

COVID-19: Guidance for Faith Communities

Dear colleagues,

As the COVID-19 virus spreads around the world, it's important that we all take responsibility for reducing the impact on our families and communities.

Firstly, this pandemic calls us to draw nearer to God in prayer.

Secondly we are called to keep ourselves and our loved ones safe by following the guidelines provided by authorised voices in order to reduce the spread of the virus and to prevent fear through misinformation.

And thirdly, as World Vision we have a privileged position to engage with churches, church leaders and leaders from all faith traditions.

Faith leaders play a critical role in preparing their communities for the onset of the COVID-19 threat, in promoting healthy behaviour to reduce the spread, in tackling stigma and fear and in providing practical care for the most vulnerable. We all learned a lot about the vital, positive role that faith leaders of all traditions can play in a health crisis through our experience with Ebola.

I believe that once again, church leaders and leaders from faith traditions will make a huge difference to the health and well-being of their communities as they respond to the COVID crisis.

We are praying for you, for strength and peace. And we trust that this practical resource will be helpful in your response to the COVID-19 pandemic.

With every blessing,

Esther Lehmann-Sow

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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 and 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 Channels of Hope

Actions for Faith leaders;

1. **Protect Your Congregation:** See [Guidance for Faith communities & Places of Worship](#) for actions to protect your communities through improved hand and respiratory hygiene and physical distancing practices.
2. **Give accurate information:** Stay abreast of the latest information from the World Health Organisation and your National Ministries of health and use these sources of information - Prevent misinformation spread and discourage sharing of rumours, myths and unvalidated news (“fake news”). Fight myths, by not repeating them. Instead, disseminate true information that is contrary to the myths that you hear.
3. **Planning ahead:** Whilst your community might not be affected by coronavirus currently, things are changing rapidly. When a disease is spreading exponentially, everything can look fine right up to when it looks terrible. It is advisable to prepare a [Continuity Plan](#) for your faith community with some things to do now, additional steps that can be taken later if and when cases are seen in your country, and even stricter recommendations are brought in regarding physical distancing and public gatherings
4. **Connecting and caring for your community:** Ensure safe care of the vulnerable and elderly, support and care for carers in the community, identify communication channels and ensure support for those not connected via telephone
5. **Provide psychosocial support** to families and wider community
6. **Providing spiritual nurture** in the event of physical distancing

Additional Resource CoH materials and Guidance

- [CoH COVID-19 module](#)
- Prayer and scripture
- Resources for children
- WhatsApp messages: (In development)
- [Coronavirus \(COVID-19\) Continuity Plan template](#)
- [Psychosocial support for coronavirus](#) (WHO)
- Risk communication and stigma
- Guidance material

Guidance for Faith Communities & Places of Worship

Introduction

Faith communities and places of worship are at the centre of community and have a central role both in guiding their members towards healthy behaviour change, and provision of spiritual and pastoral and practical support to those in need. Your faith communities and faith leaders will continue to have that central role, but it is very important to adapt the way of working to ensure that people are safe and protected, and rapidly adjust their ways of meeting and worship in accordance with the national guidelines and stage of epidemic. In this guidance you will find information that will help you to:

- Develop a plan for continuity at different stages of the epidemic
- Understand behaviours and practices that you can undertake and promote to protect your congregations and those most at risk
- Understand how to provide spiritual and pastoral care and support safely
- Understand the guidelines with respect to self-isolation, home-based care, quarantine and hospitalisation.
- Understand who is at the greatest risk from COVID-19.
- Ensure that faith & pastoral workers teams maintain their presence as agents of spiritual and pastoral care in a way that protects both themselves and those in need of their help

Remember:

- Pray for people
- Be present(while still ensuring physical distance)
- Be calm
- Be loving
- Help people stay safe
- Help assure the most vulnerable in your community are not forgotten.

Action # 1: Protecting your staff and congregation:

What actions should Places of Worship take to reduce transmission?

1. Promote **good hand and respiratory hygiene, including handwashing with soap** at all gatherings, services, communions or prayer/study meetings, especially those handing out books, having any physical contact or administering eucharist/communion.
 - Ask those attending services to wash their hands with soap as they come into the place of worship, and before touching anyone else.
 - 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 and kitchens and any other appropriate areas. If using jugs to pour water, have volunteers with clean hands handle the jugs to prevent cross-contamination of handles. **Wet-wipes** are not effective in killing or removing viruses. Assure those working with children help them to wash their hands with soap, as well.
 - [Download and print WHO posters on Handwashing](#) and display in all bathrooms and kitchens: these

depict key messages of washing with soap and water for at least 20 seconds or using a hand-sanitiser with minimum 60% alcohol content.

- Remove all reusable towels for drying of hands and replace with disposable paper towels, non-touch hand dryers, or *nothing (for air drying)*.
 - Display the public information poster on other respiratory hygiene practices, and review it often: Always cover your mouth, coughing or sneezing into a tissue: **Catch it** – sneeze into a tissue or into toilet paper; **Bin it** – bin the tissue or toilet paper; **Kill it** – wash your hands with soap or sanitizer; **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, we advise reducing the sharing of any cups, bowls, or plates, and reduce practices that encourage physical contact (touching, including hugs, holy kisses, or handshakes) between people during worship or meetings.
- **When to cancel my services and events:** Follow your national MOH on when and if to cancel services and events. Provided all the above steps are being observed, you may not be required to cancel them early in the epidemic.
 - Suspend shared use of a chalice (common cup) for communion – try other methods such as pre-poured disposable cups/paper cones; using a dropper to administer. Do not encourage 'dipping' of bread using fingers (intinction). Alternatively, **offer Communion only** of consecrated bread/wafer/host, with the priest/pastor alone taking the wine/juice.
 - Suspend handshaking, hugs, holy kisses or other direct physical contact between people during the sharing of the Peace; use other gestures such as 'prayer hands', bowing to one another, or come up with your own creative sign of peace.
 - Suspend physical contact practices during blessings or "laying on of hands", or assure that everyone has washed hands with soap or used sanitizer immediately before.
 - **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 /christening/ordained/blessed or welcomed into the congregation in some denominations parents/godparents should hold them. It is preferable for water to be poured on the candidate's head using a baptismal shell. Use a spoon or similar if using oil.
 - **Suspend** Baptism by Immersion, and foot washing if there is risk for infection by sharing towels or actual touching
 - **Discourage** kissing or touching of objects during the outbreak, including crucifixes and images.
 - **Discourage use or touching of handrails** during communion. For those who need the rails to get up and down (e.g. the elderly), clean them after use.
3. Ensure faith and pastoral workers follow hygiene practices in the preparation of faith activities:
- Ensure **ministers of the Eucharist or communion wash their hands with soap** before and after distributing communion, distributing books or leaflets, etc.
 - **Suspend catering** (teas, coffees etc.) where multiple people touch mugs, utensils and foodstuffs.
 - **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 is able to stand in their doorway for a few minutes, a blessing can be given to them with the priest/pastor standing outside, maintaining

at least one meter¹ distance from the person and caregivers.

- **If coronavirus is spreading in your community (or you do not know) and you are visiting** people at home who have symptoms of coronavirus (e.g. fever, 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 sanitisers or soap for pastoral workers where possible, and have them follow this same guidance.
 - Refrain from passing collection plates around (which can contaminate hands): have people drop donations in a receptacle in a central location.
 - Suspend the use of holy water stoups until after the epidemic is under control.
 - **Wash vestments** worn in services on the hottest water you can 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.
4. **If one of your congregation/community members is unwell or diagnosed with coronavirus (COVID-19):**
- Anyone who may have been in contact with someone with the disease and has fever and a dry cough, or has not but feels unwell and has a fever (high temperature), dry cough, or shortness of breath, should contact a **health authority or telephone advice line**. *Note:* elderly people may have a slightly-elevated fever (99.6 or higher) and still have this disease.
 - **Encourage self-isolation of those with symptoms:** Request **those with a cough, fever or cold symptoms** to stay at home during the outbreak and to not attend worship for a 10-day period. Encourage online or remote participation where possible. 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 not carry on working. Seek appropriate HEALTH AUTHORITY advice. If a person who recently attended a service is diagnosed with coronavirus (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. The following steps are also advised:
 - Some of the congregation may be asked to self-isolate. Advice on self-isolation is given in Annex I.
 - It may be necessary to deep clean the church/mosque and/or suspend services for a short period. MOH will advise on this. Reassure people that you are receiving and acting on MOH advice.

Action # 2: Give accurate information

- **Fight stigma and blame:** The most hurtful response to infectious diseases is how people suddenly treat people with suspicion, or differently than before because of an illness, or even a perceived illness. Speak up on behalf of the vulnerable and the excluded, and respond with acceptance and compassion,

¹¹ WHO Basic protective measures against COVID-19 <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>

while applying the health measures needed. Remember that people can also be infectious before they present symptoms, thus quash any blaming that might occur.

- **Be informed Monitor and follow the health guidelines.** The Centres for Disease Control, the World Health Organization, and your state health department are monitoring the situation closely. Make sure you are in possession, or know where to find, your local health department guidelines. Follow their guidelines. Stay healthy yourself. Model for others how to show up without panic. Basic and accurate information is widely available, but sometimes when anxiety is high, even looking for the basics becomes especially challenging. Providing it can be part of pastoral care.
- Stay aware of the latest information and guidance on the COVID-19 outbreak by regularly referring to the [World Health Organization \(WHO\) main coronavirus website](#) and keep your staff aware of what WV is doing globally programmatically and in your country. Use the WHO website and numbers and information from your National MOH (e.g., of cases, deaths) as your primary COVID-19 source to help people combat the spreading of rumours, misinformation, and myths.
- **Communicate risk responsibly:** Watch the [WHO 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. Stay abreast of your national Ministry of Health guidance.
- **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 air time 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.

Remind them of examples of how leaders in the faith avoided this sort of stigma in the past, and how they treated those who were less fortunate.

Action # 3: Planning Ahead

Whilst your community might not be affected by coronavirus currently, things are changing rapidly. Remember: When a disease is spreading *exponentially* (e.g. two cases become four, four become eight), everything can look fine right up to when it looks terrible. For this reason, and given that this disease is spreading rapidly throughout the world, it is advisable to prepare a [Continuity Plan](#) 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 and private gatherings over a certain size), and even stricter recommendations (e.g. staying at home as much as possible, worshiping privately in each member’s home versus having group worship) when the disease is spreading easily and additional physical distancing measures are needed.

- Develop a [Coronavirus Continuity Plan](#) to ensure continued ministry.

Action # 4: Connecting and caring for your community

When diseases strike, faith communities often carry a huge burden of community-based care for the sick. As a leader, it is important that you ensure that they are prepared in terms of information, protective equipment and accurate information about the correct approaches for caring for infected persons.

- **Consider who are those most at risk:** Ensure care of the vulnerable, the elderly, and people who have more trouble fighting off disease (e.g. HIV+), and those with existing medical problems that put them at higher risk of dying from coronavirus (e.g. those with high blood pressure, diabetes, or heart problems). 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: They should try to avoid visitors, but can receive donated food that is dropped off at their doorstep. Congregation members might be able to collect essential supplies and medicines for the sick. Encourage the congregation to especially consider the needs of the elderly who are isolated from their families, so they have enough food, medicines, water access at home. Note: 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 infect them with the disease.
- Support and pray for them via telephone, including healing ministry or last rites.
- **Food supplies and donations:** The most vulnerable may struggle to get access to supplies, especially those who cannot work and are in poverty. Consider food-banks, drop-in centres, community support groups, and dropping off food or supplies at their doorstep.
- **Connecting people - Find ways to make community.** 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. Pastors who convey leadership and imagination can pull people together in organized, caring, and sustainable ways. *If physical distancing measures are brought in, this could mean that gatherings are discouraged where people have to stand close to each other. Consider meetings out of doors (standing a meter or two apart), and the use of telephone calls, smart phones 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.*

Action # 5: Provide psychosocial support to families and wider community

- **Caring for the most vulnerable:** Those most vulnerable who usually suffer severely from coronavirus (and are more likely to die from it) are people over 60 years of age, those with chronic health issues such as respiratory illnesses (including asthma and COPD), heart conditions and diabetes, and those living with other infectious diseases (e.g., HIV and TB) and conditions that make someone's immune system not work well (like HIV). During the coronavirus outbreak, many homes for the elderly are asking people to stay away and to not visit until the outbreak has passed since the old and the frail are at a much higher risk. In the countries affected prior to March 16, 2020, the mortality rates from this disease were often under 2% in people under 60 years of age (and much, much lower in children), but about 8% in people 70-79 years, and about 15% in people 80 years or older. We need to do more to protect older people.
- **Caring for the caregivers:** Ensure you can balance the wellbeing of staff and volunteers with the need to offer support to the community, particularly our most vulnerable groups. Keep tabs on 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 own 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. But 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 own energy and put your hope in God.
- **Remain calm and be a “non-anxious presence.”**² Stay calm. Be emotionally present but free from anxiety. This will build trust and provide the right kind of care in any crisis. For us to show up non-anxiously (as caregivers, faith community or staff of a humanitarian organization) means managing our own feelings. We should neither try to flee the situation nor flood it with our own emotions or anxieties. People will borrow our calm and compassion to assist them in reducing their own anxieties.

² Eileen R. Campbell-Reed <http://christiancentury.org/blog-post/guest-post/10-guidelines-pastoral-care-during-coronavirus-outbreak>

Our compassionate care should be a beacon of light, a Channel of Hope in this time – whilst at the same time be a way that we communicate accurate information.

- **Provide psychosocial support for children.** Be present with and listen to children. Provide structure, routine and clarity about what is happening around them. Provide information to children in age-appropriate ways that they can understand.
- **Listen in love:** No matter what turn a crisis takes, the most powerful gift we can offer is to listen. People need compassionate listening when they feel overwhelmed with the uncontrollable circumstances of a crisis. Avoid lectures, criticism or judgement. Remember our role is to communicate accurately, and allow people to make their own choices.
- **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 learned from Paul and others before us that we have hope particularly during our hardest times.
- **Keep values alive.** This does not mean being dishonest about a crisis and its threats. It does mean we keep leaning into God’s sustaining presence, 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. Yet in times of trauma and crisis, using too many words can sound hollow—and prayers can come off as judgment or preachy advice. In these times, perhaps the better path is the prayer of participation. 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 coronavirus, 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 who is bereaved will be important. [Download here the WHO guidance on mental health considerations for coronavirus](#) and on [providing psychosocial support](#). When talking about death, or talking to people who are afraid, confront the issue with calm – don’t suppress it. Help people to understand that the death due to COVID is due to the disease, and health conditions, and alleviate self-blame or blaming the victim.
- **Providing pastoral care for the sick and dying:** Do not visit hospitalized **coronavirus 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 yourself are unwell. There is no reason you should not visit patients in care homes or other facilities if they are unwell for other reasons, but ensure you respect facility hygiene guidance, and call ahead if you can. If giving communion, observe the spiritual practices guidance given above.

Action # 6: Providing spiritual nurture

- **Be present, even if it’s not in person.** Physical distancing is a key way of preventing the spread of this disease, 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, so use them — with sensitivity and respecting people’s privacy — to offer your support. In World Vision, we have CoH WhatsApp groups, Facebook and email contacts. We also have various forms of mobile technology in Health with caregivers’ groups. We suggest you utilize these various forms of mobile technology to stay in contact with people and groups while ensuring that all messaging is true, helps alleviate fear, and prevents stigma.
- **Reduce overcrowding:** If your worship space is prone to overcrowding, consider offering additional services and limit the head count in each service by encouraging attendance at different times. Consider

the options for providing services outside where people can stand further apart. There is evidence that meeting in outdoor spaces (and keeping a distance) may help limit the spread of viruses (e.g. for prayer groups and Bible study or Sunday school this could be preferable).

- **Creative & digital outreach:** If wider physical distancing measures are recommended by the health authorities, think about ways to spiritually support your community during this stressful and frightening time. Can you use newsletters, email, text messages, community radio or digital outreach methods to reach people? If your government advises against community gatherings, can you enable people to **access resources digitally** in the event that they are unable to get to church/mosque? What other ways can you help them to do this? For example, you may be able to:
 - Live stream services
 - Do services over community radio
 - Record prayers and sermons at home via video/voice recording and share via SMS or WhatsApp

Here is a [blog which outlines](#) low cost or free ways to livestream a sermon, service, event or prayer. While this may seem difficult at first, look at it as a challenge and an innovation: Using these new “channels” now may help you to develop new ways to better communicate with those in your faith community and beyond in the future!

- **Consider the particular needs of children:** Develop Sunday School lessons. Ensure children and youth can virtually connect with each other or find other means of continuing to engage with their peers.
- For Christian churches, here is a list of [RELEVANT PRAYERS AND SCRIPTURE](#) from the Anglican church.

Additional Resource and Guidance:

- **Channels of Hope COVID-19 module**

[A Channels of Hope \(CoH\) COVID-19 module](#) is currently being field tested in WVDRC and WVAngola. The module is developed to be an additional module to support any existing Faith & Development (F&D) training curriculum in the field. These materials are a working document and will be updated as new information and materials are available.

- **Prayer and scripture guidance**

The WVI team developed [Devotions for Times of Trial and Challenges](#) which will be shared with all internal staff and faith communities. The organisation also held a [Prayer Vigil](#) to ensure that all staff feels connected during this time.

- **Resources for Children**

[Child Friendly Explanation of Coronavirus](#)

- The Alliance for Child Protection in Humanitarian Action, Technical Note: Protection of Children during the coronavirus Pandemic, Version 1, March 2019
- *More Resources Under Development*

- **WhatsApp messages**

The WV F&D team have leveraged their (potentially) 80,000- strong cadre of trained facilitators to spread accurate information and guidance about how to deal with the COVID pandemic. With each successful training, graduates are added to WhatsApp groups. These trained faith leaders can then communicate further with their church/community members and Community Hope Action Teams (CHATs)

On Saturday 14 March 2020 we have started sending messages focusing on:

- Support for vulnerable populations (the elderly, isolated and those at risk)
- Effective behaviour change communication
- Pastoral care for those affected by the pandemic
- COVID-19 specifically to these groups.
- Scripture based response
- [Prayer Apps](#)

- **COVID-19 Continuity Plan Template**

This is currently *under development*

Additional resources for planning can be found at:

- [Church/community Planning Template](#)
- **Psychosocial support for coronavirus (WHO)**

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

- **Risk communication and stigma**

This is currently *under development*

- **Guidance material**

- **World Vision International.** [Rapid guidance for prevention and containment](#)
- **WHO.** [Key planning recommendations for mass gatherings in the context of the current COVID-19 outbreak \(Interim Guidance\)](#)
- For consideration for nutrition programmes conducting mass gatherings (e.g. during distributions organised by supplementary feeding programmes)
- **UNICEF. COVID-19: [What Parents Should Know](#).** (Accessed 13 March 2020) General information for parents, including 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.** [Home care for patients with suspected COVID-19 infection presenting with mild symptoms and management of contacts.](#) (Published 4 February 2020) Version 1 - 13 March 2020 6
- **Public Health England:** [Stay at home: guidance for people with confirmed or possible coronavirus \(COVID-19\) infection](#)
- **WHO.** [Getting your workplace ready for COVID-19.](#) (Published 3 March 2020)
- Describes precautions to take to prevent the spread of COVID-19 in the workplace, including during meetings.
- **WHO Novel Coronavirus Information Landing Page:** Information and guidance from WHO, including sitreps, technical guidance and training.
- **UNICEF** [A guide to preventing and addressing social stigma](#)

Poster visuals:

- [How to Wash Hands](#)

References:

1. WHO Basic protective measures against COVID-19 <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>
2. [10 Guidelines Pastoral Care During Coronavirus Outbreak](#) by Eileen R. Campbell-Reed
3. [Coronavirus \(COVID-19\) guidance for churches: Church of England](#)
4. [WVI Faith and Development Pray Vigil Prayers 19032020](#)

For any additional information please email: channels_of_hope@wvi.org