



Family Ministries Musings

To: Family Ministries Leaders

From: Pastor W. S. Lee, M.Div, D.Min & Wilma Kirk Lee, MSW, LCSW

CC: Pastors, Church Clerks

In light of the current COVID-19 pandemic and its impact upon visibly ethnic communities, we would like to share some information that may help with decision making as well as discussions with families and children.

Christian families are not to fear as the world fears, but they are to be aware of their environment and make good decisions as responsible stewards.

1 Peter 3:8-9 (MSG)

Summing up: Be agreeable, be sympathetic, be loving, be compassionate, be humble. That goes for all of you, no exceptions. No retaliation. No sharp-tongued sarcasm. Instead, bless—that's your job, to bless. You'll be a blessing and also get a blessing.



Coronavirus Myths

MYTH—*There's a coronavirus vaccine out there.*

There is no vaccine for the coronavirus currently available. According to the experts at Johns Hopkins: "There is no vaccine for the new coronavirus right now. Scientists state developing a vaccine that is safe and effective in human beings will take many months."

MYTH—*Ordering products from China could make you sick.*

COVID-19 is mainly spread through liquid droplets. So while it's technically possible that a product ordered from China could house a virus-infected bit of liquid, the odds of that happening are almost impossible. According to Johns Hopkins, "Scientists note that most viruses like this one do not stay alive for very long on surfaces, so it is not likely you would get COVID-19 from a package that was in transit for days or weeks."

MYTH—*A change in temperature can kill coronavirus.*

According to WHO, "There is no reason to believe that cold weather can kill the new coronavirus or other diseases." "Although the virus may have a seasonal cycle, it is not reasonable to expect a huge decline in transmission due to warmer weather alone. We see the largest decrease in infections when people refrain from being in locations with poor ventilation and/or large crowds."

MYTH—*A hot bath will protect you against coronavirus.*

There may be relaxing benefits to a hot bath, but it won't keep you from contracting coronavirus. WHO asserts. "Your normal body temperature remains around 36.5°C, regardless of the temperature of your bath or shower."

MYTH—*Bleach, silver, solution, and garlic can protect you from coronavirus.*

False claims that drinkable silver, gargling with bleach and garlic soup can help you avoid COVID-19. Washing your hands and limiting contact with others are still the best ways to avoid getting sick.

The Black Community - COVID -19 Facts



Compiled by:

Yusef Muhammad, *Former President, International Association of Black Professional Fire Fighters*

&

Dr. Lucy Perez, *Former President, National Medical Association*

Co-Chairpersons,

IBW FEMA/BFS Emergency Management Task Force

What is COVID-19

Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. The virus that causes COVID-19 is a novel coronavirus that was first identified during an investigation into an outbreak in Wuhan, China.

What is SARS-CoV-2

A severe acute respiratory syndrome, caused by novel coronavirus COVID-19, the second pandemic this century. (SARS 1 pandemic occurred in 2003; 8000 cases with a 10% death rate)

March 11, 2020, the World Health Organization declared COVID-19 a global pandemic affecting every continent on the globe.

March 25, 2020, the United States is the epicenter having the most known cases of the infection. New York City having 25% of the known national cases.

Symptoms of COVID-19

The symptoms of this viral infection can range from no symptoms at all to respiratory failure requiring ventilator assistance. The most common symptoms of known COVID-19 infected people are; fever, cough, and shortness of breath

Incubation Period

The presumed incubation period is 2-14 days. Quarantine protocols recommend isolation for 14 days from time of known exposure or travel from an endemic area (for example travel from NYC, LA, WA)

At Increased Risk

People of any age with chronic illness (heart, lung disease, and diabetes) or states of immune deficiency and those over the age of 65 years

- ◆ Seek Immediate Medical Attention
- ◆ Difficulty breathing
- ◆ Persistent pain or pressure in the chest
- ◆ New confusion or inability to arouse
- ◆ Bluish lips or face

Testing

The criteria for testing have evolved significantly and continue to change weekly (location and availability dependent). A limited supply of test kits and “prolonged waits for test results” dictated a priority platform as follows:

Priority 1

Hospitalized Patients

Symptomatic healthcare workers

Priority 2

Patients in long-term care facilities with symptoms

Patients 65 years of age and older with symptoms

Patients with underlying conditions with symptoms

First responders with symptoms

Priority 3

Critical Community infrastructure workers with symptoms

Individuals who have symptoms in endemic communities

Healthcare workers and first responders

Non-Priority (Containment)

Individuals without symptoms

In most states, following the above criteria, tests can be sought without approval by a primary healthcare provider

There is controversy about the use of face masks. Social distancing of 6 feet, should protect uninfected people from asymptomatic infected people (carriers). However, when social distancing of at least 6 feet can't be assured, some advocate the use of “surgical mask” by untested asymptomatic people, who are in close proximity to asymptomatic infected people. The present shortage of Personal Protective Equipment (PPE) face masks are included in PPE; priority is given to healthcare personnel and then first responders.

The Chosen Family Members should get the following information:

- ◆ Location of Loved One, in the Emergency Room
- ◆ Location of Loved One, admitted to a specific room, for example, 307 Bed B; or Nursing Unit, 3North
- ◆ Diagnosis in the Emergency Room
- ◆ Attending Physician (physician in charge who has primary authority, accountability, and responsibility) is usually the same Doctor until discharged; Attending Physicians in the Emergency Room change each shift, and Nurse assigned to Loved One each shift
- ◆ Decide the best time to talk to the healthcare team: Attending Physician, Nurse, Nurse Practitioner, Physician Assistant, House Staff (residents and fellows who are physicians in training), Social Worker, Case Manager, etc.
- ◆ Ask what treatments (oxygen, ventilator) and medications, your Loved One is being given (how much and how often) - compare with medications usually taken; inquire about COVID-19 clinical trials at the hospital that may offer new treatments that could help your Loved One

After Hospitalization

- ◆ When your Loved One is released from the hospital, make sure you have clear instructions about medications, especially new medications (dosage, instructions, and for how long); whether to remain in quarantine/isolation and other protective measures that should be taken.
- ◆ Your Loved One should follow up with their primary care physician or be referred to a hospital-based clinic (with access to the hospital medical record) for completion of their medical care, recovery, and follow-up



My Loved One is Sick with COVID-19



Developed by

Sonia Marshall-Brown

Dr. Lucy Perez

Dr. Annelle Primm

Jeanine Primm-Jones, LMSW



www.allhealersmha.com

COVID-19 is infecting and killing the Black community and it is important that we not wait until we are sick to prepare. Being Black in America makes us at greater risk for COVID-19 because of unequal treatment in healthcare, and a history of racism. We must be prepared for the worst and these are the steps we are recommending you take!

PREPARE NOW!

Personal Hospital Emergency Kit - For every breathing member of your family, regardless of age

- ◆ ***Complete Legal Name, Address, Birthday, Healthcare Proxy (Person you want to make healthcare decisions for you), Advance Directives (Living Will), Will, Power of Attorney (Person you want to make legal decisions for you)***
- ◆ ***Insurance Information - Medicare, Medicaid, Private***
- ◆ ***Height, Weight, Last Exam, Blood pressure, Blood sugar, Cholesterol, Last Menstrual Period***
- ◆ ***Past Medical History - High Blood Pressure, Diabetes, Asthma, Heart Disease, HIV, Hepatitis C, Kidney Failure, etc.***
- ◆ ***Medications - list of all medications, dosage, and instructions and the doctor that prescribed them; all known allergies to medications***
- ◆ ***Social History - smoking (tobacco, marijuana, vaping), and use of drugs and alcohol***
- ◆ ***Family Medical History of Medical Illnesses***

COVID TESTING -Nasal swab

- ◆ Availability by location
- ◆ Usually considered if persistent complaints of fever, cough, shortness of breath, loss of smell, headache, generalized weakness, etc.

Seek Medical Attention

- Need to contact a known primary care provider; insurance call center; nearest Emergency Room
- Transport of Loved One to Emergency Room - Prepare a small labeled personal bag with; cell phone and charger, and Hospital Emergency Kit - A face mask should be used by Loved One during transport - family members aren't allowed to accompany loved one in the Ambulance, Emergency Room or the hospital



Emergency Warning Signs - Loved One Needs Immediate Medical Attention -

Call 911 (Notify dispatch that COVID-19 is suspected)

- ◆ **Trouble breathing**
- ◆ **Pain or pressure in the chest**
- ◆ **New confusion or difficulty waking up**
- ◆ **Bluish lips or face**
- ◆ **Any other severe or persistent symptom**

Even though family members can't visit the hospital and directly ask doctors and nurses questions face-to-face, they still have to be an advocate for their Loved One (***families should select one responsible family member to maintain an ongoing relationship with the hospital-based healthcare team***). This family member will keep a log of asked questions, answers, and who they talked to on the healthcare team and when. Then they can relay this information to the other family members.