Grappling with the Impact of Covid on Missionary Life and Practice

Ingrid Woodbridge

The InterCity Express from Hamburg pulled into the Munich train station, coming to a complete stop on the dead-end tracks. The engine would be detached from the passenger cars, and another engine attached to the opposite end to pull the train out of the station again and continue the journey. Experiencing COVID-19 in Europe was like riding the train from Hamburg to Munich.

At the beginning of the pandemic in March 2020, missionaries felt as if the church ministry train had pulled into a dead-end station. Some, for a variety of reasons, returned to the United States, while others just stayed put under lockdowns due to government regulations. Some ventured out but could not travel. My husband and I moved to Germany in the second year of the pandemic, and we currently serve at Bibelseminar Bonn. Despite the challenges, field workers saw God at work during the pandemic. Nevertheless, it is important to reflect on the difficulties COVID brought to the missionary—and then suggest some ideas for engaging post COVID. This article will examine some of the difficulties in the areas of living overseas and working in the church, and will also look at some of the family struggles
experienced by missionaries. In conclusion, it will address suggestions for moving forward post COVID.

Living overseas is stressful and COVID and the ensuing regulations augmented this stress. In Europe, COVID was first announced in Milan, Italy. The reports of severe symptoms and deaths and the insufficiency of the medical system spread fear and anxiety. As the trauma and the tragedy of COVID raged in Italy, other nations closed their borders and secured medical masks and ventilators. But these steps were seemingly not enough, and governments implemented more severe measures.

Entire nations were deprived of close contact. In many of the countries where missionaries serve, they not only experienced the separation, but also witnessed it among their friends and partners. Nursing home visits were not allowed. Delayed funerals hindered grieving and closure. Restrictions were implemented on shopping, playing team sports, or simply getting together as a group of like-minded people. Huge fines were imposed for violations of these rules. The stay-at-home orders felt like house arrest that restricted people’s freedom and changed the dynamics of families and societies. The topic of lockdowns still shakes some people’s emotional stability because the experience was so difficult. All over Europe, member care consultants heard the repeated phrase, “But then came COVID!”

During the two plus years of the COVID pandemic in Europe, delayed medical treatment was the norm as many procedures were declared non-essential. Missionaries and their friends were also impacted by this reality. Diagnoses were delayed and this too caused stress.

Mask mandates were enforced in most places. Vaccinations were greatly encouraged, with much pressure from governments and private organizations. Tests and vaccines were slow to come to many countries, and in some places in Europe with past histories of tainted vaccines, there was extreme reluctance to be vaccinated. In many countries vaccinations were required and those not vaccinated were discriminated against. Intense discussions about vaccines sadly divided households, families, and churches.
Powerful economies shut down due to COVID, and general economic hardships befell ministry partners in country.\textsuperscript{1} People still talk about the hardships, panic, poverty, food banks, unemployment, and closed businesses. COVID caused stress for people on all levels.\textsuperscript{2}

Many conspiracy theories were passed around. Scandals of government leaders making rules but not keeping them were reported in the news. Demonstrations and vandalism occurred in some countries. Unfortunately, domestic violence and abuse increased.\textsuperscript{3} In the German dictionary, new words for the COVID situation were added.\textsuperscript{4} In English, missionary conversations were cluttered with new buzz words and phrases such as social distancing, Zoom, and you’re muted.

Missionaries reported that their language competency declined because they could not practice with locals or even meet for language lessons. Online language learning, available in some areas, was great, but was not a substitute for personal interaction with native speakers. Some workers found time to focus on other areas of language learning, namely reading and listening.

Language acquisition was not the only area that suffered. Some missionaries experienced physical health issues as well. Some missionaries contracted the virus, others watched as their friends became ill. Others had pre-existing health health problems and contracted COVID, some even several times. Some are still suffering long-term effects. The fear of either

\textsuperscript{1} For example, church planters in Boston closed their coffee house business, which was their ministry platform and their meeting room for Sunday services.


being contagious or getting the virus from others became a driving force in behavior in the places where missionaries serve and among the people to whom they minister.

Missionaries experienced the effects of COVID like everyone else. COVID impacted ministry partners, caused stress, fueled arguments about regulations, masks, and vaccines, and led to discouragement and sometimes even depression. Not only did COVID impact the living conditions of missionaries, but it also impacted ministry in the local church.

Some of our workers in Europe observed a decline in church attendance. Programs, meetings, activities, and outreach were forbidden in many places. Church gatherings stopped suddenly, ministry came to a standstill, and fellowship with the family of faith was detached from the work. Assemblies were threatened with fines if they met. Some churches were more technologically ready than others to provide online streaming of worship services. The common consensus among the missionaries in Europe is that they lost people during the pandemic.

The mandatory lockdowns encouraged isolation and separation from families of faith. Many people became passive, sofa-surfing church members who stayed in their seats at home. There was no visiting one another in homes, no small groups sharing life and attending Bible studies. Everybody stayed in their own world, managed their household and home office, and tried to stay sane. While some people were able to meet online, they recognized that online was not the same as meeting in person or worshipping together in a central location.

During the lockdowns, ministry projects were put on hold. Often local partners were disillusioned with the lack of progress and abandoned projects such as church planting. Mission teams from the United States, focused on helping churches with evangelism, were cancelled. Missionaries could not receive the teams due to COVID regulations.

Technology became a challenge that some workers mastered, and others did not. Zoom lessons, meetings, and conferences became the new nor-
mal—so much so, that the term screen fatigue is now a recognized diagnosis. For missionaries, the effort made by organizational leadership to stay connected and to encourage personnel was, at times, a bit overwhelming. Who hasn’t muttered in desperation, “Please, not another online meeting!”?

Clearly, COVID created challenges for the local church. Missionaries had to transition to online services, handle disappointments with cancelled church planting projects, and work without the support of mission teams. While there were difficulties with the local ministry, there were also difficulties in the missionaries’ own families.

Missionary families experienced similar effects from COVID as national partners. The normal routines of sharing life with friends were suddenly deemed unsafe due to COVID concerns. Even parks and playgrounds—great meeting places under normal circumstances—were closed off with police tape. At the height of the lockdowns in Germany, only one person from per household could visit another family. In other countries, even this type of contact was not allowed.

Missionaries are living in small apartments in Europe, and they were definitely close together. The lockdowns and social restrictions caused tensions. Individuals, couples, and families grew tired of being at home, but they had no other options. If workers visited friends, the government would fine them. Especially affected in such a crisis were the children, the elderly, and the missionaries whose ministry depended on personal contact.

Being at home had consequences for the mental health of parents and children. Teenagers in Central Asia spent months indoors because of lockdown restrictions. Mothers of teenagers reported that young teens ages

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twelve to fourteen were greatly affected by the lockdowns. Prolonged isolation from their friends was not only painful, but also developmentally damaging.

In Germany, where homeschooling is not allowed, public teachers told parents, “You don't qualify to teach your children.” So, children were instructed by their teachers on screens for four to five hours a day, even at the elementary school level.

Parents all over Europe observed that their children were easily distracted and often interrupted during their online classes. In the course of two years, many students lost the equivalent of at least one academic year. Parents shared that the motivation to study declined greatly. Why? The student was home, isolated from friends, and Mom and Dad were often their teachers. Children's separation from their friends caused everybody to be stressed. Many families adopted a pet as a playmate.

Parents recognize that development of social skills has been delayed and already-anxious children are now very anxious. COVID made uncertainties more apparent, and the lack of structure (e.g., in a regular school day) increased anxiety in highly empathetic children. Mask requirements in most school settings decreased the students' abilities to read facial social clues, to smile at each other in appreciation or encouragement, and to be free and not anxious. Important school traditions and rites of passage also fell victim to the pandemic. Proms and senior trips were cancelled. Graduating seniors did so in absentia. In our family, our high school senior and our college graduate received their diplomas during on-screen ceremonies.

Mothers and fathers had to work from home while their kids ran in and out of their workspaces, trying to release pent-up energy. The race for the device was on as students of all ages were expected to attend online classes at

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7 Personal communications with the author.

the same time their parents needed the computers and laptops for work. The home office became a place of challenge and chaos. Balancing the demands of work and home was challenging, as everything happened at home. Moms had no time for themselves; the only way to get time alone, it seems, was to schedule a medical appointment!

While missionaries struggled, they also adapted to the new reality. For example, creativity was expressed in creating digital resources and connecting with people online. Prayer meetings and discipleship moved to online formats. Workers embraced Media to Movement (M2M) as a digital effort to reach people who are looking for Jesus. People did accept Jesus during the COVID crisis, and some churches grew. Churches which previously did not have an online presence, started to stream and reach new people. Missionaries used their time wisely to learn new skills.

Missionaries are not exempt from the challenges of COVID. It impacted their lives, their ministries and their families. Yet, even though there were challenges and increased stress, there were also encouraging moments and positive steps forward in ministry. Post COVID, what do missionaries need to consider as they carry out the six elements (entry, evangelism, discipleship, healthy church formation, leadership training, partnership and exit) of the missionary task?

Entry

The good news is that people want to connect, meetings in person are happening, and missionaries are free to reach new people. Language skills can improve in person rather than on a screen. However, to be best equipped, missionaries ought to understand the impact of COVID on themselves.

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9 Media to Movement website: https://www.mediatomovements.org
COVID was dramatic for some. What can we do to restore a sense of well-being? The Trauma Healing Institute has some suggestions.\textsuperscript{10} To help with the emotional side of our well-being, recognize that the pandemic was a traumatic situation; accept your feelings as normal. By paying attention to what your feelings are telling you, you can respond better. Make a list of your losses and take time to grieve each one; it is normal to feel sad when we have losses. Learn ways to calm your strong emotions such as breathing slowly and deeply. Imagine scenes that help you feel calm. Pay attention to where you feel stress in your body. Try to relax any parts of your body that feel tense. Talk about your feelings with people who are safe and know how to listen. Tell God honestly how you feel (biblical lament). Take a walk or do something that requires physical effort. Spend time outdoors because being out in nature can be calming. Remember times when God has cared for you, to help you trust him now. Sing or listen to music. Establish routines to restore a sense of order. Do something you enjoy. Find some meaningful activities to fill your time. Make the effort to connect with people. Tell those you care about how important they are to you. Read Scripture verses that remind you of God's love for you. Look for small things that remind you that God is caring for you. Bringing God into the center of our lives is always necessary, especially now as we reengage in culture and society. There are other resources to help.\textsuperscript{11} As you understand what you experienced, it will help you understand your people.

**Evangelism and Discipleship**

Fear still lingers in society. What will happen in the future? Is COVID over? When fear is disguised as being cautious and considerate, it enforces un-


healthy behaviors such as avoidance, ridicule, belittling, demanding one’s own way, divided opinions on reengagement, and discouragement from contact. For example, someone might say they do not want to meet because they are cautious in their own words rather than admitting to being afraid.

People expressed hopelessness when another lockdown was announced, and discouragement when the vaccine was not available or did not work as efficiently as promised. Questions have been raised about the effects of the vaccine and the conditions for safely meeting in groups. These doubts must be overcome through socialization and the acceptance of COVID as a constant part of our lives (like the seasonal flu).

In evangelism and discipleship, missionaries desire to give people hope through the Gospel and minister to people who may have been impacted by COVID. The Trauma Healing Institute summarizes typical effects of COVID: People have physical effects from COVID (e.g., exhaustion, pain, brain fog); physical effects from the demands of caring for others who are still suffering the aftereffects of COVID; weight gain or weight loss; eye problems from increased use of technology; and grief symptoms caused by the death of family members, friends, and colleagues. The long-term effects of COVID deserve a separate article as the medical research indicates significant problems, but the full picture is still forming.12

The economic effects for many people are loss of income, higher expenses, price inflation, little hope of returning to a previous job, and businesses suffering from loss of employees. The emotional effects are significant: helplessness, anger, fear, loss, frustration, and confusion. Social effects include isolation, hesitancy, changes in schooling and childcare, and a significant increase in domestic abuse. There are also spiritual effects from the COVID pandemic: people doubt God’s love or protection; there is disappointment or disillusionment and shifted beliefs about God; some

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people question their faith; many are left without the sense of a spiritual community around them; many feel stressed about getting together again, as concerns for safety continue to keep people away.\textsuperscript{13}

Pastor Lutzer closes his book \textit{Pandemics, Plagues, and Natural Disasters} with thoughts on lessons learned from the pandemic.\textsuperscript{14} He concluded that the uncertainty of life means we should be diligent in evangelism; our values have been clarified, and we need to keep first things first; money can’t keep its promises, and you cannot buy health, so don’t trust the lies of advertising and propaganda; the danger of self-delusion has been exposed; and we remember that we desperately need God.

Workers can comfort people with the comfort they have received, point people to Jesus, encourage the weak, bear their burdens, serve in practical ways, and listen to their struggles (1 Thess. 5:14).

\textbf{Healthy Church Formation, Leadership Training and Exit to Partnership}

Increased isolationist behaviors are becoming huge concerns in the mental health world. Phobias, risky behaviors, and depression are some of the rising symptoms. Dr. Matthew Stanford calls the mental health crisis a silent pandemic.\textsuperscript{15} Many people struggle with phobias and lack the skills to socially reengage in society.

One way churches can help with isolation is with their small group ministry. Ensuring that these groups start again is important for building relationships and encouraging people to engage again. Several workers observed that the small group ministry was put on hold during COVID or diminished

\textsuperscript{13} Bryan Varenkamp, Marilyn Davis, and Cami Robbin, “Living with the Lingering COVID-19 Pandemic,” \textit{Trauma Healing Institute}, January 2021, 3-5.

\textsuperscript{14} Erwin Lutzer, \textit{Pandemics, Plagues, and Natural Disasters} (Chicago: Moody, 2020): 68.

\textsuperscript{15} Dr. Matthew Stanford, "Introduction Lecture to Mental Health Coaching" (lecture, Course C-MHC 101: Foundations of Mental Health Coaching, LightUniversity), March 2022.
even with online groups. Another practical way to combat the effects of COVID is to practice hospitality again.

Some churches are coming out of COVID and are struggling. Nearly two years of not meeting together, or sporadically meeting plus health issues, death of members, and disruption of some ministries are challenges for the pastoral team. For missionaries, there is the opportunity to encourage, equip, and cast vision again post COVID. Missionaries can be a catalyst to move the church in a healthy direction.

In terms of partnerships, opportunities exist now to create new partnerships or build upon local and international partnerships formed during COVID. Mission teams are able and eager to come again and support missionaries on the field. Missionaries can also cultivate and nurture partners among local believers and church leaders for the eventual time when the missionary can step back and allow the local believers and church leaders to carry out the missionary task.

**Conclusion**

The train of missionary work in Europe is gaining speed again. New people are sent to join current workers to engage those who don't yet know Jesus and help with the Great Commission. Those who have returned to the compartments of the train are healthy, but there may be lingering effects that need time to heal. We need to give each other much grace for the journey, assume positive intent, labor diligently, rest well, and trust in our sovereign God, who controls the engine. We have hopefully left the train station for good and are off to new horizons. We need good attitudes and good motivations. We hope that nothing else will derail the train or delay the journey.

**Resources**

In the resource section of this article are podcasts, articles, ideas, and video clips to help you focus and be ready to reengage. You can learn to over-
come screen fatigue, adopt new skills in technology, help your kids return to church after COVID, and take care of your marriage. And along with the Scriptures, I affirm that laughter is good medicine, so I have included a video clip that should make you smile.

A Sound of Music parody video about vaccination: https://www.youtube.com/watch?v=MMBh-eo3tvE.

Awareness and action steps about loneliness, even before COVID: https://www.aacc.net/2020/12/09/the-loneliness-epidemic-research-influence-and-its-effect-on-everyone/.


Ideas for overcoming virtual meeting fatigue: https://research.lifeway.com/2020/04/15/6-tips-for-overcoming-virtual-meeting-fatigue/.


Mental Health Coaching from American Association of Christian Counselors


Podcast on COVID: https://www.ccef.org/coronavirus/.

Summit Church Resources on COVID: http://bradhambrick.com/COVIDanxiety/.


Ingrid Woodbridge serves with the IMB in Member Care and teaching at Bibelseminar Bonn. Her 15 years of service have been in Austria, Ukraine, and Germany. She has an MA and DMin in Biblical Counseling from Southeastern Baptist Theological Seminary.