COVID-19 and the calls of humanistic social work: Exploring the developmental-clinical social work concerns of the pandemic

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Abstract

Any health outbreak is beyond the biomedical approach. The COVID-19 pandemic exposes a calamitous need to address social inequalities prevalent in the global health community. Au fait with this, the impetus of this article is to explore the calls of humanistic social work in the face of the pandemic. It calls for the pursuit of social justice during the pandemic and after. It also calls for a holistic service provision, technological innovation and stewardship. Wrapping up, it challenges the global community to rethink their priorities – egotism or altruism. It emphasizes the ultimate way forward of addressing the social inequalities.

Keywords

COVID-19, developmental-clinical social work, humanistic social work, resilience, social determinants of health, social justice

Introduction

The devastating Coronavirus (2019-nCoV, or COVID-19) outbreak started in Wuhan, China at the end of 2019 and has spread across the globe (Brown and Wang, 2020). It was declared a pandemic by the World Health Organization (WHO) on 11 March 2020 (African Union [AU], 2020; Byrne and Wykes, 2020). According to the United Nations (UN, 2020), the COVID-19 pandemic presents the greatest test the world has faced since the Second World War and the formation of the United Nations. Manderson and Wahlberg (2020) underscore that by April 2020 the COVID-19 lockdowns had restricted the movements of at least half of the global population. The global community is facing a pandemic, with cities and even entire countries shutting down (Amin, 2020). The International Labour Organization (2020) declares that the pandemic has developed into a global economic crisis, with severe and potential lasting impacts on economic activity, employment and trade.

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The COVID-19 pandemic thrives on socio-economic inequalities and poor health systems (African Union [AU] and Africa Centres for Disease Control and Prevention [Africa CDC], 2020; Bennett and Carney, 2015). The pandemic is heavily affecting the already suffering, vulnerable communities including the poor, homeless and those with chronic health problems. It is well known that socio-economic determinants such as poverty, high crime neighbourhoods, poor access to healthy foods, limited education and skill level, and high unemployment adversely affect health and increase one's predisposition to chronic diseases and COVID-19 (Krouse, 2020). Individuals long not only for economic development but for equality, human dignity, education and knowledge, participation, and access to cultural and religious life (d'Orville, 2015). It is vital that social scientists reflect on all these elements in the face of the COVID-19 pandemic. Thus, considering the political, economic, social, technological, environmental and legal aspects of life in the pandemic and taking lessons from the plague are equally critical.

Research on the pandemic is increasing daily in several fields. The impact of COVID-19 on global and continental economies has been expatiated (AU, 2020; Kanupriya, 2020; United Nations Economic Commission for Africa, 2020). COVID-19 has been examined through the lenses of culture (Banks, 2020), social policy issues (Rogers and Power, 2020; Wasdani and Prasad, 2020), mental health and psychology (Amin, 2020; Byrne and Wykes, 2020) among others. O'Leary and Tsui (2020) call for social workers to reflect, analyse and learn from this crisis. Thus, this article aims to explore the intrinsic *calls* of humanistic social work in light of the lessons learnt from COVID-19 so far. It is indeed a crucial moment for the profession of social work to reflect seriously and take charge of its mandate.

Conceptualizing developmental-clinical social work

Social work is involved in enhancing the welfare of individuals, groups and communities. It is focused on the person-in-the-environment perspectives in addressing problems. Social work engages in social and political systems for the fight against inequalities. Pawar (2019) underscored,

> Social work's core value-base, commitment to human rights and social justice, current inadequacies in addressing the basic needs and issues of local-level communities and the need to balance between micro and macro practice make a sound case for social workers to plunge into policy practice and political engagement with due respect to cultural contexts. (p. 19)

The profession is inherently mandated to deal with socio-structural factors affecting the well-being of humanity through various methods and approaches to social work.

Clinical social work is the professional application of social work theory and methods to the diagnosis, treatment and prevention of psychosocial dysfunction, disability or impairment, including mental, emotional and behavioural disorders (Barker, 2003). Clinical social work has been criticized for its stance and overemphasis on the remedial approach which medicalizes social problems that need socio-structural interventions. However, these criticisms are there to strengthen the profession going forward (McLaughlin, 2002). Developmental social work, however, is social work practice at the macro-level and is focused mainly on the application of social development theories. Developmental-clinical social work is the integration of the developmental and clinical social work approaches with the aim to prevent the occurrences of diseases, lessen disease burden and deal with socio-structural issues that impact clinical issues (Chigangaidze, 2020b). Developmental-clinical social work involves appreciating the microcosms of the macrocosms and vice versa. Developmental-clinical social work also includes a PESTLE analysis, i.e. the political, economic, social,

technological, legal and environmental factors that impact on clinical issues. Thus, the concerns of developmental-clinical social work include poverty, housing, education, health services, technological environments and political instability, to mention but a few.

Humanistic social work calls and COVID-19

Humanistic social work is the social work practice that is influenced by humanistic theories from the field of psychology (Chigangaidze, 2020a). Informed by humanistic sociology, humanistic social work is concerned with how people are resilient and how they cope in crisis. It also considers their power relations and spiritual empowerment (Stefaroi, 2016). Expatiating on the term 'humanism', Melé (2016) put forward several characteristics such as wholeness, comprehensive knowledge, human dignity, development, common good, stewardship-sustainability and spirituality. Put simply, he explored that common good promotes both individual liberty and relationality as it cultivates dialogue, innovation, cooperation, oneness and participation in social life. Humanistic characteristics include generosity, compassion, altruism, social and emotional intelligence (Peterson and Seligman, 2004). Influenced by the Rogerian approach, humanistic social work advocates the establishment of a therapeutic milieu that enables individuals, groups and communities to utilize resources to ensure personal and societal growth.

The most important principles of humanistic social work are accountability, achieving personal and social equality, achieving caring and creativity, developing self and spirituality, ensuring developments in research and developing security and resilience (Payne, 2011 in Stefaroi, 2016: 64–65). The promise of humanistic social work practice is embedded in the recognition by social workers of the need of a just and equal human social order (Goroff, 1981). Social work practice from a humanistic point of view respects the client not merely as a service user but as a part of a collective with us of the human condition (O'Leary and Tsui, 2019). Humanistic social work services operate mainly with terms and phrases that cultivate the diminishing of an individual's suffering, distress and unhappiness; increasing spiritual well-being; improving personal and community development as well as ensuring moral development and socio-human integration (Stefaroi, 2016).

Considering the above synthesis, this article will consider exploring the calls of humanistic social work in the face of the COVID-19 pandemic. The following part of this disquisition will expound on five calls of humanistic social work, which are the following: the call for the pursuit of social justice and human rights, a call for dialogue and cooperation, a call for holistic service provision, a call for technological innovation and stewardship-sustainability and a call for professional self care. These calls are intertwined and also emphasize the philosophy of enhancing the psychosocial functioning of individuals, groups and communities. These calls are also integrative to the domains of the human rights perspective to social work practice, international social work and critical social work.

Call for the pursuit of social justice and human rights

Social justice has long been an important impetus and driver for social work's purpose (McLaughlin, 2011). The mission for humanistic social work involves the quest to create just social conditions that promote social justice, equality and freedom (Payne, 2011). This endeavour is embedded in the dire need to respect human dignity, individual worth and uniqueness of human beings as well as the sacredness of life. It is also well rooted in the concepts of critical theory and the anti-oppressive frameworks of social work practice. O'Leary and Tsui (2020) emphasize that social workers need

to protect and connect with the vulnerable groups in societies through enacting their commitment to social justice. Humanistic social work calls for contemporary and future practitioners to work towards addressing the socio-economic inequalities and poor health systems on which the COVID-19 pandemic thrives. Having patrols to ensure that lockdown rules are enforced is treating symptoms while leaving the root causes that the pandemic is thriving on: long-standing economic and social inequality (Van Barneveld et al., 2020).

Our society and community (not markets and sales) should be the primary environments for humanistic social work practice (O'Leary and Tsui, 2019). There have been a lot of human rights violations in the communities during the COVID-19 pandemic (Forman, 2020). Humanistic social work emphasizes human rights are at the centre of social work axiology, in particular, human equality among all participants of the social work process (Payne, 2011). Humanistic social work, valuing common good, responsibility and human dignity, advocates for transparency, accountability and advancement of human rights in such a crisis as COVID-19 and after. This article will explore the social injustices exposed by the COVID-19 pandemic and foster the perspective of developmental-clinical social work (showing that COVID-19 is not merely a biomedical issue but a socio-structural pandemic). The following expatiates on disparities that affect service provision and public health.

Stigma and discrimination

A great deal of stigmatization, disfigurement and poverty have been caused by infectious diseases (Allotey et al., 2012). The COVID-19 pandemic has emerged with the elements of stigma, xenophobia and discrimination which include increased prejudice, hatred, rejection and chicanery (Jakovljevic et al., 2020; Reny and Barreto, 2020). Xenophobia is fuelled by psychological processes that are informed by politically, socially, culturally and economically oriented threat perceptions that classify and ultimately lead to the identification of foreigners as 'others' (Mwansa, 2016). The outbreak of COVID-19 has been highly racialized and stigmatized around the world mainly due to the origin of the virus and its rate of transmission (Fairchild et al., 2020; Haokip, 2020). Stigmatization is real and can negatively affect populations in seeking and accessing care (Bruns et al., 2020). In addition, gender inequality overlaps onto issues of systematic forms of discrimination such as racism and homophobia, eventually increasing barriers to access to health services during the pandemic (Lokot and Avakyan, 2020).

In connection to this, Haokip (2020) calls for the introduction of strong anti-racism law which depends on the responsiveness of law enforcers and the effectiveness of the criminal justice systems. This article agrees with the Ministry of Labour and Immigration (2011) of Spain's strategies to combat discrimination and racism. These include a holistic approach covering the legal frameworks, political will, social integrative plans inclusive of the educational curriculum and other modalities. The use of media and technology to fight stigma and discrimination is also essential. Enculturation of the spirit of humanness and that of respecting others is key in the use of media, technology and educational curricula to progressively fight stigma and discrimination in the contemporary and future societies. The pandemic is a wakeup call for practitioners to reflectively rethink their roles in the fight against stigma and discrimination. There should be an optimum environment for everyone to access health and other essential services without any prejudice. In view of the above, humanistic social work is embedded in the axiology of human dignity and promotes the fight against stigma and discrimination. Humanistic social work emphasizes educating the communities on the importance of safeguarding human dignity and enhancing the well-being of individuals, groups and communities. Enshrined in the therapeutic conditions of Carl Rogers, humanistic social work underscores community emancipation from oppression through empowering societies and ensuring an

environment that is optimum for self-growth, self-actualization, acceptance and emotional warmth. Unconditional positive regard, in addition, is also essential for the fight against stigma and discrimination.

Poverty

Adults who are living in poverty are at increased risks of several health problems such as cardio-vascular diseases, depression, diabetes, cancer, disability and substance abuse (Gwatkin et al., 1999; Pratt and Broody, 2014). One of the factors impeding development is a large burden of communicable diseases, especially in poor communities, which perpetuates the cycle of poverty and poor health (World Health Organization and Asian Development Bank, 2014). It has been noted that improving the standards of living and provision of basic human rights such as food, shelter and clothing are imperative interventions in fighting communicable diseases (Allotey et al., 2012). Poverty has been implicated in exacerbating the proliferation of the virus and worsening the COVID-19 disease burden (Chigangaidze, 2020b: 13; Krouse, 2020). Based on the Maslow hierarchy of needs, humanistic social work advocates the provision of physiological needs such as food, water, air, shelter, sleep and clothing. The contribution of the humanistic theory to the poverty discourse is, fundamentally, the proposition that everyone needs the existential freedom to search for self-identity, thus making it possible to achieve psychological potential (Dixon, 2010). The humanistic perspective understands poverty as the deprivation of one or more underlying capabilities (Sen, 1999).

In addition, humanistic social work is anchored in advancing human rights which are essential in ensuring the eradication of poverty. Human rights invite analysis of the socio-structural causes of poverty, rather than only attending to its symptoms. Human rights prevail on the impact of governments' actions and inactions on communities experiencing poverty (Donald and Mottershaw, 2009). From a humanistic perspective, social rights may be understood as articulations of human need (Dean, 2020). Linked to humanistic economics, humanistic social work questions poverty amid abundant wealth. Humanistic economics advocates the normative analysis based on human dignity and basic rights that concerns issues of poverty amid plenty, ecological sustainability and socio-economic development (Lutz, 1999). Thus, the article attempts to show how these inequalities impact on the COVID-19 pandemic and if these had been previously addressed, it would have meant a better fight against the pandemic for everyone due to enhanced capacity to minimize transmission. However, the world has been motivated by egoistic desires, as witnessed by Oxfam (2018: 2) that 82 percent of the world's wealth acquired in 2017 went to 1 percent of the world's population. Oxfam showed that if the wealth were spread evenly in the world, this could end global extreme poverty seven times over. Considering such a context, Goroff (1981) highlights the promise of humanistic social work lies in the recognition that we are either oppressors or are being oppressed. He argued that it is noble to realize that people can be oppressed while oppressing others. In the contemporary society, the spread of COVID-19 clearly shows the need for a collaborative fight against poverty to ensure that an optimum milieu to fight infectious diseases is established even for future societies. This approach calls for an anti-oppressive framework in enhancing the welfare of vulnerable populations.

Access to water, sanitation and hygiene

The COVID-19 pandemic came with lockdowns and health education campaigns that people should wash their hands regularly with water and detergents. United Nations Economic Commission for Africa (2020: 2) highlights basic hand-washing access in Africa is limited, with 36 percent of

the population having no access to household hand-washing facilities and a further 30 percent with only limited access. Manderson and Wahlberg (2020) emphasize the need for improvement of access to safe water and sanitation for the effective fight against communicable diseases. Water is indispensable for industrial production and human existence (Wanga et al., 2020). Lack of access to safe water has a major effect on people's health. The recognition of the human right to water and sanitation by the United Nations in 2010 was a significant political measure whose direct consequences are still being accessed (Brown et al., 2016). The pandemic should come as a lesson to both governments and nongovernmental organizations that if safe water is hardly accessible to all people the spread of communicable diseases such as COVID-19, typhoid and cholera might be difficult to contain especially in this contemporary and future society. Thus, the provision of safe water and sanitary facilities is intrinsically essential for human security purposes and should be prioritized in fiscal budgets. Humanistic social work advances the welfare of people first and not financial gain at the expense of well-being.

Homelessness and overcrowding

The COVID-19 pandemic is rapidly emerging as a housing emergency (Rogers and Power, 2020). The population density in urban Indian slums is extremely high and if COVID-19 were to break out in the slum, its sheer density alone would result in the mass and efficient proliferation of the virus (Wasdani and Prasad, 2020). This makes tracing, testing and treating nearly impossible to curb the outbreak. Displaced populations such as refugees are at a higher risk of infection given crowded living conditions (Chigangaidze, 2020b). In support, Rogers and Powers (2020) argue that people experiencing homelessness have a high-risk predisposition to COVID-19 and trouble with the law enforcers during the lockdown. It is likely that there will be no safe water and sanitation facilities in overcrowded populations which catalyses the spread of COVID-19 if a single person gets infected.

Joffé (2020) argues that 'social distancing' is practically impossible in the overcrowded urban and rural conditions in which a vast number of people live in North America. It is not possible for the homeless children to observe social distancing and self-isolate due to overcrowding and poor living conditions which predispose them to high risks of exposure and transmission (Chigangaidze, 2020b). There is a great need for humanistic social workers to up the gear of advocacy for the betterment of housing facilities for the vulnerable groups in the communities. The pandemic is a wakeup call for practitioners to realize the need to improve the housing sector as it is a vital determinant in health emergencies that affect everyone. The health inequalities seen in the housing sector should be addressed to enhance the prospects of human security in the face of health emergencies such as COVID-19. In connection to this, housing instability is a major determinant even in noncommunicable diseases such as schizophrenia, depression and substance induced psychosis (National Coalition of the Homeless, 2009; Felix et al., 2008). Thus, it is high time the political leaders, civic organizations and business partners learn from the COVID-19 pandemic and consider community responsibility that is in line with ensuring better housing for all.

Call for holistic service provision

Humanistic social work focuses on addressing the needs of customers in a holistic manner (Payne, 2011). Inclined to the Maslow hierarchy of needs, humanistic social work calls for practitioners to ensure the physiological, psychosocial and spiritual needs of the clients are met. Humanistic social work focuses on the interactions of human beings and their systems, meaning that it considers the person in the environment perspective. The humanistic approach focuses on the wholeness of a

person through its emphasis on 'homo integralis', which considers the human to have a variety of motivations, needs, wide rationality, the capacity to learn, sociability and openness to transcendence among other modalities that shape personality and character (Melé, 2016 cited in Chigangaidze, 2020a). This section considers the above-mentioned domains considering service provision that is holistic.

Physiological domain

Human life is mostly threatened when physiological needs are neglected. Humanistic social work emphasizes the provision of physiological needs such as food, water, shelter and clothing. The aspects of water and housing have been addressed in the call for pursuit of social justice and human rights. This article will consider two aspects under the physiological domain and these are food security and physical activities.

Food security. The emergence of the COVID-19 pandemic has predisposed most families to food shortages. Low-income families cannot afford to stock up on food that can sustain them for a long time, so they require frequent trips to grocery stores thereby increasing their exposure to the virus (Reeves and Rothwell, 2020). Furthermore, their susceptibility to the pandemic is heightened by poor nutrition (Van Barneveld et al., 2020). Stressors during the pandemic include financial loss and impediments in accessing supplies of food and water (Brooks et al., 2020). The crisis has rendered many people jobless and increased poverty such that food security is likely to become a major issue (Matias et al., 2020).

Humanistic social work calls upon practitioners, governments, civic societies and the business communities to collaborate in ensuring that people's welfare in terms of food security is addressed. It calls for the business community not to take advantage of the crisis and hike up the prices of food items at the expense of the poor. High food prices tend to worsen poverty, food insecurity and malnutrition (Food and Agricultural Organization et al., 2011). Most importantly, humanistic social work calls for humanism in ensuring food security even after the pandemic and in planning for future disasters. It calls for the spirit of ubuntu or oneness in the fight of the pandemic.

Physical exercise. The COVID-19 pandemic reminds the profession of social work that it is essential in promoting physical exercise. Social workers need to promote physical activity and in doing so, they must partner with other fields directly involved in addressing the physical inactivity problem. Social workers can easily identify the readiness of their clients to exercise through questions adapted from the Transtheoretical Model (TTM; Williams and Strean, 2006). The literature is rich in the benefits of physical exercise (McKenzie, 2012; Pedersen and Saltin, 2015; WHO, 2010). Maintaining regular physical activities during self-isolation is important for the prevention of future chronic health conditions due to a sedentary lifestyle (Jakobsson et al., 2020). Hence, it is critical for social workers to consider promoting indoor exercises during the time of lockdown and even in the future.

Psychosocial domain

Anger, grief, frustration, anxiety and other psychosocial instabilities are associated with the COVID-19 pandemic. Research has shown that loneliness and social isolation worsen the burden of stress and produce damaging effects to mental health (Brooks et al., 2020; Bruns et al., 2020; Kumar and Nayar, 2020). There is a need for psychological aids that could be delivered by someone who understands the basic principles of psychological first aid. Training community volunteers on psychological first aid in the future might be an effective way to alleviate the mental stress afflicting the general

populace at a time like this (Huang and Zhao, 2020). There is no doubt the role of social work is fundamental in intervening in these psychosocial challenges. The duty of social workers to offer psychosocial care and provide social networks utilizing social media and technology to help clients who are in social isolation has been emphasized (O'Leary and Tsui, 2020).

Spiritual domain

Spirituality has been defined as a 'personal quest for understanding answers to ultimate questions about life, about meaning, and about relationship to the sacred or transcendent, which may (or may not) lead to or arise from the development of religious rituals and formation of community' (Koening et al., 2001: 18). Spirituality is recognized as a factor that contributes to health in many persons (Puchalski and O'Donnel, 2005). Spirituality has been associated with addressing the concerns of anxiety (Cha and Wirth, 2001; Puchalski, 2008). When psychotherapists are not adequately competent to meet treatment needs and consultation with religious or spiritual leaders is not effective or not possible, then referral to an appropriately trained professional (lay, religious or spiritual) is likely warranted (Barnett and Johnson, 2011). In the article, *Ethical concerns around spirituality and religion in clinical practice*, Hathaway and Ripley (2009: 49) emphasize that a clinician can refer to a religious leader if the presenting problem requires comprehension of the client's religious and spiritual background that exceeds the practitioner's competence regardless of relevant consultation or supervision.

Call for technological innovation and stewardship-sustainability

The humanistic approach to social work and leadership provides a platform for debate on issues of scientific innovation, enhancement of human well-being and the peaceful co-existence of humanity and nature (Melé, 2016; Stefaroi, 2016). The pandemic that has caused the world to be on pause has also come with innovation and a further realization that human beings must be in a sustainable co-existence with the green environment. Brescia (2020) calls for the promotion of technological innovation for the facilitation of sustainable agriculture and food production systems. This article appreciates the work of Wanga et al. (2020) in Tanzania among others for the call to adopt a low-cost automatic water tap that does not require the user to touch it but utilizes a microcontroller for water flow regulation. Humanistic social work calls for practitioners to promote such projects that add value to humanity. One of the lessons drawn from the COVID-19 pandemic is that of regeneration and not extraction: producing in balance with nature, rather than destroying the ecosystems humans depend on (Brescia, 2020).

If there had been advancement of technology, even in the most remote parts of the nations and communities, it would have been easier for students to continue with their learning amid the COVID-19 pandemic without disadvantaging the poor. Lack of access to education facilities in this crisis further widens the inequalities and perpetuates the poverty life cycle. Students in most rural areas of the global community have lost a great deal of school time, while their counterparts who have access to the Internet and are technologically empowered have advanced in the course contents. Humanistic social work mourns this reality and strives to address these gaps through advocating for technological projects that enhance people's lives in rural areas. The article calls for political leaders and social policy formulators to rethink their priorities between militarization and social determinants of health such as education and technological advancement. In addition to this, it is critical that we preserve the environment and ensure that even future generations remember us for this legacy. O'Leary and Tsui (2020) agree that social workers have increasingly become focused on how climate and natural environment impact the people and the community.

Call for dialogue and cooperation

Humanistic work cherishes the concepts of social cohesion, peace and mutual understanding (Melé, 2016; Stefaroi, 2016). From the humanistic-existential perspective, people must learn to exist with themselves (intrapersonal), with others (interpersonal) and existentially with the world to develop an authentic sense of connectedness (Hoffman, 2010). Affirming the necessity of dialogue is one of the principles of humanistic social work (Krill, 2014). The COVID-19 pandemic has emerged with tensions and mistrust between China and the United States. Christensen (2020) relates that the interactions between the two states, and with other humanitarian institutions such the World Health Organization, have so far frittered away historic opportunities for cooperation to tackle a common threat. The hope in humanistic social work is in the realization that the profession is also political in nature (Goroff, 1981). Humanistic social work encourages dialogue and cooperation for the attainment of optimum human security, mutuality and development. International social workers should through diplomatic means facilitate platforms of dialogue and cooperation.

The call for dialogue and cooperation is not only applicable to the relations of states but also speaks to the spirit of teamwork in inter-sectoral and interdisciplinary platforms in the fight against COVID-19. It also calls for families, groups and communities to be united in the fight against the disease. The philosophy of humanistic social work reminds the global community of the dire need to work together and learn from each other while respecting human dignity and individual worth (Stefaroi, 2016). Even in weakness, it is better to be weaker together rather than weaker apart for in our unity in times of distress we complement each other in finding our individual and collective strengths. O'Leary and Tsui (2020) emphasize the need for international exchange, mutual trust and cooperation in the fight against the COVID-19 pandemic.

A call for professional self care and peer support

This shattering disease has generated several sources of stress and distress for health care professionals, patients and families (Williams et al., 2020). Health care professionals are at elevated risk of mental health problems such as depression, sleep disorders and anxiety due to COVID-19 (Li et al., 2020). Frontline workers in health care can benefit from psychological approaches to mental health (Inchausti et al., 2020). Generally, people have been asked to wear masks and health care providers have been advised to wear personal protective equipment. Williams et al. (2020: 69) put forward what I refer to in this article as professional self care regimes and peer support mechanisms that include the following:

- Acknowledge stress, pressure and sacrifice. It is helpful for leaders to acknowledge these issues for normalizing staff reactions and knowing that our experiences are shared.
- Lean on colleagues. Find ways to dialog through video, chat, telephone and email. Talk about your reactions and the distress you are facing.
- Bolster resilience. There is continual need for resources that foster moral repair and resilience. Without such resources, personal guilt will erode health care professional confidence. Realize that you, your colleagues and other health providers may grapple with the moral residue of COVID-19 beyond its actual period of immediate threat.

Peer support is well evidenced in reducing long-term stress-related symptoms after a health crisis. In addition to all these, professionals need to take breaks and rest in moments of a disaster. Professionals are humans and not machines – and even the machines overheat and break down.

Conclusion

Without addressing social inequalities prevalent in the global community, it will be exceedingly difficult to combat outbreaks of infectious diseases in all their forms in contemporary and future societies. Humanistic social work calls for the pursuit of social justice and human rights in fighting COVID-19 and even after the pandemic. It calls for a holistic approach in service provision catering for the physiological, psychosocial and spiritual needs of humanity. It promotes dialogue and cooperation, professional self care and peer support. It calls for the technological advancement and enhancement in sustainable stewardship. Humanistic social work reflects heavily on creating a therapeutic milieu that ensures sustainable socio-economic development, harmony and resilience even in the face of a health crisis. The global community must critically deliberate on what it really prioritizes: egotism or common good in altruism. Together, we can and divided, we fail. Let us continue to reflect on the past and present, while preparing for a better future – leaving a legacy.

Author's note

The views shared in this article do not represent the institution to which the author is affiliated to but are his own.

Declaration of conflicting interests

The author declared no potential conflicts of interest with respect to the research, authorship and/or publication of this article.

Funding

The author received no financial support for the research, authorship and/or publication of this article.

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