

The New Coronavirus Disease 2019 (COVID-19)

SUMMARY OF RISKS, PREVENTION, CONTROL

Opening Prayer: From the Iona Community, a prayer written for these COVID-19 times:

*God our challenger and disturber,
help us to confront
all that makes for death and despair
in our lives, our communities, our world.
May we never lose sight
of the possibility of transformation
and be continually surprised
by people who believe in one another.
Gathered and scattered, God is with us
and so we are with one another.*

Preamble (United Methodist Church, Social Principles, 2016)

The Social Community: Right to Health Care

Providing the care needed to maintain health, prevent disease, and restore health after injury or illness is a responsibility each person owes others and government owes to all, a responsibility government ignores at its peril. In Ezekiel 34:4a, God points out the failures of the leadership of Israel to care for the weak: “You don’t strengthen the weak, heal the sick, bind up the injured, bring back the strays, or seek out the lost.” As a result all suffer. It is unjust to construct or perpetuate barriers to physical or mental wholeness or full participation in community. We believe it is a governmental responsibility to provide all citizens with health care. We encourage hospitals, physicians, and medical clinics to provide access to primary health care to all people regardless of their health-care coverage or ability to pay for treatment.

Introduction

COVID-19 is the name for a new disease infecting people around the world. It is from a group of animal diseases called “coronaviruses.” To protect our loved ones and strangers, the world must cooperate to prevent unnecessary suffering and loss. Scientists believe it began late in 2019 and by early 2020 had caused much sickness and death in China. From there, this new disease has travelled around the world to nearly every country. As of this writing (21.4.2020 @ 2pm UTC-5) the Johns Hopkins University Coronavirus Resource Center **dashboard** shows there have been approximately 2.5 million cases confirmed by testing, with more than 175,000 deaths in 185 countries.

The more tests conducted on people, the more cases that are found. It is increasing rapidly. However, the control measures instituted by governments, particularly China and South Korea, have shown good success in slowing the pandemic and preventing new cases. By working together and making wise choices, people everywhere can help stop the virus’ transmission.

Section 1—Who Is At Risk?

This is a new disease, so nearly everyone is susceptible to it. So far, studies have shown that eight out of ten of those infected will have mild or no noticeable symptoms. In other words, many will not feel ill and will not seek medical care. While this is good news, it is also a *dire warning*. Those who don’t feel ill or who ignore their symptoms as being a temporary inconvenience, still remain infective and can pass the disease to other, more vulnerable persons. Also, since the infection goes unnoticed, there may be many people infected that we don’t know about. For now, we only know about those who have been tested.

Of the two out of every ten people who do have severe symptoms, the vast majority will need intensive care by hospitalization. Currently, medical doctors estimate that four or five out of every 100 confirmed cases will die from

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COVID-19. All age groups are at risk of infection and serious illness. So far, those under age 50 are more likely to have no or mild symptoms, *but they can still spread the disease*. Only one in twenty children will have serious illness while two of ten elderly will have a serious complications. Nevertheless, in Europe and the USA, as many as one of two infected people under age 50 will require hospitalization. Studies suggest that men are more at risk for several complications than women, and this could be due to men having more underlying health conditions.

Persons over age 60 are most at risk, and this risk increases for every decade of age. For those over age 80, one or two out of every ten infected will die. However, most of the deaths occur in older persons who have other serious health issues like heart disease, diabetes, high blood pressure, lung disease or other infections.

Perhaps the biggest health risk factor is breathing, respiratory illness or prior damage to the lungs. This includes people with damaged lungs due to air pollution, cigarette smoking or vaping, and chronic obstructive pulmonary disease (COPD) due to many causes, including occupational risk of having worked around inhaled substances like chemicals, petrol, asbestos, long-term exposure to charcoal smoke when cooking, etc.











The cautious estimate is that 95 to 99 out of every 100 people are susceptible to COVID-19 and need to take precautions. Taking precautions and changing behavior not only reduces one’s own risk of infection but protects others with whom an infected person may come in contact. It is estimated that every infected person infects two others, . As a result, the total number of infected people in a society can double very rapidly (every few days).

Section 2—What Are the Symptoms?

Medical doctors call this type of disease a *respiratory illness* because the symptoms involve the upper respiratory system (mouth, nose, throat) and the lower respiratory system (lungs). Many illnesses we are familiar with like common colds and influenza (“flu”) are such diseases. The symptoms of all these diseases can be very similar.

However, COVID-19 is typically presenting with a high temperature (sometimes with headache and chills), shortness of breath and a dry cough. Each of us reacts differently to an illness, so there is a lot of variability in individual response. After exposure, it takes one to fourteen days for symptoms to occur, but usually symptoms occur within five to six days. *New reports suggest that early signs of infection are a reduced sense of smell and taste. Also, digestive symptoms occur in about five of ten people infected, such as a lack of appetite and diarrhea.* Figure 1 compares the symptoms of COVID-19 (coronavirus) with colds and flu.

Figure 1.

Symptoms	Coronavirus <small>Symptoms range from mild to severe</small>	Cold <small>Gradual onset of symptoms</small>	Flu <small>Abrupt onset of symptoms</small>
 Fever	Common	Rare	Common
 Fatigue	Sometimes	Sometimes	Common
 Cough	Common* (usually dry)	Mild	Common* (usually dry)
 Sneezing	No	Common	No
 Aches and pains	Sometimes	Common	Common
 Runny or stuffy nose	Rare	Common	Sometimes
 Sore throat	Sometimes	Common	Sometimes
 Diarrhea	Rare	No	Sometimes for children
 Headaches	Sometimes	Rare	Common
 Shortness of breath	Sometimes	No	No

Sources: World Health Organization, Centers for Disease Control and Prevention

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As the chart shows, a key difference is that many of the upper respiratory symptoms (a runny nose or sneezing) are usually *absent* with COVID-19. If a person has the combination of symptoms for COVID-19, the best course of action is to get tested if the medical professionals advise. Your local healthcare system will decide how to handle testing.

Section 3—How Is COVID-19 Transmitted?

One of the features that makes COVID-19 so infective is that there are several ways it can be transmitted. First, the virus can become airborne (often called “aerosol transmission”) and survive in the air for several hours. However, the COVID-19 droplet is heavy and usually falls onto a surface quickly. It can be inhaled if one is standing nearby when someone coughs, sneezes or speaks. Second, when people cough or touch their faces and then other objects, the virus can come in contact with the surfaces of objects around us. Early research suggests that the virus can remain infective for hours or days depending on the type of surface. Figure 2 shows how long scientists believe the virus can live on different types of surfaces. *It has been found to survive on cruise ships for over 17 days.*

Figure 2.



Finally, there is evidence that COVID-19 can also be transmitted by the fecal-oral route. This is why hygiene, and handwashing in particular, is so important. In Section 5, we discuss how to prevent transmission and protect ourselves and our loved ones.

Section 4—How Do Medical Doctors Treat It?

Presently, there are few specific treatments for COVID-19. If the patient requires hospitalization, then “aggressive supportive care” is begun and most people will respond favorably. Scientists are working on several treatments which may become available very soon. Most of these are prescription drugs that have been designed for other illnesses. Medical doctors are finding these drugs may also be effective against COVID-19.

Your medical professionals will know about these treatments and they should only be administered under their care. For instance, *there are concerns that ibuprofen makes COVID-19 worse and should be avoided.*

Section 5—How Do We Protect One Another?

There are many common prevention strategies for infectious diseases that individuals can take personally to prevent COVID-19. Every strategy requires changes in behavior and routines to some extent and will vary according to local customs and traditions. Many are difficult to accomplish but every effort should be made.

It is important to emphasize that no single protection will be complete. To reduce risk and exposure, it is essential to use all strategies to the extent possible. Additionally, each country may mandate control measures by law and those should be obeyed. We cover group-control strategies in Section 6 below.

On an individual level, here are the common ways to prevent transmission (See Figure 3):

- 1. Basic hygiene and handwashing.** Since viruses can live on surfaces and objects for some time (see Figure 2), frequent handwashing prevents infections. Practice good hygiene like coughing or sneezing into the bend of your elbow or a tissue, handwashing much more frequently than usual—especially when you feel you’ve been exposed to objects or are touching or caring for others (like children or the elderly)—and after sneezing or coughing, ; before preparing and serving food and after contact with animals or pets.

Proper handwashing requires vigorous scrubbing for 20 to 30 seconds with soap and water of the palms, back of hands and fingers, between fingers and under fingernails. **Tip:** To wash for the required time, sing a verse of your favorite hymn, popular song or national anthem while washing. Hand sanitizers are inferior to proper handwashing. If you use them, make certain the label indicates an alcohol content of 60 percent or greater.



- 2. Face masks and hand gloves.** Some countries require the wearing of facemasks in public by law. The effectiveness of these masks will vary by the material used to make them and by the fit on an individual’s face. Typically, masks are more effective at preventing the spread of the virus from an infected wearer to his or her surroundings than protecting an uninfected person who is wearing a mask. The highest quality masks are recommended but often expensive and in short supply. Global companies are working overtime to produce and distribute more masks. During the shortfall, there are poorer quality masks that can still be effective. For instance, the Centers for Disease

Control and Prevention website has tutorials on sewing homemade masks. The CDC recommends 100 percent cotton cloth. Even materials like pillowcases and t-shirts can be used. These masks will have limited effectiveness and need to be discarded more often or cleaned by washing frequently. The link to the CDC instructions and a pattern for making these homemade masks can be found [here](#).

Using latex hand gloves is important if your work or job requires contact with people or handling objects. If latex gloves are in short supply or if you have latex allergies, some protection can be had with vinyl, nitrile, plastic or rubber gloves. Disposable gloves of any type should be changed often and disposed of so that other surfaces and spaces do not become cross-contaminated. All gloves, even latex, can be contaminated like any other object and need to be replaced frequently. These latex gloves may be in short supply due to the large needs of healthcare professionals who are working with many people and handling infectious materials. Gloves made of other materials like cloth can be protective but must be cleaned thoroughly and regularly as some fabrics allow the COVID-19 virus to live in the glove material.

3. Cleaning and Disinfecting surfaces and objects; doing laundry. The CDC has issued these guidelines for cleaning and disinfecting:

- i. When disinfecting space that was used by someone who has been infected:
 - Close off the areas used by the sick person
 - Open outside doors and windows to increase air circulation
 - Wait 24 hours before cleaning and disinfecting
- ii. When cleaning and disinfecting:
 - Wear disposable gloves and gowns for all tasks, including the handling of trash
 - When removing the gloves and gowns, take care to avoid recontamination
 - Wash your hands often, especially immediately after removing gloves
 - Clean all surfaces with soap and water, especially high-touch surfaces like door handles, light switches, faucets, toilets, countertops, phones, etc.
 - Disinfect with diluted household bleach solutions appropriate for the surface material
 - Make a bleach solution by mixing five tablespoons (1/3rd cup or 2.6 ounces) of bleach per gallon (3.75 litres) of water
 - Use alcohol solutions with at least 60 percent alcohol
 - Follow the instructions on the label of household cleaners and disinfectants
 - For soft surfaces like rugs, carpets and drapes, use soap and water and launder when possible
 - For electronics such as touchscreens, keyboards, phones and remote controls, follow the manufacturer's instructions; usually, an alcohol-based wipe or spray is effective
 - For doing laundry, wear disposable gloves; don't shake out dirty laundry; use warm or hot water temperature (take due care not to scald/expose skin to high temperatures)

4. Avoiding Direct Contact. This protective behavior is often the most difficult. Typical social greetings like hand shaking, kissing the cheeks and hugging can transmit infections. It is better to substitute other forms of greeting like “elbow bumping” or other nods and gestures of civility. *Furthermore, studies have shown that you can become infected by being around an infected person who has no symptoms and with whom you have no touching or sharing of objects.*

Many governments are advising a minimum distance for people to separate themselves, usually six feet (two meters) apart from one another whenever possible. This is called “social distancing” and it is one of the most effective protections we have.

Section 6—What Group-Control Strategies Can Protect Our Churches, Organizations and Societies?

Often local and national governments will implement laws and regulations to prohibit gatherings in order to reduce public contact in hopes of reducing transmission. Other organizations should ask their members to voluntarily reduce their contact with other people even if they don't appear to be ill. Below are some common group strategies:

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1. **Quarantine.** Typically, a quarantine is used to separate infectious people from the uninfected by confining the infected person or persons to space not shared with others. Sometimes a government may legally require infected people to remain in their homes and refrain from going out in public.
2. **Self-isolation.** Self-isolation generally refers to persons intentionally reducing their risk of exposure by limiting or eliminating social contact. This is very difficult, especially in crowded households, for the ill and elderly. For people who live with those at higher risk for severe complications from COVID-19, this is especially important.
3. **Social Distancing.** Social distancing is intentionally reducing one's risk of exposure by increasing the space between people, whether inside or in public. Most experts recommend you maintain a minimum of two meters (six feet) distance from the other person. See Figure 3.

Figure 3.

What is social distancing?

Social distancing is the act of deliberately increasing the physical space between people to avoid spreading illness.

Here are some safe practices for social distancing:

AVOID

- Gatherings larger than 10 people
- Interacting with people age 65+
- Concerts
- Theaters
- Sporting events
- Gyms
- Retail stores and malls
- House guests
- Having non-essential employees at your home (cleaning personnel & maintenance)
- Air and rail transportation

CAUTION

- Visiting restaurants for take-out orders
- Grocery stores
- Pharmacies
- Public parks
- Religious services

GO AHEAD

- Take a walk or go on a hike
- Ride your bike
- Yard work and house chores
- Enjoy a good book
- Listen to music, a podcast or an audiobook
- Cook a healthy meal
- Teach yourself how to bake
- Write letters to friends/family
- Practice yoga and/or meditation
- Play board games or cards
- Video chat friends/family
- Watch a movie you haven't seen yet

4. **Avoiding groups.** Most experts recommend avoiding or prohibiting large gatherings and severely limiting group sizes to fewer than 10 people.

Figure 4. Five Key Reminders



Please see the Frequently Asked Questions (FAQ) Section for more specific information.

Please make every effort to share this information with other faith communities and civil society organizations. This disease attacks everyone without preference and you cannot protect your loved ones and your communities unless everyone is informed and working together to reduce exposures and stop the spread.

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2. Disclaimer: (1) All content in this documents is based on (a) the published, fair-use, public websites of the World Health Organization and the Centers for Disease Control and Prevention, or (b) private information (pre-publication and peer-vetted) by various scientific working groups shared for the purposes of general knowledge and dissemination due to a sense of urgency; (2) Because COVID-19 is a new disease which is moving very fast and new information is being learned daily, the content is provisional by nature; and (3) Leaders who shared this information must make aware and emphasize that concerning care, diagnosis, treatment and prevention all individual decisions should be made in consultation with their personal healthcare providers.

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