



## Responding to Epidemics and Pandemics

The current pandemic has brought many changes in our economic structures, clinical interactions, fellowship engagements, travel behaviors, social relationships, and communication platforms. It has been a time of fear, but also of hope amidst those challenges. As a response to these times and our call for papers on responding to pandemics, the journal has continued to receive a stream of articles related to COVID-19 and justifying a second special issue on the subject. We feel this journal is unique in being able to document the special concerns faced by low- and middle-income countries in dealing with the pandemic and to report creative approaches in circumstances of limited resources. A principle feature of this issue is a series of case studies and short reports. [Gnanaraj Jesudian](#) and his colleagues describe how they made personal protective equipment from locally available materials and then trained hospital staff to use them to mitigate transmission in rural hospital settings. They used electronic communications for consultations while continuing to care for patients in a compassionate way. Dr. [Jesudian](#) also describes a method for teaching laparoscopic surgical techniques to trainees using low cost equipment, redeeming the time during lock down. [Jason Paltzer and Jason Jonker](#) found that it was feasible to continue peer alcohol recovery groups by doing them virtually. [Qais Gasibat and Mussab Gasibat](#) describe the progress of the pandemic in Libya, a country already struggling with a civil war and an impaired economy. Two pediatricians from India, [Jacob John and Dhanya Dharmapalan](#) advocate for an effort to eradicate SARS-CoV-2 lest it become a permanent feature of the respiratory virus landscape with long-term adverse consequences. [Jean Peteet and colleagues](#) describe how an NGO organized care and containment for COVID-19 in highly vulnerable slum communities in New Delhi, India. As the epidemic has developed there has been both

opportunity and need to update criteria for clinical diagnosis, particularly since there are limits to testing in resource-constrained circumstances. [Professors Seshadri and John](#) provide updated clinical criteria, revising their previous article in a letter to the editor.

Complementing the short reports is a more extensive account of how a Christian NGO responded to unanticipated, new and unique challenges from the pandemic. [Sarah Varughese](#) recounts six areas in which decision making, planning and program execution were affected: alertness and preparedness, financial readiness, responsiveness in areas new to the organization, engagement with partners active in different areas and locations, consultations with experts, and leadership by those sharing appropriate values. The journal's call for papers was on responding to epidemics and pandemics, but COVID-19 was not the only subject addressed by the submissions. [Omololu and Ayokunle Fagunwa](#) from Nigeria recount the story of the English Sweating Sickness of the 15<sup>th</sup> and 16<sup>th</sup> Centuries, describing its clinical, epidemiologic and historical features along with how the church responded. These two authors also offer a [meditation on Psalm 91](#) with notes on the comfort and promise it offers in a time of fear and loss. Finally, there is a major review by [Professor Bernt Lindtjorn and Thor Henriksen](#) from Norway of the work of mission hospitals in southern Ethiopia in dealing with infectious disease outbreaks over a period of more than fifty years. Surely there are lessons here that are relevant today.

Finally, our Managing Editor, [Daniel O'Neill](#) has reviewed N. T. Wright's *God and the Pandemic: A Christian reflection on the coronavirus and its aftermath*. He helpfully summarizes Wright's critique of various responses and reflects on how he works out his fundamental emphasis on Jesus' suffering, death and resurrection as pattern for our



understanding and involvement for suffering and renewal.

We plan on publishing a separate issue with articles addressing changing landscapes in mission hospitals, capacity building for health workers, identifying health needs in low resource settings, and other topics in December. We always encourage submissions on any topic related to global health, development and Christian service, but we want to

call attention to a [new call for papers](#) on Environmental Concern, Global Health, and Creation Care that you can read alongside this issue.

We also want to welcome Lois Armstrong, BMin, MPHTM, PhD(c) as Associate Editor for Intercultural Health, bringing her experience in nursing, midwifery, public health, health research and theological reflection to our editorial team.

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