In this bulletin, Internews profiles commonly occurring rumors from across social media sites in Lebanon. Featured rumors include false preventative methods, long-term impacts of COVID-19, and allegations that the virus is a hoax.

Data was collected from Facebook, WhatsApp, Twitter, and Instagram pages, groups, and accounts that have a relatively high user engagement. Similar rumors were expressed and identified in field work conducted by various actors working in Palestinian and Syrian refugee camps in Lebanon.

**How We Do It:**

The analysis presented here is based on 557 rumors collected by Internews’ Lebanon Rooted in Trust team and Maharat Foundation from October 17 to November 7. A social media mapping exercise underpins our qualitative approach to listening by pinpointing where discussions about COVID-19 are happening and highlighting key influencers of information.

Feedback highlighted in this bulletin is selected based on a risk assessment matrix that accounts for: the frequency of times the point was shared, level of engagement, and its potential impact on individuals, the community, and pandemic-response services.

While most rumors reflected here were collected from social media, CSOs and UN organizations operating in Palestinian and Syrian refugee camps confirmed that these same rumors are circulating in the communities they work with. Nejdeh Association shared 25 rumors circulating in 12 Palestinian camps in October and November. The rumors’ risk levels ranged from high to low, and included perspectives such as the belief that hot tea kills the virus, that reinfection is not possible, and that antibiotics can be used to treat COVID-19.

If you or your organization are hearing rumors and misinformation that you feel should be reflected in future bulletins, please contact hmccoin@internews.org.
The use of home remedies to prevent against COVID-19 has been common around the world since the beginning of the pandemic. People in Lebanon could be turning to more affordable home remedies as an alternative to traditional personal protective equipment (PPE) such as masks, sanitizers, and cleaning agents due to the increase in price of imported goods in Lebanon. They could also be turning to these remedies because they are familiar, comforting, and often used to treat symptoms of similar illnesses such as the common cold or seasonal flu.

While the immediate health risks of prevention methods mentioned here are low, their prevalence indicates that people could become receptive to harmful and unproven treatment methods in the future. The possibility of such risky behaviors being taken in Lebanon must be acknowledged quickly and thoroughly to avoid potential harm.

While awareness sessions are ongoing to inform people of proven prevention methods, the high rate of exchange of this rumor across social media shows that awareness raising must continue, particularly that which accounts for the financial pressures people face in adhering fully to traditional prevention measures. Awareness raising sessions could incorporate trusted figures from the community who people are more likely to listen to such as community leaders, mayors (mokhtars), or local religious figures.

Distributing free PPE equipment can also ensure that people have the option of proven prevention methods despite the financial costs.
Given that the long-term impacts of COVID-19 are still being defined, awareness on the proper use and benefits of PPE is crucial for communities worried about contracting the virus. Providing information on what we know so far about the virus’s impacts.

In the meantime, addressing these fears and questions is important to boost factual knowledge of COVID-19 and to reduce prejudice that could be experienced by long COVID-19 sufferers, who might not be taken seriously by friends, family, and medical professionals.

According to a report published by WHO on September 9, in some cases symptoms may not go away for weeks or months even after initial recovery. However, people are not infectious to others during this time. Such experiences are not visible in all cases of people infected with the virus.

In a study conducted by the University of Paris on August of 2020, COVID-19 survivors stated that symptoms such as memory loss and difficulty concentrating were persistent for up to four months after recovery.

There is still much to learn about how COVID-19 affects people after they have recovered, and more research is needed to confirm the severity and duration of the virus’s impacts.

Continuing two-way conversations with the community to understand how the long-term impacts might be affecting people and look for ways that humanitarian operations can support those people.

Providing support and assistance to recovering patients who suffer from the long-term impacts after recovery is particularly important for vulnerable communities who may have limited access to health care in Lebanon.

‘Scientists reveal that Corona weakens the heart!’

Source: Twitter page 'Leb Now', 13.1K followers.

Figure 5: Categorized rumors on long-term health impacts of COVID-19.

27 rumors related to long-term impacts of COVID-19 were shared across social media platforms in the past two weeks. Concerns and rumors ranged from impacts on physical and mental health, to impacts on economies and population demographics around the world.

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Figure 5: Categorized rumors on long-term health impacts of COVID-19.
Although the ‘COVID-19 is a hoax’ rumor was addressed in Internews’ last bulletin, the persistence of this rumor in the past two weeks shows that humanitarians and journalists can expect continued disbelief in the virus among the communities they serve.

Disbelief in COVID-19 could discourage people from taking preventative measures and lead to increased community transmission, posing long-lasting risks to Lebanon’s already struggling medical sector.

The claims that COVID-19 is either a political or economic ploy can be linked to other circulating rumors in Lebanon, such as claims that the confirmed cases are being exaggerated by the Ministry of Public Health (MoPH) in order to receive more funds from international organizations.

According to a study published by The American Journal of Tropical Medicine and Hygiene, ‘COVID-19 pandemic is among the deadliest infectious diseases to have emerged in recent history.’

According to the WHO, 104,267 cases and 806 deaths have been recorded in Lebanon since January 3rd.

The spread of fake news about COVID-19 has caused harm and deaths that could have been avoided. There are various sources online for personal testimonies from people who contracted the virus, and even those who once believed it was a hoax, in Lebanon and abroad which can give a human face to the virus.

In October, Campji, a grassroots media initiative run out of Syrian camps in Lebanon, published a series of testimonials from Syrians directly impacted by COVID-19: https://fb.watch/1ocF-dEnOf/

ICRC in Lebanon also published this video about COVID-19 in Ain Helwe Palestinian camp in Lebanon: https://www.youtube.com/watch?v=ktYsCzGqRLU&list=PLulvDtcD9wi oeh8dFE3tIMPPDT1IFnDj&index=7

Figure 6: Categorized rumors that COVID-19 is a hoax.

57 rumors describing COVID-19 as a hoax were recorded. To better understand the root of these rumors, Internews categorized them around four primary themes: 1) COVID-19 doesn’t exist at all, 2) the virus is spread for economic reasons, 3) the virus is spread to control the population and lastly, 4) that COVID-19 poses no higher risk than the common cold.

Acknowledgment that these beliefs are present in many communities in Lebanon, and that they are rooted in real frustrations about Lebanon’s current political and economic crisis.

Address the reasons and frustrations that lie beneath the disbelief in COVID-19 as a first step to dispelling this common rumor.

Frontline health and outreach workers can address the differences between COVID-19 and the flu as we enter the flu season.

“"This is global, biological warfare! What I fear most is a new virus counterattack more vicious than Corona, and people will be the victims!”
posted by a Lebanese doctor on his Facebook page, 6,793 followers.

HOW CAN HUMANITARIAN ACTORS HELP?

Acknowledge that these beliefs are present in many communities in Lebanon, and that they are rooted in real frustrations about Lebanon’s current political and economic crisis.

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*WHAT THEMES DO WE USE TO ANALYZE COMMUNITY FEEDBACK?

- **Testing**: Information about testing kits, test results, testing procedures, etc.
- **Cause**: The suspected origins of COVID-19.
- **Treatment/cure**: Treatment methods, potential, or so far unproven cures.
- **Preventative**: Information on substances or at-home remedies used to prevent contraction or transmission of the virus.
- **Vaccine**: Discussion of vaccines or vaccine trials.
- **Reinfection**: Information regarding reinfection, reemergence, or relapse in people or animals.
- **Symptoms**: Information describing confirmed or so-far unconfirmed symptoms of COVID-19.
- **Hygiene**: Advice on proven or so-far unproven hygiene measures thought to control spread of the virus.
- **Travel**: Travel bans, restrictions, road closures, or shutdowns.
- **Prejudice**: Expressions of xenophobic, racist, or prejudicial content linked to transmission or contraction of the virus.
- **Healthcare**: Health care options or services.
- **Government**: State-mandated regulations or shut-downs related to the virus.
- **Transmission**: Information--proven or non--regarding how COVID-19 spreads.
- **Immunity**: Information regarding who can or cannot contract COVID-19 or who is at heightened risk of complications.
- **Impacts**: Any content that claims disproportionate or uncorroborated impacts, either on an individual or the larger community.
- **Hoax**: For any content that claims COVID-19 is no longer an issue or never was, or that the pandemic is a conspiracy.
- **Organization**: Information regarding an international institution, national or local government, or locally-registered organization.
- **Other**: For any content that doesn’t fall into the other thematic categories.

**HOW IS RISK DEFINED?**

Risk is measured by Rooted In Trust Data Analysts, Information Managers, and Social Media Monitors based on a range of factors including: a) cultural relevancy, b) timing, c) online engagement, d) the believability of a rumor, and most importantly, e) the potential negative impact a rumor may have on the health, well-being, and safety of local communities or service providers.

**HIGH RISK**: A rumour that is very likely be believed among the larger community with potentially severe impacts resulting in serious harm to an individual or group such as inciting violence or creating widespread fear or panic. High risk rumours may encourage avoidance of testing and treatment, or harm towards health workers and other service providers.

**MEDIUM RISK**: A rumor that has the potential to be believed among the larger community which poses moderate negative impacts to a community or an individual's health, well-being, or safety. Medium risk rumors may have a moderate impact on health-seeking behaviors.

**LOW RISK**: A rumor that is either unlikely to be believed among the community or which would cause minimal negative impacts to a community or individual's health, well-being, or safety or to the pandemic response.


