In June 2020, 13,286 Venezuelan migrants were reported in Nariño, 35% of which were concentrated in Ipiales and 9% in Tumaco. The uncontrolled humanitarian crisis resulting from the border closure left thousands of migrants "trapped" in Colombia, many of which were living in the streets or in improvised and overcrowded shelters, making it difficult to maintain social distancing standards and consistent washing of hands. On October 26, 2020, 21,286 cases of COVID-19 were reported in the department of Nariño, 10.77% in Ipiales and 9.41% in Tumaco. According to the Departmental Health Institute of Nariño, only 28 migrants have been diagnosed positive with COVID-19.

HOW DO WE DO IT?
The Venga le Cuento Rumor Bulletin is the product of the collection of rumors detected by the Colombian team as part of the Rooted in Trust project. In the period between April and October of this year, the team collected 117 rumors from social media sources commonly used in Nariño (88 from Facebook, 16 WhatsApp, 10 Twitter y 3 from other social media). The rumors discussed here were selected through a risk analysis that brings to the forefront the disinformation with the highest risk and potential impact on the communities of Ipiales and Tumaco, which are the target communities of the Rooted in Trust Colombia project.

WHAT DOES THE COMMUNITY SAY?
"Those venecos (pejorative term for Venezuelans) are coming on the trails between Colombia and Ecuador, weak, malnourished and worm infested... And who knows if they are infected. 28 cases in Nariño, a few days ago there were only 7."  
Male  
Twitter comment, April 2020

The arrival of the COVID-19 pandemic, and the fear of massive infections has brought with it discriminatory attitudes and comments against Venezuelan migrants in Ipiales. This rising xenophobia was observed through the increase in WhatsApp chains with hateful messages towards migrants as well as instances of violent attacks on migrant shelters reported in July.

WHY IS THIS IMPORTANT?
- Fear and uncertainty in the middle of the pandemic is understandable but this fear does not justify xenophobia and racism.
- Misinformation that migrants spread the virus can wreak havoc, put lives in danger, and impede people from making the right decisions to protect themselves, their families and their community in general.
- Migrants already find themselves in a vulnerable situation. Xenophobia only aggravates the exclusion of this population, undermining the response to COVID-19.
- Is it essential that the flow of verified information for and about refugees, Venezuelan migrants, and their host communities moves through the communities to calm the fear and quiet the misinformation.

FACTS
There is no evidence to prove that the cases of coronavirus in Nariño have increased with the arrival of migrants. On the other hand, it is possible to demonstrate the difficulties that the migrant population has experienced, no matter whether they are temporarily or determinately settled in the Nariño department. According to the authorities, since the beginning of the pandemic, 100 people cross the Colombia-Ecuador border daily through 37 different irregular channels, a situation that exposes them to additional violations of their rights and decreased access to health services.

HOW CAN HUMANITARIAN ACTORS HELP?
- Improve awareness campaigns that promote social cohesion and remind the authorities, community leaders, and society in general that every person has the right to be treated with dignity and respect, and that those without nationality- including those "stranded" because of the border closure- have the right to access essential services without fear of retaliation.
- Provide public information based on facts and scientific data in order to avoid contributing to the xenophobia and racial discrimination. People can only make the right decisions to protect themselves if they have access to accurate information about how the virus is spread.
- Incorporate efforts to prevent violence and crimes motivated by hatred towards migrants and other groups due to their nationality or ethnic origins in your programs. Emphasize the obligation of the Colombian state to bring those responsible for such crimes to justice.
- Reinforce accountability and the inclusion of the humanitarian principles and international law of human rights.
In September on Twitter, a message circulated that suggested that within the municipality of Tumaco, the number of COVID-19 cases had stalled because of the supposed immunity that comes from antibodies generated by humans who live in environments exposed to Dengue.

The tweet was based on a study by Miguel Nicolelis, a professor at Duke University, who analyzed the geographic distribution of cases of coronavirus and dengue in various zones of Brazil, and concluded that the places with fewer cases and the slowest increase of COVID-19 corresponded with the places that had suffered the worst outbreaks of Dengue in 2019 and 2020.

The existing data is not sufficient to establish a strong relation between the cases of COVID-19 and the presence of antibodies for dengue.

Up until the 11 of October, 398 cases of dengue and 19,754 of the coronavirus were reported in Nariño. This is to say that for every case of dengue, there were 50 COVID-19 cases, which allows the inference that immunity suggested by study in Brazil is not realistically applicable in the department of Nariño.

There may be a reduction of cases of dengue reported because of the precautions taken for COVID-19, due to the fact that there is a decrease in consultations with medical services for fear of contracting the virus. And the fever-expressing illnesses like dengue are sometimes under-diagnosed because of the sensitivity with the personnel working with COVID-19 cases.

There are reports of concomitant dengue and COVID-19 infections, which goes against what is stated in the article by Miguel Nicolelis. The medical missions should be vigilant as the initial symptoms of dengue and COVID-19 can be similar.

The dynamics of the dengue and COVID-19 epidemics in Colombia do not show similar behavior. Dengue is present in municipalities under 2,200 meters above sea level, COVID-19 is present in municipalities at all heights of sea level in the country. Additionally, there is a concentration of COVID-19 in urban centers.

Listening to communities will help identify gaps in the understanding of COVID-19.

Focusing on these gaps and the information needs of the community can help fight misinformation and rumors and reinforce public health messages.

Promote the message that some traditional and ancestral medicine practices help alleviate some symptoms of COVID-19, but they do not completely cure the disease. And in serious cases, or cases with persistent symptoms, it is necessary that one go to the health centers or medical organizations available to them.

Emphasize that dengue and COVID-19 are two different diseases. Their initial symptoms may be similar but you should go to health centers.

Working with trusted community leaders will resolve questions about COVID-19. Highlight the ABC of COVID-19: forms of transmission, diagnosis, care, quarantine and clinical treatments.

Share stories of healthcare workers in the fight against COVID-19 and the role of the medical community and those on the front lines.

Any suggestions or information that might support or help government authorities and humanitarian agencies to manage disinformation are welcome.

Please contact Rocio Lopez Íñigo: rlopez@internews.org

Global Humanitarian Liaison Officer, Rooted In Trust

World Health Organization

Center for Disease Control and Prevention

National Institute of Health

Sources:

Ministry of Health

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