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# TABLE OF CONTENT ———

List of Acronyms	3
1. Introduction	4
2. Acknowledgements	5
3. Key findings	6
4. Recommendations	7
5. Methodology	9
6. Limitations	10
7. Context and case of studies	11
8. Discrimination	13

9. Lack of characterization	14
10. Information needs	16
11. Receiving and disseminating information	17
13. Barriers to information access	18
14. Trust	19
15. COVID-19 Rumors	20
16. References	2′

# **LIST** OF ACRONYMS

IFA
Information Ecosystem Analysis.

LGBTIQA+
Lesbian, Gay, Bisexual,
Transgender or Transexual,

Intersex, Queer or Questioning, Asexual and more.

MHPSS
Mental Health and Psychosocial Support.

NGO
Non-Gubernamental
Organization.

Sexually Transmitted Infections.

Sexual Orientation and Gender Identity.

Sogiesc
Sexual Orientation, Gender
Identity, Gender Expression and
Sex Characteristics.



# 1. INTRODUCTION



his report is one of three assessing information needs among people with diverse Sexual Orientation, Gender Identity, Gender Expression and Sex Characteristics (SOGIESC), indigenous, and Afro-Colombian people in three Colombian departments. The reports are part of Internews' Rooted in Trust (RiT) project, active for the second year, and build upon a similar study conducted by Internews in 2021 about Venezuelan refugees in Nariño. This report focuses on understanding information systems, trust, and information needs among indigenous people with diverse SOGIESC in Caquetá.

Through understanding these systems and needs, RiT provides actionable recommendations on how to share accurate, timely, responsive, and reliable information with indigenous people of diverse SOGIESC in Caquetá, especially in the context of health emergencies.

Understanding information ecosystems provides us with an understanding of how communities interact with the information they

receive, how and why they share information, where they seek information, and what sources or information they trust. This allows for a greater understanding of information needs, barriers, and relevance.

Reports on information needs and trust in Chocó and Vaupes are also available, as is an information landscape review, which provides an analysis of the supply side of information at the national and local levels of all three departments.

The RiT 2.0 project in Colombia works to address the impact of pandemic related information in Caquetá, Chocó, Putumayo, and Vaupés, with an intersectional approach on indigenous and Afro-Colombian people and people with diverse SOGIESC. with an intersectional approach on indigenous, afro Colombian and LGBTQI+ populations.

# 2. ACKNOWLEDGEMENTS

his report was written by the RiT 2.0 researcher in Colombia, Ana María Barajas. Caribe Afirmativo, an organization that works for the recognition of the rights of people of diverse SOGIESC in Colombia and one of RiT's implementing partners, supported the research process, data collection, feedback, and dissemination of results in Florencia, Caquetá. Caribe Afirmativo also conducted stakeholder mapping of public health institutions, NGOs, and local independent journalists.

Special thanks to Bayiber Piranga and Laura, two indigenous people with diverse SOGIESC who shared their perspectives and experiences on what it means to possess these intersecting identities in Caquetá, and to everyone who generously participated in the key informant interviews (KII), group interviews, and focus group discussions (FGD): the Health Secretary of Caquetá, the LGBTQA+ liaison at the Governorate of Caquetá, the Social Inclusion Office at the Amazon University (UDLA), GIZ's "Paz Comunal" Program, Caribe Afirmativo, and all the independent journalists who spoke with RiT.



# 3. **KEY** FINDINGS \_

- There are three key factors that influence the way in which people with diverse SOGIESC relate with the health information ecosystem in Florencia, Caquetá:
  - 1) Discrimination
  - 2) Lack of comprehensive analysis of the size, structure, characteristics, dynamics, and experiences of people with diverse SOGIESC in Caquetá
  - **3)** Lack of an intersectional approach in health services.
- Indigenous people with diverse SOGIESC in Caquetá have experienced discrimination in their communities of origin and in the urban host community of Florencia. This has been stronger and more violent on the part of armed actors. The case studies in this IEA show the importance of including an intersectional approach in all research to better understand how different characteristics in a person can affect inequality and stigmatization and, in turn,

- increase barriers to information access.
- The main barrier to information access for people with diverse SOGIESC, including indigenous people, is the lack of an organization or representative body for people with diverse SOGIESC in Caquetá. Organizations are usually fragmented and only share important information during a health emergency with their peers and friends.
- Indigenous people with diverse SOGIESC who live in Florencia and participated in this IEA said that they mainly receive information via Facebook, WhatsApp, radio, and in-person workshops. They prefer this information be clear, direct, use inclusive language, and be delivered via infographics and short videos.
- The main health information need of people with diverse SOGIESC, including indigenous

- people, is how to demand dignified treatment in health services. Trans people specified that they need information on how to access health services when their ID cards are not updated to reflect their gender as well as information about preventing and treating sexually transmitted diseases without stigmatizing them as the only carriers. They also requested information on mental health and psychosocial support and other nonhealth topics, such as employment, entrepreneurship, strengthening media outlets, and human rights.
- There is little trust in local media in Caquetá, mainly because they are perceived as sensationalist and only seeking to generate views and sell advertising without verifying or triangulating information. People tend to trust national media more as they are perceived as better verifying the information they share. National media are still

- considered biased towards specific political agendas.
- People with diverse SOGIESC experienced discrimination from public health institutions, which has undermined their trust in the information they share. People with diverse SOGIESC do not trust that their personal information will be treated confidentially when attending health services. There is higher trust in NGOs and International Cooperation Agencies, as they implement projects with an intersectional approach and have built trust-based relationships.
- The information ecosystem in Caquetá cannot be considered healthy because there are no fact checking tools to verify rumors or debunk misinformation or disinformation. While NGOs and some public health institutions provide important information on health, this is insufficient to address the rumors that are spread across social media networks.

# 4. RECOMMENDATIONS



#### **General recommendations:**

- Make intersectionality a centerpiece of all communication and dissemination planning, ensuring cross-cutting relevance across different segments of society.
- Share information that responds to the pressing needs of people with diverse SOGIESC: dignified treatment in health services, access to health services for trans people, information about sexually transmitted diseases (without stigmatizing specific population groups), mental health, employment, entrepreneurship, strengthening media outlets, and human rights.
- **Disseminate creative content,** including short 30-second videos and infographics using inclusive language and illustrations to generate interest in the information provided.
- Share information on different platforms, including social media platforms, as people do not rely only on institutional platforms to receive information.
- Use the analysis of the supply side of information in Caquetá to disseminate

- **information** that reaches people with diverse SOGIESC.
- Disseminate information via Facebook pages and WhatsApp groups as they are the main channels of use and transmission of information in Florencia.
- Improve engagement between all stakeholders – public institutions, media, NGOs, humanitarians, and grassroots organizations –to provide information to counter rumors.

## Recommendations to local media

- Establish a network for independent journalists in Caquetá to strengthen communication platforms and disseminate accurate, timely, and trustworthy information. This network could also provide support to counter censorship and seek sustainable financial solutions.
- Seek sources of financing beyond advertising, such as calls from public and private organizations and journalist networks.
- Provide reliable information. Develop fact checking tools to identify and counter misinformation and disinformation.

## Recommendations to public health institutions:

- Generate protocols and guidelines for how health care professionals should address people with diverse SOGIESC and provide workshops to implement this.
- Provide training to healthcare professionals on patient rights, focusing on the rights of people with diverse SOGIESC.
- Establish and strengthen complaint and feedback mechanisms through which people can report mistreatment and cases of disclosure of personal information.
- Provide more spaces for respectful and participatory dialogue between health professionals and people with diverse SOGIESC where feedback can be shared openly. These dialogues should be taken into consideration during decision making.
- Approve public policy for people with diverse SOGIESC by ordinance.

# Recommendations to NGOs and international cooperation agencies

- Support local independent journalists by providing training and resource opportunities. Provide journalism training to independent journalists on social media management, journalistic research, economic sustainability of independent media, addressing censorship, and responsible communication. All training should be with an intersectional lens.
- Enhance the visibility of people with diverse SOGIESC within the framework of 'do no harm' and the inclusion of people with diverse SOGIESC in designing visibility campaigns.
- Map grassroots organizations of people with diverse SOGIESC in Caquetá and convene them to establish a representative body.
- Strengthen the capacities of public health institutions on human rights, including the rights of people with diverse SOGIESC, and on intersectional and appropriate care.
- Convene stakeholders and facilitate dialogue to improve the understanding of the health information needs of diverse populations.



# 5. METHODOLOGY

he IEA for Caquetá used a qualitative approach, focusing on key informant interviews (KIIs) and focus group discussions (FGDs) to develop a stronger understanding of the experiences and perspectives of indigenous people with diverse SOCIESC living in Caquetá.

Internews conducted six KIIs: two with m the Social Inclusion office at the University of the Amazon in Caquetá.

All the information was processed and analyzed through Atlas. (View questionaries in Annex 1). For the case studies, Internews explored in depth the experiences of two people: Laura, a 30-year-old Piratapuyo trans woman who lives in the municipality of Belén de los Andaquíes, one hour from Florencia, and Bayiber, a 30-year-old Koreguaje gay man who lives in Florencia. Laura traveled to Florencia to speak with Internews about her experiences. Neither Laura nor Bayiber currently live in the resguardos or communities where they were born because they were displaced by the Revolutionary Armed Forces of Colombia (FARC) during their childhood and adolescence. Both are IDPs as well as indigenous and people with diverse SOGIESC.

Department (Target: Population group)	Actor	KII	FGDs	Number of participants
Caquetá	People with diverse SOGIESC	2	1	9
	Public health institutions	2	1	6
	Independent journalists		1	5
	NGOs/ International Cooperation Agencies SOGIESC	2		2

\*Table 2. Number of KIIs and FGDs to all stakeholders and number of participants

# 6. LIMITATIONS

his report is not representative of all indigenous people with diverse SOGIESC in Caquetá. It focuses on understanding how indigenous people with diverse SOGIESC receive, transmit, and engage with information during a health emergency. The implementing partner for this IEA, Caribe Afirmativo, works with people with diverse SOCIESC in other parts of Colombia. However, Caribe Afirmativo had no direct relationship with indigenous organizations or communities where people with diverse SOGIESC are widely accepted or included in Caquetá.

Because this topic is taboo in many indigenous communities, years of trust-building would be required to delve into the subject with the consent of an indigenous community (Interview with local NGO Caquetá Diversa, 2022). As a result, this IEA focuses on two indepth experiences, supported by FGDs with non-indigenous people with diverse SOGIESC in Caquetá and with interviews with local health institutions and independent journalists. Research for this IEA was all done in Florencia, the capital.

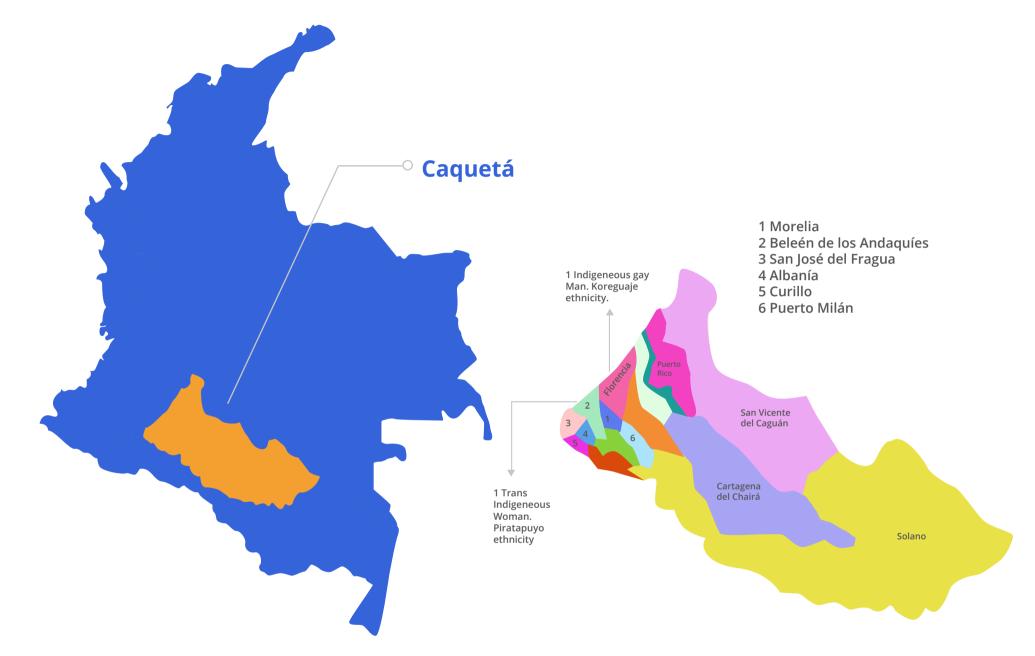


# 7. CONTEXT AND CASE STUDIES

aquetá is one of 32 departments in Colombia. Located in the southern part of the country, in the Amazon region, it borders the departments of Meta Guaviare, Putumayo, Amazonas, Vaupés, Huila and Cauca (Caquetá Governorate, 2020). Caquetá is made up of 16 municipalities and the capital city, Florencia.

Understanding the information ecosystem and information needs of indigenous people with diverse SOGIESC requires an intersectional approach. An intersectional approach is a framework that allows us to understand the simultaneous presence of two or more intersecting characteristics in a person, such as SOGIESC, ethnicity, or ability, among others, which in a given moment and social context increases their burden of inequality and produces different experiences among subjects (DANE, 2022).

Both Laura and Bayiber, whose case studies are used for this IEA, self-recognize as possessing diverse identities that define



their experiences and how they relate to information ecosystems. Both are people with diverse SOGIESC, indigenous, survivors of Colombia's armed conflict, IDPs, and in Laura's case, disabled (she has with permanent disability of one leg). Their stories help ensure

that understanding the information ecosystem is truly inclusive and that the recommendations are responsive to the needs of people with diverse identities and historical disadvantages.

### 7. CONTEXT AND CASE STUDIES

Laura is a Piratapuyo trans woman who recognized her gender identity when she was five years old. She grew up in a resguardo in Vaupés, but when she was 13 she was forcibly recruited by FARC and spent the next ten 10 years away from her family. During this time, she had to hide her gender identity to survive. When she was finally able to escape war, she moved to Caquetá, reestablished contact with her family, and began her gender transition. She is currently a radio announcer for a community radio station in Belén de Los Andaquíes municipality, where she manages a program that is a combination of entertainment, news, and opinion. She does not get paid for her work.

"I do it because I like to inform [people]. The information I disseminate is based on what I ask people in the streets, in neighborhoods... I ask people coming from the countryside how things are, or they send me videos of what is happening in their communities, and I disseminate that information through my program" (Interview with Trans Woman in Florencia, Caquetá, 2022).

Bayiber is a gay Koreguaje man who grew up in a resguardo in the municipality of Solano,

Caquetá. He and his family were forcibly displaced when he was five years old. When they arrived in Florencia 20 years ago, his family and other indigenous peoples displaced by armed conflict formed an indigenous cabildo called Choosaro Pai in which they found a support network and restored their lives in Florencia.

"It was not easy, arriving in an unknown territory, let alone a city... but with time, I made friends and learned to speak Spanish... I finished high school, did technical studies and some university in cinematography to become a film director. I also work with fashion – clothing manufacturing – and I do handicrafts" (Interview with gay indigenous man in Florencia, Caquetá, 2022).

This IEA identified a series of factors that influence how people with diverse identities relate with the health information ecosystem in Florencia. The most mentioned were:

- 1. Discrimination.
- **2.** Lack of characterization of people with diverse identities.
- **3.** Lack of an intersectional approach in health services.



### 8. DISCRIMINATION

Both Laura and Bayiber are proud of being indigenous and with diverse SOGIESC. They said the process of acceptance is different in each community and requires a lot of dialogue.

"Indigenous people I know, now [they] respect me for being who I am. I was even the coordinator of the indigenous guards, and I was one of the leaders representing indigenous peoples in the National Strike in Bogotá" (Interview with Trans Woman in Florencia, Caquetá, 2022).

Despite this, having diverse SOGIESC has been a source of discrimination in both their communities of origin in their urban host community. Both Laura and Bayiber have family members that accept them along with others who do not. However, in many indigenous communities it is still rare for people to disclose if they have diverse SOGIESC; the expectation is for them to be cisgender and have a heterosexual marriage.

"In my community, being gay is like a disease. With my family, it has been a little different

because my mother knows I am gay. At first it was a little difficult for her to accept, but she has been understanding little by little, even though she is very attached to her beliefs. She has interacted with my friends who are LGBTQIA+ and understands a little more about human rights. I explain to her that this is not a disease" (Interview with gay indigenous man in Florencia, Caquetá, 2022).

Both Laura and Bayiber noted that although they have experienced discrimination in their birth territories, this has been stronger and more violent on the part of armed actors.

"There are several gay identified men in the community. Some have been accepted by their families, but they have to [keep it secret] so armed groups do not find out. If they [armed actors] find out that someone is gay, they can kill them... [it's even] worse if they are trans" (Interview with gay indigenous man in Florencia, Caquetá, 2022).



## 9. LACK OF CHARACTERIZATION

about 1.2 million people with diverse SOGIESC in Colombia's urban centers (Ministry of Health, 2022). This number is likely underreported and existing data faces limitations, including because many people choose not to disclose their diverse SOGIESC because of fear of discrimination.

There is also no data disaggregated by department or according to various intersectional identities. In Caquetá, public policy that guarantees the rights of people with diverse SOGIESC in the department exists (Caquetá Governorate, 2019), but it is yet to be approved by ordinance (an authoritative direction) so that the state can provide the necessary resources that would make the policy effective.

"As there is still no characterization, sometimes it is difficult

to reach [people with diverse SOGIESC]. **Sometimes general calls** are made... [but] the municipalities are very small and the calls to implement affirmative actions for diverse populations are usually made through contacts, by word of mouth, talking to people, with the mayors' offices, and through social networks... However, it is not easy to reach [people with diverse **SOGIESCI** when there is no characterization and no organizations that represent them" (Interview with GIZ representative in Caquetá, Paz Comunal Program, 2022).



#### 10. LACK OF AN INTERSECTIONAL APPROACH IN HEALTH SERVICES

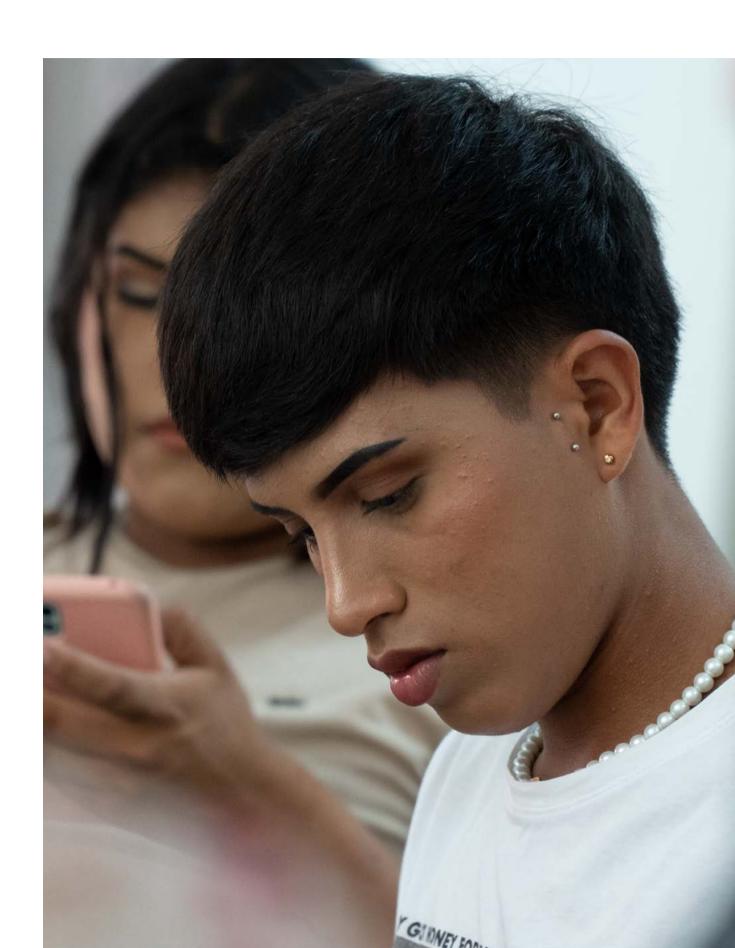
here are a lack of guidelines and protocols for comprehensive health care for people with diverse SOGIESC in Caquetá based on principles of non-discrimination and respect of diversity.

"The health system is too binary. It is designed for men and women. It is not designed to attend to people with diverse or non-hegemonic gender identities... Medical personnel assume that everyone is heterosexual and cisgender. When I go to the doctor, the least I expect is to be treated according to my gender identity... Also, with regard to mental health, there is no public mental health program with an

intersectional approach in which I could feel supported enough to receive attention" (Focus group in University of the Amazon in Caquetá, 2022).

Information provided by public health institutions to people with diverse SOGIESC is perceived as biased, discriminatory, and stigmatizing.

"When the health sector sends information to LGBTQIA+ populations, they only talk about HIV, assuming that we must have it... they have never called us to talk about COVID-19" (Focus group with SOGIESC people in Florencia, Caquetá, 2022).



## 10. INFORMATION NEEDS

Il participants with diverse SOGIESC who spoke with Internews said it is important that the information they receive uses inclusive language. COVID-19 was no longer one of their most important information needs, but there were other health subjects on which they needed more information.

#### The most mentioned were:

- How to demand dignified treatment in health institutions when health personnel stigmatize them. For example, most participants said health personnel demanded HIV tests when they learned the patients have diverse SOGIESC.
- Information on access to health services, especially for trans people and specifically on how to access gender affirming care. Many trans people are not covered by the national health system because they lack updated ID cards that reflect

- their gender identity. Often, those who have not updated their ID cards choose not to go to medical centers for fear of discrimination.
- Information about sexually transmitted infections
  (STIs). Although people with diverse SOGIESC continued to experience discrimination on this subject, they wanted preventive information that recognizes that people with diverse SOGIESC are not the only carriers and transmitters of STIs.
- Information on mental health and psychosocial support (MHPSS). Discrimination has caused and aggravated many mental health issues among th people with diverse SOGIESC. Indigenous people with diverse SOGIESC who spoke with Internews said they lacked information about where to access MHPSS support and services.

# Other non-health related areas where indigenous people of diverse SOGIESC would like more information include:

- Employment and entrepreneurship: Because of discrimination at work because of their identity, many wanted more information on how to access jobs, defend their rights, and start their own businesses.
- Strengthening their own media outlets: Organizations working

- with and supporting people with diverse SOGIESC need technical and financial support to strengthen their own media and disseminate information that is important and relevant to people with diverse SOGIESC.
- Human rights: This is a crosscutting need that empowers people with diverse SOGIESC to understand and access basic services and employment opportunities, as well as how to demand dignified treatment in health services.



#### 11. RECEIVING AND DISSEMINATING INFORMATION

ommunities receive, use, and transmit information differently. Indigenous people with diverse SOGIESC involved in this study said they received information via Facebook, WhatsApp, radio, and face-to-face workshops.

Most information received by indigenous people with diverse SOGIESC was via Facebook.
This included information from local media, public institutions, NGOs, humanitarians, and grassroots organizations.

People with diverse SOGIESC are concerned with visibility and wanted more campaigns centered on inclusion and combatting stigma. Facebook has played an important role in visibility. Caquetá Governorate publicly posted about the 2022 Pride Parade and shared videos telling stories of different people with diverse SOGIESC (Interview with LGBTIQA+ liason at Caquetá Governorate, 2022). This was mentioned by all participants and was considered a success.

The preferred formats to receive information in a health emergency are short videos and infographics in which people with diverse SOGIESC are represented and language is inclusive.

- In a health emergency,
   WhatsApp is the timeliest
   channel to share information
   among people with diverse
   SOGIESC in Florencia.
   WhatsApp is the main channel
   of communication for sharing
   information with friends, family,
   and organizations. Collectives
   of people with diverse SOGIESC
   have group chats where they
   share memes, jokes, and health
   information.
- Radio is a very important channel for listening to indepth information on different topics. For example, Laura was able to disseminate information via community radio on humanitarian aid and recommendations on how to protect oneself from COVID-19.

In Florencia, youth listen to different local and national radio stations, including Radio Universidad (local – public), Caracol Radio (national – commercial), and La Caqueteña (local – commercial). Bayiber listens to the indigenous community station, Koreguaje Stereo, and Laura listens to and participates in Andaquí Radio (non-indigenous).

 Participants said face-toface workshops are the most effective format for presenting information and fact checking common rumors because they allow people to ask questions, resolve doubts, and better understand the information that is being transmitted.



#### 12. BARRIERS TO INFORMATION ACCESS

The main barrier to information access for indigenous people with diverse SOGIESC who spoke with Internews was the lack of an organization or representative body. People said they believe they are missing information that could be useful to them and the existence of such an organization or representative body would allow them to establish and maintain permanent relationships with different stakeholders. This would in turn allow them to coordinate intersectional affirmative action. projects, programs, and health information dissemination strategies. They also said there are many fragmented organizations that only share information among people they know. This, together with the lack of characterization of people with diverse SOGIESC, has imposed barriers to information access.

This is consistent with the experiences of different NGOs and actors like GIZ. "Clearly there is a lack of collective organization, which is an important challenge, because it is not easy to reach a population group when there is no one [that we know of] to represent them or [through which to engage in] dialogue, identify common needs, and propose solutions" (Interview with GIZ representative in Caquetá, Paz Comunal Program, 2022).



# 14. TRUST

#### Media

There is very little trust in local media in Caquetá because they are perceived as sensationalist, publishing information without verifying it and without triangulation. This was echoed by indigenous participants with diverse SOGIESC. The people who spoke with Internews said local media's goal is primarily to sell advertising. This was also emphasized by independent journalists: "I believe that here in Caquetá, if it does not sell, it cannot be published. The personal challenge for me as an independent journalist is that I make tremendous effort to check sources and publish truthful news, but there are other media with more advertising and sensationalist, irresponsible news that overshadow the work I do" (Focus Group Discussion with local independent media and journalists, 2022).

People place more trust in media outlets who are seen as verifying their information. For example, Laura and Bayiber search for national news on Facebook and rely on information they perceive as unbiased and without pushing a particular political agenda.

"I always listen to Caracol Radio at 6 a.m. on Facebook and I look for national stations that try to be unbiased because there are also many national media that distort information according to their agenda. I have stopped listening to some national media because of that, but in general I trust [national medial more than local media. As a local radio broadcaster, I always verify sources and go to the scene, but this is not common among local media" (Interview with Trans Woman in Florencia, Caquetá, 2022).

#### **Public health institutions**

Trust in public health institutions has been undermined by negative, discriminatory experiences. Public health institutions are more trusted than local media, and people tend to trust published health information. However, people with diverse SOGIESC do not trust that their information will be treated confidentially. All people with diverse SOGIESC who spoke with Internews said that when they have been tested for HIV, health personnel have disclosed that information. As a result, they prefer to travel to other cities for testing.

"Medical personnel here have no ethics. Whenever we go, they associate us with promiscuity and HIV, and even if we do not ask for it, they test us. When I need to get tested, I go to Neiva or Bogota, because here they spread everything, probably because in Florencia we all know each other and people like to gossip" (Focus group with SOGIESC people in Florencia, Caquetá, 2022).

# NGOs and International cooperation agencies:

People with diverse SOGIESC told Internews that they trust NGOs and humanitarian organizations because they have provided information using an intersectional approach. For example, during COVID-19 confinement measures, a state measure called pico y género allowed men and women to circulate on different days to try to control mass movement and avoid contagion. However, this was discriminatory for many trans and non-binary people who experienced mistreatment and violence when they went out. NGOs such as Caquetá Diversa and Caribe Afirmativo were crucial in providing information on how to report cases of violence and demand

respect for their rights. NGOs and international cooperation agencies that spoke with Internews said they also focused some of their messaging and programming on marginalized groups, including people with diverse SOGIESC.

## **Civil society and grassroots organizations**

There is a lack of grassroots or civil society organizations representing people with diverse SOGIESC in Caquetá. Although there are some collectives and grassroots organizations who provide information to people with diverse SOGIESC, they only provide information to a closed group of people. One of the main challenges faced by the LGBTQIA+ liaison of Caquetá was meeting with different organizations to increase participation and representation of people with diverse SOGIESC in public life and to facilitate the implementation of projects and dissemination of information targeted at people with diverse SOGIESC.

Bayiber and Laura said there are grassroots organizations that provide them with health information.

However, these organizations lack an intersectional approach.

# 15. **COVID-19** RUMORS \_\_

Rumors of COVID-19 reached Caquetá mainly through social media networks, especially Facebook. Of the three departments in which Internews conducted IEAs – Caquetá, Choco, and Vaupes – Caquetá has the highest rate of internet penetration, at 60.5%. This is higher in urban areas than in rural and dispersed areas (DANE, 2021).

All participants said rumors about COVID-19 were disseminated across Facebook and many people believed them. It was suggested that this was because there are no fact checking mechanisms in the department to identify misinformation and disinformation. The most common COVID-19 rumors were:

- People who get vaccinated get sicker than those who do not.
- The vaccine inserts a chip to control the population.
- The vaccine leads to sexual impotence.

Participants said COVID-19 is

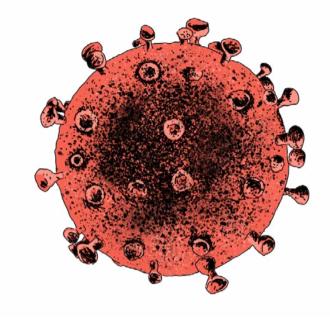
no longer a major information need. However, many people were not vaccinated because they believed the rumors that circulated (Focus Group Discussion with local independent media and journalists, 2022). The information ecosystem in Caquetá is not perceived as healthy enough for people to make informed decisions in a health emergency crisis, mainly because of the lack of fact checking tools; lack of opportunities to strengthen local journalists and

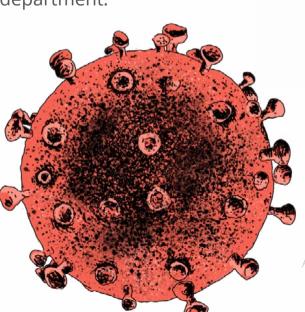
their sustainability beyond advertising; and lack of diverse information channels to disseminate accurate, timely and reliable information on health topics.

"There are hospitals that disseminate very good information on COVID-19 and have improved their [messaging] content, but very few people actually visit the communication pages of public health institutions. The vast majority are informed by

social media networks and local media, which are not reliable" (Focus Group Discussion with local independent media and journalists, 2022).

NGOs and humanitarian organizations that provided humanitarian assistance and information about access to health services and human rights during the pandemic did not focus on fact checking rumors. While many organizations provided information on vaccines and biosecurity measures to avoid contagion, this information was insufficient to address misinformation and disinformation that was spread through social media in the department.





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## **INDIGENOUS PEOPLE WITH DIVERSE SOGIESC IN CAQUETÁ**





