isolate people. It may cause them to hide the fact they have symptoms and prevent them from seeking medical care, adopting healthy behaviours and accessing necessary support. Stigma and fear rob people of their human dignity and inherent worth as created in the image of God.

Faith leaders can use their convening power and influence to facilitate social dialogue, to promote unity and solidarity, and to address misleading theologies.

Watch this [short video](#) from the WHO to learn more about how you can help tackle stigma associated with COVID-19. Please also refer to the [WHO: COVID-19 stigma guide](#).

Below are some 'do's' and 'don'ts' on how to talk about COVID-19 in a way that prevents stigma, fear and misinformation.

Do's

Do talk about the new coronavirus disease (COVID-19). The official name for the disease was deliberately chosen to avoid stigmatisation - the 'co' stands for Corona, 'vi' for virus and 'd' for disease, 19 is because the disease emerged in 2019.

Do speak accurately about COVID-19 risks, based on scientific data and the latest official health advice. Know your facts so you can correct information when needed. Share only facts and information confirmed by official health sources (see [WHO myth-busters](#)).

Do emphasise the effectiveness of prevention and treatment measures. There are simple steps we can each take to keep ourselves, our loved ones, and the most vulnerable safe.

Do [speak to children](#) in an age-appropriate way about COVID-19. Help [parents learn how to speak to children about God and COVID-19](#). Make sure [families have fun and stay fit](#) during this time.

Do support families, caregivers and health care providers affected by COVID-19 with love and compassion without putting yourself or anyone else at risk. Find innovative ways to 'meet' with your family and faith community without physically being in the same place.

Don'ts

Don't attach geographic locations or ethnicity to the disease. This can create negative feelings towards those locations or ethnicities. For example, don't talk about the China virus or the Wuhan virus.

Don't use hyperbolic language designed to generate fear like 'plague' or 'apocalypse'.

Don't share links from sources that are not trusted or reliable.

Don't encourage behaviour that is contrary to government advice.

Don't share 'funny' clips or photos with stigmatising messages

Don't hide facts or use technical jargon. Be sensitive to what children see and hear.

Don't allow people to become isolated. Those impacted need your compassionate support while maintaining physical distance.

Don't stigmatise those recovered from COVID-19. They cannot infect anyone else.

Do take physical distancing seriously. Follow the guidelines of your country, state or city. Social interaction, however, remains essential in this time.

Do talk about people 'acquiring' or 'contracting' COVID-19.

Do talk about 'people who have/may have COVID-19', 'people who are being treated for COVID-19', 'people who are recovering from COVID-19' or 'people who died after contracting COVID-19'.

Do pray - for healing, for wisdom for scientists, insight for public health officials and politicians, for compassionate responses, for protection of children, for a speedy end to the crisis, and for generosity in the face of a global economic crisis to ensure that the most vulnerable are supported.

Do practice relevant and responsive use of Scripture to encourage and lead people. Emphasise who God is and how he acts through the ages.

Do cry out to God ([Psalms 13:22 and 88](#)). Lament is what happens when people ask God why difficulty or hardships take place and don't get an answer. We must move beyond our self-centred worry and look more broadly at the suffering of the world. The Holy Spirit is 'groaning' within us as we groan with the whole creation. ([Romans 8:23](#))

Do celebrate God as Immanuel, God with us, especially during times of crisis. Share His faithfulness and love through Jesus becoming one with our suffering through his own suffering and death

Do focus on our common humanity, as we all are created in the image of God



Don't talk about people 'transmitting COVID-19' 'infecting others' or 'spreading the virus' as it implies intentional transmission and assigns blame. Every one of us is capable of contracting and carrying the virus

Don't refer to people with the disease as 'COVID-19 suspects', 'COVID-19 cases' or 'victims' which are ways to devalue and disrespect individuals

Don't apply Scripture out of context or in a random manner to make your point

Don't use theological language that fuels fear like 'punishment from God' or 'curse.' COVID-19 is not either of these things. As God's people, we have the responsibility to show love and compassion in the face of pain and suffering

Don't focus on divisions and/or issue statements or expressions that are capable to drive misunderstanding, such as 'if it was not for these people coming here, COVID-19 would not be killing us'



And finally, above all:

Do love one another. As **John 13:34-35** says
“Love one another. As I have loved you, so you must love one another. By this everyone will know that you are my disciples...”

Resource Links: Promote peace and social cohesion, address stigma and xenophobia

[UNICEF guide to preventing and addressing social stigma](#)

Watch this [short video](#) from the WHO to learn more about how you can help to tackle stigma associated with COVID-19.



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For questions or additional information please email:

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