

Correspondence

Pastoral and spiritual care for quarantined individuals and their families

ABSTRACT

A recent article showed that coronavirus disease 2019 (COVID-19) patients quarantined in isolation facilities instead of in their homes help control the spread of the virus. Given this, isolation facilities must be promoted, no matter how difficult for the patient and the family. This article recommends that pastoral and spiritual care is necessary for both the isolated individual and the family left behind. Ultimately, pastoral and spiritual care may provide a more profound kind of immunity for COVID-19 patients.

Keywords COVID-19, quarantine, spiritual care

A recent article showed that coronavirus disease 2019 (COVID-19) patients quarantined in isolation facilities instead of in their homes help control the spread of the virus.¹ This is because overcrowded homes greatly contribute to the transmission of the virus, whereas community-supervised facilities may have stricter protocols, leading to less transmission. Quarantine facilities in the Philippines have had their fair share of problems, especially during the early parts of the pandemic, from the number of overseas workers coming home,² to the lack of supervising personnel, to inadequate lighting and ventilation, even to the absence of power supply. Later, local governments issued guidelines on establishing quarantine facilities in the barangay (village) levels, highlighting that need to address the said problems.³ This is to ensure that being quarantined does not anymore add up to the burdens of isolation. Being separated from family, especially during sickness, is difficult in a culture that puts so much premium on family ties. Therefore, pastoral and spiritual care is necessary for both the isolated individual and the family left behind.

Caring for a person's spiritual health has long been accepted as a critical factor in holistic care; however, its scope has remained restricted to chronic diseases and palliative care.⁴ While the call for spiritual care has been made for health-care workers,⁵ there is a need to expand its range to isolated individuals and their families. The experience of being infected with COVID-19 may greatly shake one's faith, taking it as punishment or questioning God's motives for action. The availability of livestreamed religious services may help

patients and their families reconnect with their faith. Having a prayer phone line involving a spiritual counselor or a priest/pastor, and being part of a social media prayer group, may also minimize the consequences of the physical distance without compromising safety. Having someone to talk with on a regular basis may help ease the burden of both the individual and the family.

The call for the need for pastoral and spiritual care is directed to religious groups, theological seminaries and even university departments to provide necessary guidelines and personnel with proper competencies. Hospital chaplains and parish priests may also need to extend their services. Using the impact of spirituality against the uncertainties brought by quarantine measures, and the pandemic in general, may be considered a way of improving public health. Pastoral and spiritual care may provide a more profound kind of immunity. The target population for pastoral and spiritual care must be widened to include isolated COVID-19 patients and their families.

Pastoral and spiritual care is an underrated aspect in counteracting the effects of the pandemic. Forging a stronger relationship with God may lead to less stress and anxiety, increase in hope and calmness, thereby improving physical immunity against the virus. Religion and spirituality play a powerful role in health promoting during the pandemic. They have been time-tested in helping people get through hard times. One only needs to read sacred scriptures and find that they are stories of people turning to God in difficult times.

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Conflict of interest

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