

RUMOR BULLETIN #3

FOR HUMANITARIANS | 28 NOVEMBER 2020



مبادرات
Maharat

In this bulletin, Internews profiles topics including criticisms of the two-week, country-wide lockdown and rumors about treatments for COVID-19 and reinfection. These rumors were collected between November 9-22, 2020, and were chosen from 335 rumors collected across this two-week period.

This bulletin covers the following topics:

- Page 1: Overview of 335 rumors
- Page 2: Rumor tracking methodology | Information Ecosystem Assessment
- Page 3: Rumors about prevention and treatment for COVID-19
- Page 4: Community perceptions about country-wide lockdown
- Page 5: Themes, risk matrix, sources

Internews

Rooted in Trust (RiT) is a USAID Bureau of Humanitarian Affairs (BHA)-funded project run by Internews to support humanitarian and public health agencies combat and manage the spread of rumors and misinformation about COVID-19.

In Lebanon, Internews works with Maharat Foundation to collect and analyze rumors and misinformation related to the SARS-CoV-2 virus and COVID-19 disease.

For more information, or to submit rumors, please contact Internews' Project Coordinator Haley McCain, hmccoin@internews.org

COVID-19 SITUATION IN LEBANON

Lebanon is currently completing its second week of a country-wide lockdown. The country confirmed 1,188 cases on Wednesday, November 25 with a total of 118,664 cumulative cases to date*.

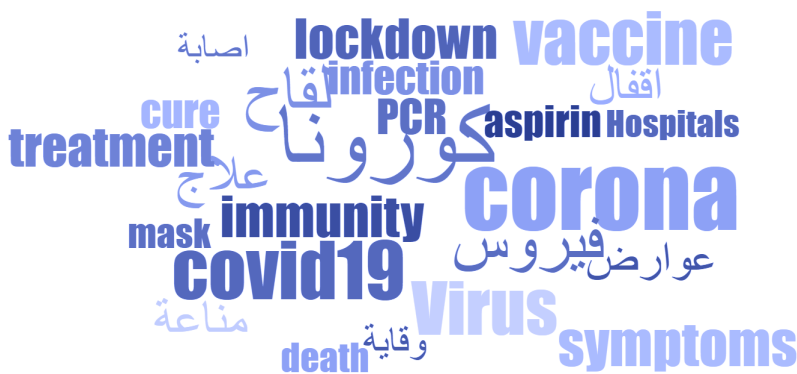


Figure 1: Most common keywords for COVID-19 rumors in Lebanon between November 9 and 22. Source: Internews Rumor Dashboard.

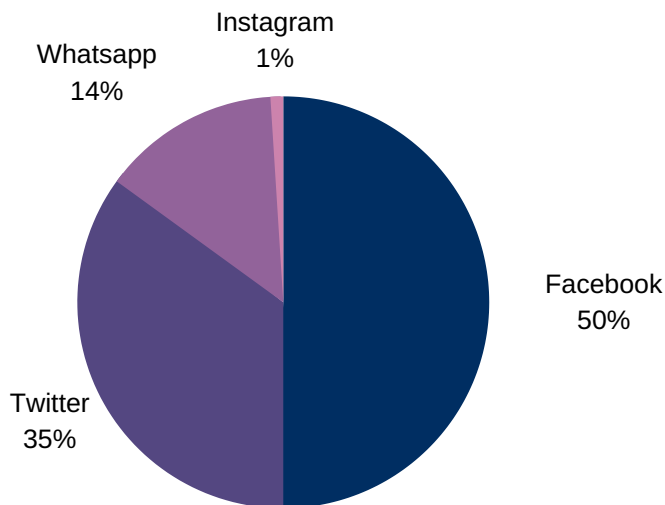


Figure 2: Distribution of 335 rumors by platform

*Source: Lebanon COVID-19 Dashboard <https://bit.ly/2Jhd04w>

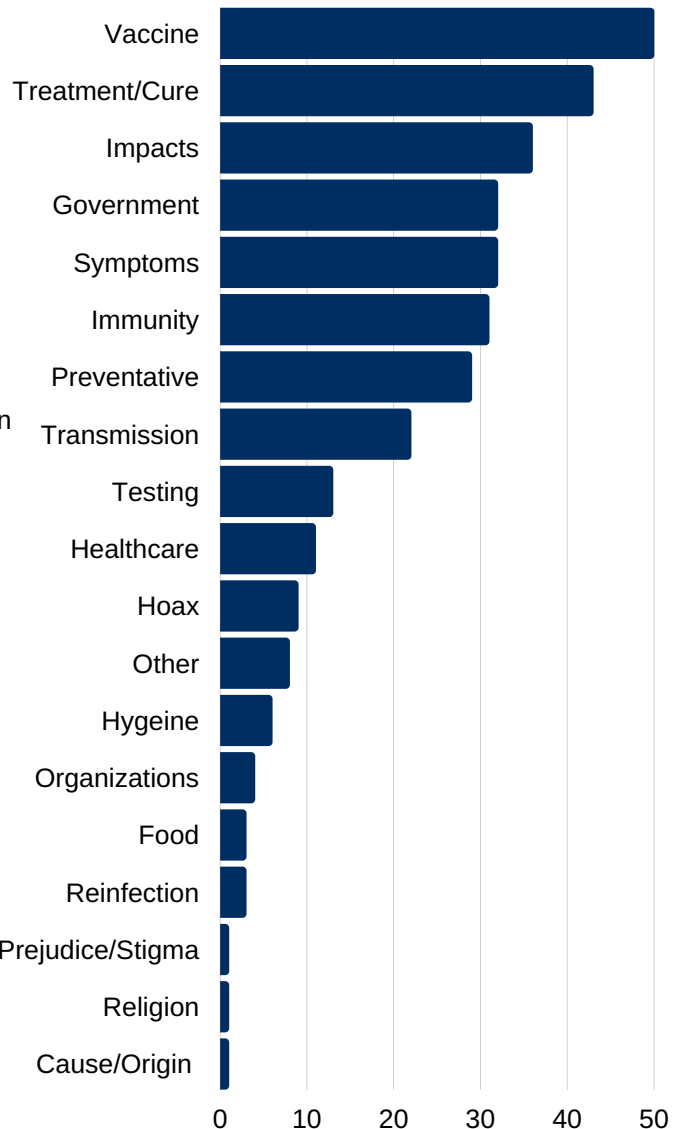


Figure 3: Distribution of 335 rumors by themes



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HOW WE DO IT:

Our social media mapping exercise underpins a qualitative approach to social listening by pinpointing where discussions about COVID-19 are happening and highlighting key influencers of information. This regular collection of community insights aims to provide humanitarian and public health agencies ideas for integrating and aligning their risk communication activities with community perspectives and needs.

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

An Information Ecosystem Assessment (IEA) underpins our analysis by identifying how COVID-19 rumors are impacted by other aspects of the information ecosystem in Lebanon.

INTERNEWS RUMOR TRACKING METHODOLOGY

While collecting rumors, Internews does not ask for rumors but rather records peoples' main concerns, allowing them to set the agenda. This approach prioritizes a qualitative analysis over a quantitative bulk of rumors collected. Rumors are not only collected through social media, but also through direct communications with the community via listening groups and feedback from local and international NGOs working in the community.

THE INFORMATION ECOSYSTEM ASSESSMENT

The Information Ecosystems Assessment (IEA) is an integral part of Lebanon's Rooted in Trust project and aims to produce high-level analysis on the information environment in Lebanon. Through key informant interviews (KII), focus group discussions (FGD), and desk research, the IEA analyzes how communities interact with Lebanon's information ecosystem and works to identify the most effective channels for filling information gaps. The assessment seeks to understand the perspective of the information consumer and focuses on the informal, cultural, and digital factors which can either reinforce or disrupt information flow. The analysis covers trends before and during the COVID-19 pandemic, with a focus on rumors, misinformation, and propaganda, with a specific focus on how these themes impact refugee communities in Lebanon.

INITIAL FINDINGS IN LEBANON:

Lebanon has a high-literacy rate and a media-savvy population, and freedom of expression is generally accepted, with a few legislative exceptions. However, while the media landscape is vast in its reach and programming style, it is partisan and political in nature, which affects its reporting and credibility. Alternatively, emerging community and digital media outlets are focused more on non-biased reporting and independent journalism. Information around COVID-19 is generally available to most communities in Lebanon, but legal and medical information is less accessible to vulnerable and marginalized populations such as refugees. Such information is not always readily available in a timely fashion, and refugees' issues and concerns are not often reported by the media. These points have been commonly expressed in recent KIIs and FGDs conducted by Internews in October and November 2020.

Internews will publish its full set of findings in January 2021. For more details on the IEA's progress, contact Rayane Abou Jaoude, Internews' Research Coordinator: raboujaoude@internews.org

Five components of Internews' rumor tracking methodology:



ASPIRIN AND OTHER 'TREATMENTS' FOR COVID-19

Several home remedies and medications have been described as effective treatments for COVID-19 since the beginning of the pandemic. Aspirin as a treatment was commonly mentioned on Lebanese social media in November.

While it has been shown that aspirin is effective in treating some symptoms of COVID-19, there is no evidence suggesting that it cures the disease or that it is an effective preventive treatment. However, studies are ongoing to understand Aspirin's role in treating COVID-19. According to research conducted by the University of Maryland on the benefits of aspirin for COVID-19 patients, patients should check with their doctors before taking aspirin since it is not safe for people taking other medications or who have chronic kidney disease [1].

WHY DOES IT MATTER?

The availability and spread of so far unconfirmed treatments could deter people from seeking hospitalization when needed, and could likewise cause adverse health impacts. As such topics continue to be discussed in Lebanon, there is an urgent need to address the appetite for such unproven remedies through awareness raising and by providing affordable, scientifically-proven options for testing and treatment. Internews has previously reported on the so far unproven use of antibiotics, antivirals, vitamins, and home remedies for treating COVID-19.

Further analysis and recommendations on how to address these rumours can be found in our previous bulletins:

<https://internews.org/resource/rooted-trust-rumor-bulletins-lebanon>

“Surprising research results, masks do not provide any protection against Corona!” posted on Lebanon 24 Facebook Page.

‘Masks are not effective in prevention’
Such rumors are particularly risky because Lebanon has already reached advanced transmission phase of the virus.

One Lebanese woman on Twitter mentioned:
“Take aspirin with your lunch, and an onion with your dinner, that’s the treatment. Otherwise, the hospitals will stay full.”

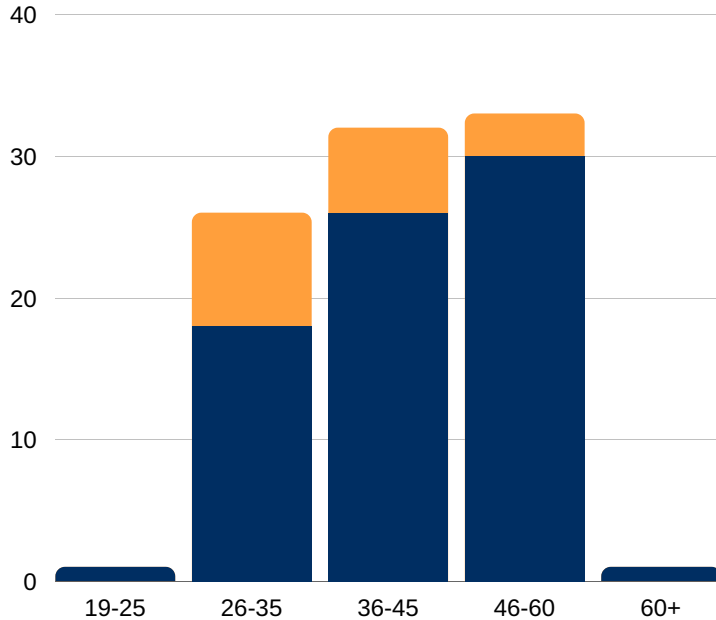


Figure 5: Distribution of the 335 rumors by gender and age groups

MALE **FEMALE**

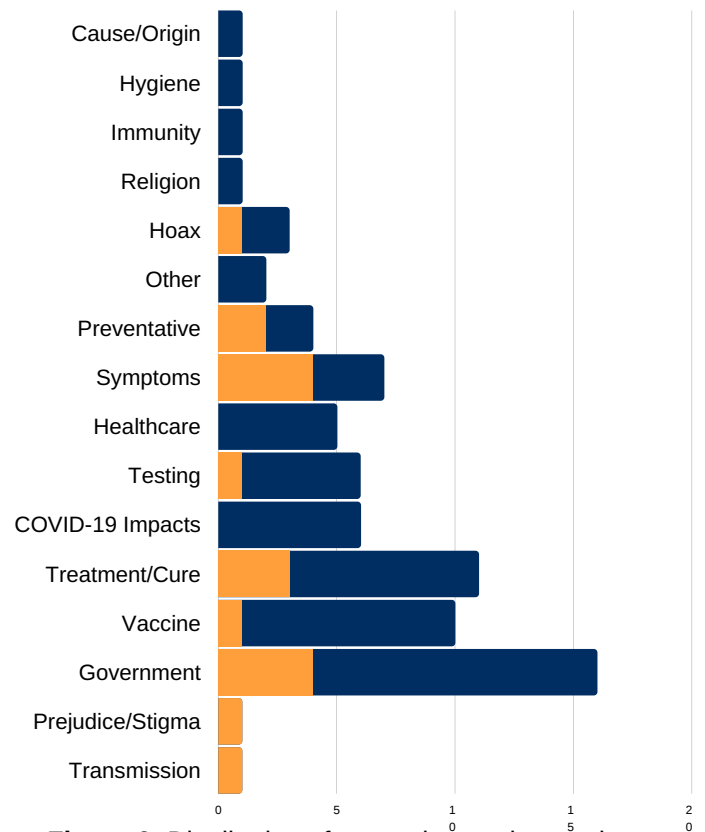


Figure 6: Distribution of rumor themes by gender

Note that Figures 5 and 6 represent 23% of the rumors collected for this bulletin. Data on gender for the remaining 77% of rumors was unidentifiable.



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WHAT ARE PEOPLE SAYING?

LOCKDOWN CRITICISMS

Social media monitoring during the past two weeks indicated a general distrust and frustrations towards the country-wide lockdown. People went online to question the efficiency and feasibility of yet another lockdown as well as security forces' ability to properly enforce it.

People also criticized the government for not having a plan in place to compensate and financially support people and institutions impacted by the lockdown.

“
‘Is it worth it to put the country on lockdown because 10 people have Corona?’
 Al Danniyeh Facebook page whose main audience is people residing in northern Lebanon.
 ”

HOW CAN HUMANITARIAN ACTORS HELP?

Explaining the importance of lockdowns in curbing hospital saturation and further outbreak can help persuade people to adhere to lockdown measures. Such awareness raising methods are more effective if carried out prior to a lockdown.

Discuss and consult with different communities—especially the most vulnerable ones—the best ways to maintain their livelihoods while reducing risk of exposure to the virus.

Humanitarians should consider the economic impacts of a prolonged lockdown and the added hardships, and adapt their livelihoods and cash assistance programs accordingly.

WHY DOES IT MATTER?

According to the Lebanese Internal Security Forces (ISF) as of November 24, the ISF has issued 27,653 fines at a rate of 50,000 Lebanese Pounds (LBP) for non-compliance to the lockdown. This rate is particularly costly for community members receiving their salaries in LBP or who have been laid off due to the lockdown [2].

According to WHO, pandemic fatigue is a big challenge for controlling the spread of COVID-19, as it triggers non-compliance to lockdowns and movement restrictions [3].

Lebanese and refugee communities are facing pandemic fatigue coupled with distrust in the government's ability to control the pandemic amidst a major economic crisis. The economic situation as well as societal distrust is more extreme in November than during Lebanon's first lockdown in March, when compliance was likewise much higher than today.

Low compliance will inevitably weaken the lockdown's intended impact on COVID-19 cases in Lebanon, which could risk leading to hospital saturation and future lockdowns.

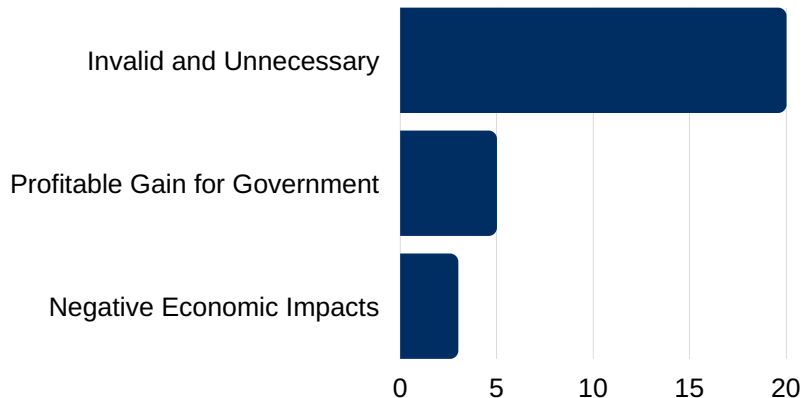


Figure 4: Categories of criticisms to the two-week lockdown

FACTS

A study published by the Annals of Medicine and Surgery used COVID-19 data from 49 countries including Lebanon to analyze the impact of lockdowns. The study offers initial evidence that lockdowns play an important role in suppressing the spread of COVID-19 and in helping healthcare systems adapt to rapidly increasing case rates [4].

The WHO has recognized that lockdown measures can have a negative impact on individuals, communities, and societies as they disrupt social and economic life. However, the organization also acknowledges that in certain situations a complete lockdown is needed to curb the spread of the virus and prevent a health system from collapsing.

*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.

SOURCES

1. Kotz, D., October 2020, New Landmark Study at UM School of Medicine Finds Aspirin Use Reduces Risk of Death in Hospitalized COVID-19 Patients, University of Maryland, School of Medicine, <https://www.medschool.umaryland.edu/news/2020/New-Landmark-Study-at-UM-School-of-Medicine-Finds-Aspirin-Use-Reduces-Risk-of-Death-in-Hospitalized-COVID-19-Patients.html>
2. ISF Facebook Page <https://www.facebook.com/lebisf/>
3. WHO, October 2020, Coronavirus disease (COVID-19): Herd immunity, lockdowns and COVID-19, <https://www.who.int/news-room/q-a-detail/herd-immunity-lockdowns-and-covid-19>
4. Atalan A., August 2020, Is the lockdown important to prevent the COVID-19 pandemic? Effects on psychology, environment and economy-perspective, Annals of Medicine and Surgery, Volume 56, Pages 38-42, 10.1016/j.amsu.2020.06.010
5. WHO Lebanon COVID-19 Dashboard, <https://covid19.who.int/region/emro/country/lb>