



## What Religion Can Offer in the Response to COVID-19



*Sacristan Michael Seewar prepares the altar for a livestream Easter service at Saint Mark's Episcopal Cathedral in Seattle, Washington, April 12, 2020 (AP photo by Elaine Thompson).*

Katherine Marshall | Tuesday, May 26, 2020

An article published earlier this month in the largest English-language newspaper in Bangladesh, the Daily Star, inadvertently revealed a lot about different perspectives on religion's role in society, including during the coronavirus pandemic. The writer argued that religious actors play a "vital stabilizing role" during

such global crises and can “offer a beacon of hope” amid “the ravages of this pandemic.” But in the comments, a reader took a starkly different stance with what he called “a rude question”—a few of them, in fact.

First, can faith and science go together? Second, how can faith actors help when they fight among themselves? Third, can faith actors think logically and rationally about the pandemic? The comment went on to say that having fixed beliefs “predetermined” by some higher power made one “irrational.” It concluded with a blunt suggestion that the article’s author “keep your religion to yourself and don’t mix it up with common-sense and science, especially in these difficult days and when the whole world is in turmoil with COVID-19.”

The exchange shed light on two diametrically opposed perspectives about what religious institutions and beliefs have to do with the current global pandemic, and how they matter for policy. On one side, the long history of pandemics demonstrates that religious factors are integral parts of the story every time, especially since religious traditions, beliefs and institutions play important roles in everyday life for the majority of people worldwide. On the other side are skeptics who see faith as opposed to science, religious worldviews as sharply separated from secular norms and “religious literacy” as a bias that distorts both data and anecdotes.

Religion featured prominently in the early reporting on the coronavirus pandemic, often in a negative light. In South Korea, it became clear by late March that gatherings at the Shincheonji Church of Jesus in the city of Daegu accounted for 5,080 confirmed cases of COVID-19, more than half the country’s total. A gathering of the Muslim missionary group Tablighi Jamaat, which hosts hundreds of preachers at its headquarters in New Delhi, was linked to nearly 30 percent of known cases in India. Other Tablighi gatherings were tied to outbreaks in Malaysia and Pakistan. Clusters of infection elsewhere in the world have also been linked to specific religious communities.

Yet at the same time, public health authorities and religious leaders were actively working together on effective responses to the pandemic. As the need to enforce physical distancing became central to public health, adapting or limiting religious gatherings emerged as an obvious need. These public-faith partnerships also drew on lessons from earlier pandemics, notably HIV/AIDS and Ebola, where religious engagement was vital.

## ***Habitual distinctions between faith and science exaggerate differences at a time when inclusion and bridges are urgently needed.***

Take a series of discussions beginning in early March led by the World Health Organization's new office for providing public information on the pandemic, which explicitly included religious leaders. The office made a draft set of guidelines for faith communities available for comment, prompting lively online discussion before it was finalized. In the months since, as country after country issued strict public health directives, many other organizations developed guidelines for religious communities and leaders, as well as numerous articles, webinars and other faith-directed resources.

It became increasingly clear that vastly diverse religious communities—like other segments of society—were adjusting, willingly or grudgingly, to the shocking disruptions the coronavirus had wrought on virtually every facet of normal life. It also became apparent that religious leaders and faith groups had distinctive insights to share and practical roles to play.

For those of us tracking and analyzing religious responses to COVID-19, these developments raise several key questions. What contributions—positive and less so—are religious communities making during this pandemic? What lessons can we learn from past global health crises, and the current one? And how might

policymakers better integrate religious voices in public health, as well as in the economic and social recovery to come?

## **Faith Engagement During a Pandemic**

A common trap that policymakers fall into is roping off religious communities from the general public, as though they constitute a separate entity or “sector.” In fact, religious communities are integral parts of societies, economies and polities. More than 80 percent of people around the world adhere to a religion, according to a major study in 2012 by the Pew Research Center. Viewing religion as a single “sector” also obscures the complex and diverse nature of these communities, and how they relate to the state. The Vatican’s political, legal and cultural positioning is, for example, rather different from that of a small Buddhist temple in Thailand or a mosque in Indonesia.

Still, there are commonalities in the way the pandemic has affected them. Broadly speaking, it has interfered with three aspects of religious life: congregation, religious rites and pastoral care, and charitable work. All of these realms reveal how painful it can be when religion is left out of pandemic plans. But they also demonstrate the creativity and generosity of religious leaders, who have worked to adapt to the circumstances, finding ways to practice faith and serve their communities even under exacting restrictions.

The high-profile religious gatherings that captured headlines in early March quickly became “super-spreader” events in the lore and realities around the coronavirus pandemic. Non-religious gatherings, like sporting events and concerts, posed similar risks. So it made sense in terms of public health for authorities to move quickly to limit large gatherings. But congregation, of course, is a central part of the ethos of many religious communities. Efforts by public health officials to limit events like Easter church services, Ramadan Iftar celebrations and Passover Seders have led some adherents to see these measures as an imposition on their freedom of religion, creating significant tension between the public and the state. For example, Tony Spell, the pastor of the Life Tabernacle Church in Louisiana, made headlines when he refused to cancel

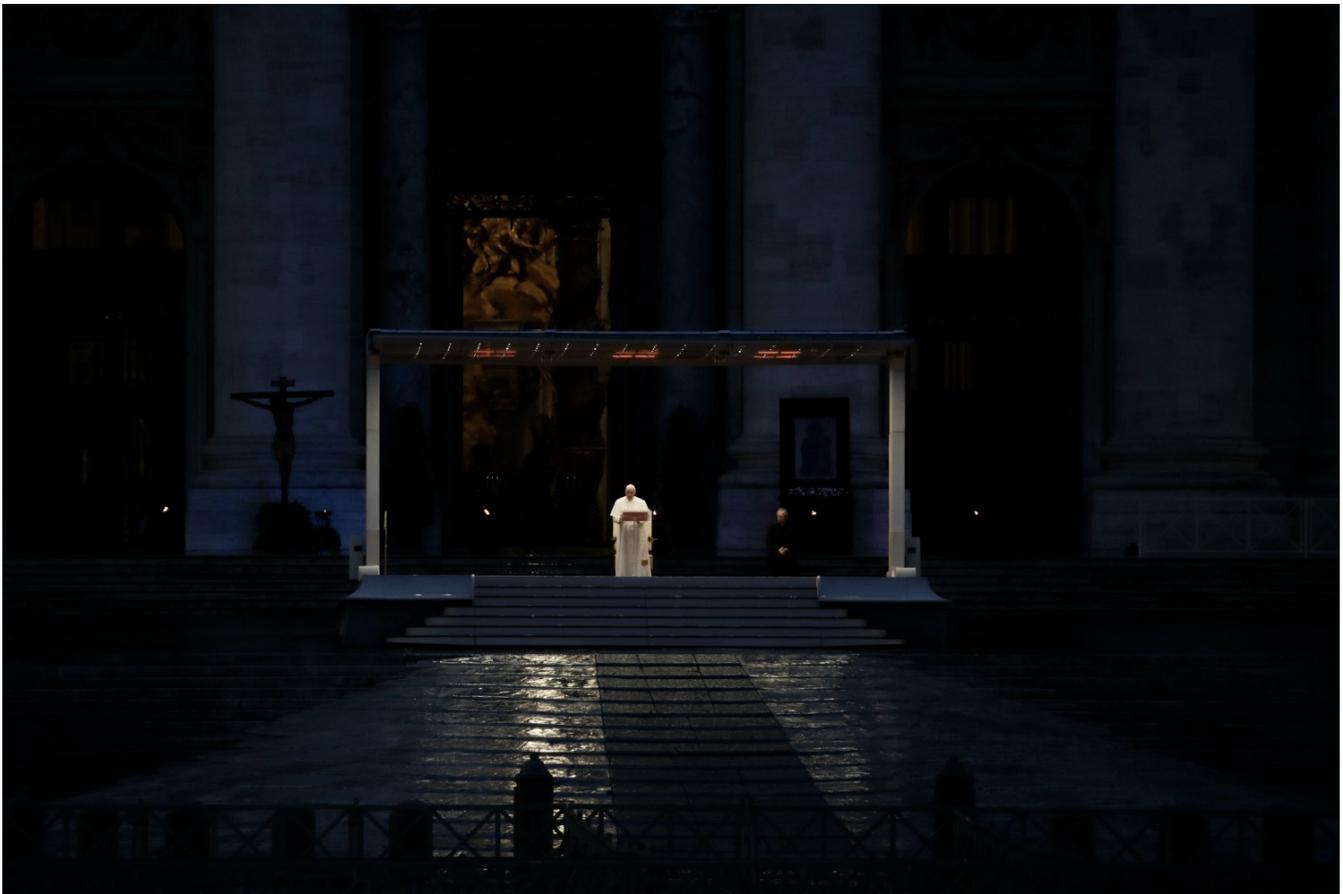
events that drew hundreds of worshippers, defying state orders to limit the size of public gatherings to 50 people or fewer. Sometimes, confrontations like these have even resulted in threats of violence.

Yet only a minority of religious leaders seem to have flatly rejected prohibitions on gatherings; large majorities of people support them. Around the world, individual houses of worship—churches, mosques, temples—have chosen to close in response to the pandemic, and popular pilgrimage sites have, too. Officials in Saudi Arabia are urging Muslims worldwide to delay making plans to perform the hajj, the annual pilgrimage to Mecca that brings millions of foreigners to the kingdom each year. The Vatican is closed to the public. The image of Pope Francis speaking alone from the Vatican in a plaza usually filled with thousands of worshippers underscored the serious measures religious leaders are taking to limit mass gatherings because of COVID-19.

To reduce the need for in-person gatherings, religious leaders are coming up with innovative and creative options that have inspired their communities to accept and adapt to the new reality. Pew data released in March indicates that most Americans who attend religious services regularly have transitioned to online observance. Some pastors now offer drive-through church services and host fellowship meetings over Zoom, while some Christian communities offer virtual baptisms and even weddings.

Others have found ways to adapt practices instead of simply moving them online. Experts on Jewish law have outlined adjustments to religious rituals—reducing, for example, the number of people required to perform a Jewish marriage. Islamic scholars have called for at-home prayers during the holy month of Ramadan, a dramatic change from the typical communal prayers and meals to break fast. And, heeding public health guidance to refrain from physical contact, religious institutions have adapted time-honored practices including choral singing and the sign of peace—a traditional Christian greeting, usually a handshake or an embrace during a service—so that where in-person congregations are held, people do not need to touch to participate.

Yet for some religious rituals and rites, it's been harder to adapt. The coronavirus presents barriers to caring for the sick and to performing certain death and burial rites—core religious practices that are especially painful, and especially needed in a pandemic that has already claimed nearly 350,000 lives. There are few ready substitutes. Clerics have found it difficult to give spiritual support and guidance to the sick, especially to those who are quarantined in hospitals. And after their loved ones suffer lonely deaths, families and communities in different corners of the world face restrictions on traditional mourning rites. Many funerals—usually a time for communal fellowship in the face of loss—are conducted with few, if any, people physically present.



*Pope Francis delivers a prayer in an empty St. Peter's Square in the Vatican, March 27, 2020 (AP photo by Alessandra Tarantino).*

Public health measures for safe burial practices have already clashed with traditional rites and what is considered proper and dignified respect for the dead. In Sri Lanka, authorities made cremation mandatory for deaths linked to coronavirus, despite the

fact that cremation is forbidden in Islam, aggravating already sensitive Buddhist-Muslim tensions. Treating the dead with dignity, a concept inherently grounded in many religious and cultural traditions, has emerged during the pandemic as an essential priority for human rights.

The pandemic also complicates Jewish and Muslim burial practices of washing and shrouding the body before burial, given concerns about COVID-19's transmission—but here, there has been some innovation. In Israel, ritual washing is now completed in full personal protective equipment, and bodies are wrapped in plastic before burial. Some Islamic scholars issued guidance on body-washing to explain how the ritual could be conducted safely while still following Islam, reconciling government policies with traditional burial practices.

The pandemic's impact on religious groups is also felt beyond the spiritual realm, affecting the broader community that benefits from, or even relies on, religious charity. The importance of caring for the most vulnerable is deeply embedded in many traditions, and many religious communities provide essential social services like child care and hunger relief. Closing a house of worship to prevent the spread of the coronavirus can put the beneficiaries of these programs in serious danger.

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“If we don't stay open, these kids are going to go hungry,” Idris Abdul-Zahir, an imam whose mosque in Philadelphia runs a food distribution program for low-income students, told *The New Yorker*. “The threat of COVID-19 is not as real for some people as the threat of hunger.” Abdul-Zahir eventually closed the mosque for religious

services in late March, but he planned to continue the school lunch program.

Even as such existing charitable networks struggle to carry out their activities while complying with social distancing and sanitization regulations, the pandemic is growing, and need is growing, too. Religious leaders and faith-inspired organizations have mobilized to respond to the pandemic's impact on vulnerable communities, with volunteers and financial resources to meet the needs of the sick, the elderly and poor communities. In India, for example, Buddhist, Hindu, Muslim and Sikh organizations are working to address food insecurity, a key concern given predictions that global hunger will double due to COVID-19. Faith leaders, including in the United States, are also aiding the elderly and people with disabilities—often homebound populations at higher risk for severe illness if they contract the coronavirus—by delivering groceries and providing other assistance.

Above all, religious groups help people find meaning and maintain hope in the face of threats and disrupted lives. When people are afraid and lonely, they seek comfort and explanations for their suffering, as well as glimpses of hope. According to a recent Pew survey, a quarter of Americans say their faith has become stronger because of the pandemic. Greg Epstein, the Humanist chaplain at Harvard University, has observed that people find comfort in knowing that they are enduring the current crisis together, and in their common vulnerability. Even as the pandemic highlights injustices and wrongs in society, people look to faith teachings for inspiration for the path forward. Religious traditions remind people that their forebears were tested and emerged stronger from past trials, providing some reassurance that they will in this crisis, too.

## **The Barriers to Better Public Health Policy**

Because of the common separation between governments and religious organizations, it can be easy to overlook the significant role that religious leaders and groups have played in responding to pandemics before, and in providing health care overall. COVID-19 differs from HIV/AIDS and Ebola in significant ways—the coronavirus, for example, has a much shorter incubation period

than AIDS—but there are important similarities. The spread and treatment of all of these diseases has been exacerbated by inequalities in health care, lags in appreciating the role of religious leaders in shaping public attitudes and weak mechanisms to engage different communities. During previous outbreaks of HIV/AIDS in the U.S. and around the world, and of Ebola in Central and West Africa, the strengths of religious communities were rarely incorporated into public policy.

The successes and failures of these pandemic responses offer five pertinent lessons on why barriers between religion and government can detract from effective public policy, as well as positive paths toward constructive engagement during the COVID-19 pandemic.

First, with their large communication networks and deep knowledge of local communities, religious leaders are instrumental in conveying messages during times of crisis. Public health messages by necessity are short and direct, simply urging people to “stay home” and “wash hands,” for example. Religious leaders can draw on theology and stories to transmit even basic public health suggestions, like hand washing, in ways that people can more easily accept, interpreting them both for tradition and context. They can model constructive behaviors—by respecting quarantine requirements, for example. And, facing threats of social tension or even violence, leaders can appeal to the “better angels” in people, invoking compassion and caring rather than anger and retribution.

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They can also, of course, convey inaccurate and false information. Some religious figures, mostly on the fringes, have promoted dubious cures for COVID-19 or apocalyptic visions that have heightened fears and distrust during the pandemic. But equally,

when rumors, misunderstandings, scapegoating, deliberately false information and conspiracy theories are linked to religious beliefs, faith leaders and communities have special responsibilities to dispel and correct misinformation. Ultimately, religious institutions have great capacity to communicate in positive ways, and their messages play a critical role in determining how a disease is understood and interpreted by the public.

Second, identifying, reaching and serving vulnerable groups is a vital function of religious communities, and their knowledge of who needs help can direct much-needed attention to especially vulnerable groups. In every pandemic, teachings and practices of religious communities have supported the hungry, the elderly and excluded minorities. Religious actors also play important advocacy roles, insisting that governments and partners focus on those most in need, such as adolescent girls, prisoners, refugees and children in orphanages.

Third, pandemics heighten discrimination against marginalized groups, including immigrants, refugees and racial and ethnic minorities. The natural tendency to find groups to blame for social ills has ancient roots and modern manifestations, with ample examples in the HIV/AIDS, Ebola and COVID-19 pandemics. Stigmatized groups may become associated, correctly or incorrectly, with specific diseases, as has happened to Asian-Americans in the United States and Muslims in India during this pandemic. Religious communities can magnify latent prejudice and tensions, but they can also counter them. Wise religious leaders admonish, plead and teach their adherents to focus on common humanity, emphasizing beliefs that overcome prejudice. Interfaith models can also help, as they symbolically bring many diverse groups together, reaching out to stigmatized people and advancing basic religious, ethnic and social understanding.

Fourth, trust is vital during pandemics, both for public health interventions and the economic and social dislocations that accompany them. While trust in religious leadership can vary, many surveys indicate that religious leaders are often among the most trusted categories of leaders. So they can play a vital role in tackling the fear and misinformation surrounding COVID-19.

Religious leaders can also encourage positive behavioral changes by example and by preaching, for instance, about the value of physical distancing and wearing a mask, since they are trusted by their communities. Yet religious communities, in turn, need to earn the trust of public health authorities.



*Worshippers wearing protective face masks offer Eid al-Fitr prayers in Tehran, Iran, May 24, 2020 (AP photo by Ebrahim Noroozi).*

The danger of mutual distrust was evident during the 2014 Ebola outbreak in West Africa, when measures by officials in Guinea and Sierra Leone to cremate or swiftly bury the dead, in order to contain the spread of Ebola, sparked fear and suspicion in many communities. The relief workers overseeing these procedures—outsiders dressed in protective outfits that looked like spacesuits—were blocked from entering many Ebola-affected communities. Others faced violent, even deadly, physical attacks. In late 2014, public health officials and religious leaders with the World Health Organization worked together to produce a protocol for culturally

sensitive burials for Ebola victims that may have saved thousands of lives.

Similar trust challenges surround COVID-19 health directives like contact tracing, which has raised legitimate concerns about privacy. A pandemic is not the time for trust to break down between governments and religious groups.

Fifth, governments and institutions at global and local levels need to cultivate an appreciation for the complex and diverse nature of the world's religions, so that they can avert the tensions and missed opportunities that stem from simplistic approaches to religion. Many governments and international institutions appreciate the power and complexity of religion, but lack a robust and practical literacy about faith communities. As a result, even sincere efforts at outreach are often poorly executed, deepening rather than alleviating mutual suspicions.

## **Inviting Religion to the Table**

The COVID-19 crisis involves both sprints and marathons and familiar yet unprecedented challenges that will have far-reaching repercussions for global affairs. The current needs are immediate and urgent, but working toward lasting outcomes that address injustices and inequalities is equally urgent. This will require action to protect community health, and longer-term attention to the structural problems that the crisis has revealed. Religious communities are playing important roles on all dimensions, in the here and now, through creative adaptations of practice, messaging that separates facts and rumor, support to communities, outreach to outliers and doubters, and the tamping down of prejudices. Many advocate powerfully for sharp attention to vulnerable and suffering communities.

As societies and economies reopen, religious communities will support the recovery, including their own. They will also be part of the political debates about priorities and reforms that emerge from the pandemic, with much to contribute especially on health inequalities and weaknesses in public health systems. In dialogue and debates stimulated by visions of “reimagined” societies that

are more just and peaceful, religious voices can and should play central roles.

At each stage and for each topic, religious communities need to be integral parts of the whole at policy tables. The world's diverse faith communities are in the thick of the pandemic, highlighting that habitual distinctions between faith and science exaggerate differences at a time when inclusion and bridges are urgently needed. The wisdom of ancient faith traditions, their practical experience and reach to communities, the solace they provide at a time of crisis, and their social teachings—all are needed now more than ever.

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