From September to the first half of December, the dominant themes of the rumors we’ve collected referring to COVID-19 are about the government, COVID-19 as hoax and healthcare (hospitals and medical workers). Of the top ten topics, treatment and cure, prejudice and stigma, testing, vaccine, symptoms, transmissions, and COVID-19 impacts are also included.

There were 379 feedback data collected from September 4 to December 16 from various platforms (Facebook, Twitter, Social listening, and word of mouth). We take a qualitative approach to rumor tracking, collecting smaller numbers of quality rumors that give us an insight into community questions, trust and fears or anxieties.

The Information Ecosystem Assessment study conducted by Internews in BARMM reported an estimate of **77%** of people have heard and believed rumors to NOT get vaccinated, while **66%** need information on Covid-19 treatments and vaccines.

Most of the high-risk rumors, which are potentially harmful for the community, were about vaccines. People are confused with the difference of other vaccines to COVID-19 vaccines, saying vaccines in general are deadly. They are expressing their fear for their children as the Barangay Healthcare workers are currently administering other vaccines in the community which are proven safe and effective to diseases. Rumors on vaccines started to peak in November due to a string of reports abroad. The recent news on COVID-19 vaccines have also raised doubts and concerns among the community.

These rumors show the concerns of people about the safety of the COVID-19 vaccines. They don’t want to get vaccinated because they think it is not safe or it will harm their children. It is important to listen to these rumors as they can trigger further resistance, not only to COVID-19 vaccines, but also of other vaccines that are essential to keep children and other vulnerable groups safe.
Mis and disinformation in one immunization program can affect public perceptions on vaccines, as seen in the case of Dengvaxia. In 2018, the Philippine government stopped its Dengvaxia immunization campaign due to claims of vaccine-related deaths and corruption. This resulted to a highly politicized investigation, widespread misinformation, and trust in vaccine safety dropping from 82 percent in 2015 to 21%.

The resurgence of polio virus and a measles outbreak both in 2019 highlights the lasting impact of anti-vaccine sentiment. Health authorities struggled with vaccine hesitancy in its Measles-Rubella Supplemental Immunization Activity in last quarter 2020. A recent survey reported that nearly half of the Filipinos said they would not get vaccinated against COVID-19. In Mindanao, 96% of people surveyed were aware of COVID-19 vaccines being developed but 48% are not willing to get vaccinated, citing uncertainty of its safety.

In December, highly politicized discussions on vaccine safety and deployment were in the news. Given that COVID-19 vaccines are not expected to be deployed in most areas of the Philippines until mid-2021, it is expected for news to be hyped up and lead to further mistrust in vaccines.

Rumors, fears, and questions on the COVID-19 vaccines also crosscuts with deep-rooted beliefs and underlying concerns and places vulnerable groups at a higher risk. For example, women may choose not to get vaccinated due to fears that it will affect their ability to have children. This does not only concern vaccine safety, but also the stigma of infertility. Parents and caregivers may also opt to exclude their children from immunization programs, which places children at risk to deceases that could’ve been prevented by vaccines.

Overall, rumors and misinformation negatively affect trust towards the safety of vaccines, health services, and healthcare workers. This may lead to a low demand and compliance with COVID-19 vaccination and places vulnerable groups at a higher risk.

WHY DOES IT MATTER?

WHAT CAN WE DO?

- Health and humanitarian actors need to understand root causes of vaccine hesitancy and vaccine complexities to effectively communicate COVID-19 vaccine safety prior to its roll-out.
- Recognize people’s anxieties, provide a space to listen to concerns and feedback, and ask for information they need to address data deficits and avoid fatigue.
- Through a collective response, build and sustain public trust on COVID-19 vaccines through community-led and participatory approaches. This includes building the capacity of local influencers and information providers, such as Muslim religious leaders and civil society organizations, so that they can lead in developing communication strategies and contextualizing information.
- Expand COVID-19 vaccine communication strategy beyond the current linear, pure public health approach implemented thus far to a more community-driven, holistic approach that responds to information needs of vulnerable groups.

COVID-19 VACCINE STATUS IN THE PH

The government is targeting to vaccinate 60-70% Filipinos to achieve herd immunity where enough people will be protected against the disease. Priority will be given to the front liners (health workers, government workers from other agencies involved in the response, vulnerable groups such as the elderly, indigent Filipinos, and uniformed personnel of both the police and military).

MORE VACCINE COMPANIES, HIGHER CHANCES TO ACHIEVE TARGETS.

The Philippines is actively negotiating with various vaccine companies – Novavax, AstraZeneca, Pfizer, Johnson &amp; Johnson, Sinovac, and Gamaleya to secure at least 50-60 million doses by 2021. The FDA said in January 11 the country can have at least 100 million doses if negotiation by next week will be successful.
This must-read Vaccine Misinformation Management Field Guide, created by UNICEF, First Draft, Yale Institute for Global Health, and PGP (The Public Good Projects), provides step-by-step guidance to address the infodemic and foster a demand for immunization.

- **The bedrock of vaccination demand is public trust.** Information source must be credible, expert, and trustworthy.
- **Local actors play a key role** in mitigating the impact of misinformation. Strong, robust social mobilization and community engagement for vaccine promotion will contribute to building public trust.

The COVID-19 Vaccine Communication Handbook provides a detailed guide on how to talk to people about COVID-19 vaccines and address vaccine misinformation. The handbook also included resources to guide you further, including the latest facts about COVID-19 vaccines and cultural differences in vaccine acceptance.

- **Communicate risk:** Acknowledge that the COVID-19 vaccines have transient but discomforting side effects and prepare the public on “misattributed side effects” and not jump to conclusions.
- **Engaging communities:** Community leaders should engage with empathy, transparency, and honesty to develop and maintain public trust and communicate effectively.

Social Science in Humanitarian Action Platform’s Rapid Review on Vaccine Hesitancy and Building Confidence in COVID-19 Vaccination digs deeper and explains the complexity and root cause of vaccine hesitancy and strategies to build and sustain confidence.

- **Creative and honest dialogue:** Use a wide-range of platforms to encourage dialogue and provide honest, localized, context-specific information.
- **Acting together:** Work together with trusted local influencers, healthcare workers, and community representatives in developing vaccination strategies and sharing information.
- **Monitoring vaccine confidence:** Continuously collect and analyze feedback from communities to understand emerging misconceptions, perceptions, rumors, and concerns.
- **Vaccine deployment:** Conduct dialogues and planning with communities as soon as possible about what vaccine deployment may look like.

Learning from the early stages of the COVID-19 response, the COVID-19 Global Risk Communication and Community Engagement Strategy for December 2020 - May 2021 pushes for people-centered and community-led approaches that will increase trust and social cohesion, and ultimately a reduction in the negative impacts of COVID-19. The four strategic objectives for RCCE are set out below.

- **Be community-led:** Coordinate efforts to manage the infodemic and strengthen systems for sustainable long-term community engagement and empowerment.
- **Be data-driven:** Generate, analyze, and use evidence about community’s context, capacities, perceptions, and behaviors.
- **Reinforce capacity and local solutions:** Local expertise should be recognized. Facilitate mentorship and peer-to-peer learning exchanges at different levels and across different sectors.
- **Be collaborative:** Convene multi-stakeholder groups and advocate for mechanisms for civil society and community leadership to participate.