During the week of November 2-8, 2020, 141 cases of COVID-19 and 1 death were recorded in Mali. 9 regions and 38 health districts have been affected by the pandemic to date. The cumulative number of confirmed cases since the beginning of the pandemic is 3,706, including 144 imported cases. The cumulative number of people cured is 2,828, representing a cure rate of 76.3%. Among the confirmed positive cases, 70% are men and 30% are women. The age group most affected by the pandemic is the 30-34 year olds. The District of Bamako remains the epicenter of the disease with 52.60% of cases. In addition, 137 deaths have been recorded out of the 3,706 cases, representing an overall lethality of 3.7%.

This regular collection of information and rumors aims to provide recommendations to humanitarian and public health agencies so that they can integrate them into their risk communication and community engagement activities and align them with the perspectives and information needs expressed by the community.

In this edition of the Rumour Bulletin, we discuss the trend revealing that people still do not believe (or no longer believe) in the existence of the virus but are more concerned about the secondary consequences (economic situation, supposed risks related to vaccination). Fatigue around COVID-19 and rejection of vaccination are risk factors for the health of communities and humanitarian and health services.

Feedback collection is done in the field with field workers, through community radio stations and through monitoring of various information platforms and sites (Facebook, Twitter, WhatsApp, publications, commentaries, stories, etc.).

The data collected is cleaned, analyzed and categorized under a theme and risk level. Selection for this newsletter is based on a risk assessment matrix taking into account the frequency of the theme, the credibility of the rumor and the potential impact on the community and health and humanitarian services.

During the period from October 28 to November 10, 2020, we collected 63 rumours of which 16 were tagged as high risk, 30 as medium risk and 17 as low risk.

In addition, 39 of these rumours came from Facebook, 16 from Twitter, 4 from websites, 1 from WhatsApp, 1 from YouTube, 1 from a telephone interview and 1 from face-to-face discussions.

The Rooted in Trust project aims to disrupt and mitigate the flow of misleading, inaccurate or malignant information to vulnerable populations affected by humanitarian crises during the COVID-19 pandemic.

In Mali, the Rooted In Trust project focuses on listening to and collecting rumors about the virus and the COVID-19 response among displaced populations in the District of Bamako and the regions of Sikasso, Segou, Mopti, and Timbuktu.

We are working in the field with 16 community radio stations and the NGO AMSODE to capture the perceptions and concerns of the community on COVID-19 and health issues in general in order to propose an adapted response and contextualized media content that meet the information needs and provide solutions acceptable to the populations.
**WHAT ARE PEOPLE SAYING**

"We don’t believe it (a second wave of Covid-19). Without containment and without putting much rigor into barrier measures, African countries have managed to resist the Covid. Soon, the end “

This rumor may stem from the fact that African countries have not recorded as many cases of COVID-19 as other countries in Europe or the Americas. The case-fatality ratio for COVID-19 on the continent is lower than anywhere else, despite low screening rates. Furthermore, there is no evidence that deaths related to COVID-19 could have been missed.

**WHY DOES IT MATTER?**

This rumour is likely to amplify the general climate of denial of the pandemic among the general public.

The spread of the disease is strongly influenced by people’s willingness to comply with preventive measures. These in turn are associated with public perceptions of risk that lead people to wash their hands, use masks, or practice social distancing.

Therefore, a generalized climate of mistrust or denial in a second wave of COVID-19 may trigger a decrease in the sense of risk and ultimately endanger the lives of those who choose not to follow protective behaviours.

**FACTS**

While it is true that Africa has been less affected by COVID-19 than expected, the disease remains real with an increasing number of positive cases and deaths on the African continent. In an analysis conducted for the journal *Science* in August 2020, a group of researchers hypothesized that early action by authorities in Africa may have played a role. "Measures such as travel restrictions, curfews and school closures were put in place very early in Africa compared to other continents, often before an African country had detected a case," they wrote. According to the same team of researchers, "age, for example, could be a reason. On average, the population of the African continent is 19.7 years old".

In the month of October, cases of COVID-19 increased on average each week by 6% for the entire African continent and nine countries have contamination rates above 10%.

As of November 10, 2020, Africa has recorded 1,891,583 cases of COVID-19, including 45,605 deaths and more than 1,500,000 cases of recovery.

Sources :
- WHO Regional Office for Africa - AFRO. Facebook page, 10 Nov 2020

**HOW CAN HUMANITARIAN ACTORS HELP?**

- Understanding what influences the perception of risk is essential to designing appropriate communication strategies. Response partners could further focus their discussions with communities on why they doubt the epidemic and field respondents, for example through focus groups or listening groups.

- Ensuring that social mobilizers, outreach workers and other front-line workers not only explain to communities that the risk is still real by sharing the latest epidemiological information and other information, but that they take the time to listen to their questions and foster exchanges to understand their deep concerns.

- Continue to share the testimonies of people who have healed from COVID-19 through the media and in the communities.
WHEN ARE PEOPLE SAYING

Keniéba Female Resident (Kayes region)

"Vaccination programs are initiated to administer the COVID-19 virus to our children in Mali".

This rumor may be echoed in the growing global hesitation about vaccines, which has also been observed and studied in various African countries. Over the past two decades, rumors about vaccines in different parts of the continent have led people to delay or even refuse vaccines for themselves or their children, even when safe and effective vaccines are available.

Against this backdrop, the COVID-19 pandemic has only exacerbated the flow of misinformation and rumors about vaccines.

HOW CAN HUMANITARIAN ACTORS HELP?

- Increase awareness among field teams on the importance of taking into account the needs, issues and concerns of communities and the contexts in which they live. Reluctance to vaccination can be caused by different socio-economic and political reasons that it is important to identify in order to provide appropriate responses and increase acceptance of routine vaccination.

- Be aware of, better understand and relay information on vaccination programs and campaigns established by health authorities, particularly among internally displaced persons, and rely on field respondents and community leaders to inform target populations.

WHY DOES IT MATTER?

According to UNICEF, many of the diseases that kill children in Mali are completely preventable. Indeed, only 45 percent of children receive all the basic vaccines and 14 percent receive no vaccine at all, depriving them of protection against common childhood diseases.

This rumor is also likely to create and fuel mistrust among the population towards health care workers. Thus the impact can go as far as boycotting health centers (with its many consequences on the health of children and women), and other vital humanitarian and health programs.

FACTS

- Mistrust and hesitation are not new phenomena, especially on the African continent. Rumors about vaccines can be read through historical, socioeconomic and political prisms that influence people’s level of confidence. A recent SSHAP study describes the importance of these aspects in the hesitation to vaccinate against COVID-19 and how the humanitarian response could incorporate these patterns in the development of its response. "In the 1990s and early 2000s, rumors emerged linking vaccines to infertility, derailing immunization efforts in West Africa. When placed in a historical perspective, two patterns emerge: first, vaccines have been perceived to be more harmful than the diseases they are intended to prevent; and second, much of this concern is rooted in tensions between citizens and authorities, often resulting from mandatory immunization policies."

- Perceived mistrust of private and public actors and changes in the discourse of health authorities can foster the development of rumors about vaccination and its rejection.

- The CDC/Atlanta and the American Academy of Pediatrics (AAP) recommend that "every child should continue to receive routine immunizations during the COVID-19 epidemic."

Sources:
- SSHAP. Vaccine hesitancy and building confidence in COVID-19 vaccination. Nov 2020
- CDC. Routine Vaccination During the COVID-19 Outbreak. 11 Nov 2020

We welcome your comments and suggestions to help the government and humanitarian organizations address and manage misinformation. Please contact Gabriel Kpadonou Hounsa, Humanitarian Liaison Officer, Rooted In Trust, Mali at gkpadonouhounsa@internews.org.