Introduction to Rooted In Trust

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. The first chapter (RiT1) ran from October 2020 to February 2021 with more than 2,774 rumors collected in Lebanon. (1) The project was recently re-launched in September 2021 with its second chapter (RiT2.0) expected to run until end of 2022. In this bulletin, Internews profiles commonly occurring rumors across social media sites in Lebanon between 16 and 31 January 2022. During this period, 35 rumors were collected from Facebook, WhatsApp, Twitter, and Instagram, in addition to private groups and accounts that have a relatively high user engagement. Three unique rumors were subsequently selected for this bulletin which fall under the recurring themes of testing and variants, treatment and cure, and more worryingly, prejudice and stigma.

COVID-19 SITUATION & SOCIO-ECONOMIC CONTEXT IN LEBANON

As of 31 January 2022, there have been 921,208 COVID-19 cases in Lebanon, 9,606 deaths and 5,161,895 administered vaccine doses according to WHO, with the virus spreading particularly among younger age groups such as the 20- to 29-year-olds. (2) Close to 40% of the country’s population above 12 years of age has received a second dose while only 30% of Syrian refugees in Lebanon have received at least one vaccine dose. (3) Lebanon remains situated at Level 4 of community transmission, meaning that high vigilance continues to be recommended with a focus on abiding by public health and social measures in addition to the need to encourage increased vaccine coverage. (4)

On 25 January 2022, the World Bank warned that Lebanon’s economy was contracted by over 58% with the ongoing financial meltdown posing a serious threat to long-term stability. (5) The following day, the energy minister signed onto a regional agreement that would allow the importation of electricity from Jordan via Syria with the aim of reducing chronic power outages which are also impacting health facilities. (6) The Syndicate of Pharmaceutical Importers finally reached a deal with the MOPH and Central Bank to resume the importation of life-saving drugs after months of deadlock. (7) The Moderna and Johnson & Johnson vaccines recently donated by the US Embassy will be rolled out to health facilities and clinics at the national level with the support of the American University of Beirut (AUB). (8)
Continue sharing key awareness messages linked to halting the spread of COVID-19, despite the overall information fatigue linked to the pandemic. This can also be done in new and innovative ways such as animations or stories that can be shared on social media.

Communications surrounding COVID-19 should still encourage anyone with flu-like symptoms to get tested for the virus. In addition, even if the PCR tests turn out negative, it is still important to wear a mask and abide by social distancing measures if the symptoms persist.

It is also important for partners and beneficiaries to grasp how COVID-19 variants came about in addition to how PCR tests function, when possible, in simplified scientific terms.

Highlighting data regarding positive unvaccinated cases in Lebanon could encourage more people to get vaccinated or receive booster shots.

“What we took a PCR test, and it came out negative. We were not convinced of the result because all the symptoms were those of corona. After almost seeing death, our condition started to improve. And today by chance, someone published that he picked up an infection of Omicron and took a PCR test which also came out negative. Either Omicron is not detected through the PCR tests or they are simply not accurate.”

Shared in Arabic on Twitter with more than 50 likes and 2 shares in Arabic

What’s behind the rumor?

Despite the rapid spread of the Omicron variant in Lebanon, few residents are adhering to public health guidance resulting in a renewed peak of positive cases. In addition, the flu season is still in full swing in Lebanon with many residents confusing it with the COVID-19 virus and wondering why PCR tests are not picking up on it. Mistrust in government entities and public health institutions also remains high with some rumors even accusing the government of benefitting financially from flawed PCR procedures – particularly those being conducted at the airport and requiring payment in USD, which not all travelers can afford. As a result, an increasing number of rumors in circulation are claiming that PCR tests in Lebanon are less effective and not detecting new variants such as Omicron.

What are the facts?

- According to WHO, the widely used PCR tests can detect Omicron infections, similarly to all other variants observed so far.

- It is also worth noting that PCR tests are less accurate during the early days and last days of infection. Therefore, false negatives can become more common in the early days or last days of infection with Omicron especially if the symptoms are mild.

- Both COVID-19 and the flu are respiratory illnesses and thus share similar symptoms such as fever, cough, shortness of breath, fatigue, sore throat, runny or stuffy nose, muscle pain or body aches, headache, nausea and vomiting, diarrhea, and loss of or change in taste or smell, although the last one is more frequent with COVID-19.

Why does it matter?

This medium risk rumor matters because people could avoid getting tested regularly if they really believed that the Omicron variant cannot be detected by PCR tests. As a result, it may be more difficult to detect positive cases and stop the chain of transmission through isolation measures. COVID-19 cases may start spreading at a rapid pace and potentially overwhelm health facilities and health care workers.

Recommendations
What are the facts?

Engaging with public health actors and disseminating updated information regarding ongoing scientific trials—pharmacists in particular—is crucial to address self-medicating trends in Lebanon while encouraging them to adopt policies that would prevent people from acquiring any type of medication without the proper prescription.

Stressing on the importance of vaccines is also key, as they have shown to provide long term immunity against severe COVID-19 symptoms as opposed to short term relief which certain drugs could provide.

Listening groups with the community and health care workers can also help humanitarian actors understand why certain affected population groups would prefer self-medicating as opposed to seeking health services and address these barriers and misconceptions accordingly.

What's behind the rumor?

Rumors linked to the use of Ivermectin began spreading after a popular US podcaster on Spotify praised the drug instead of the vaccines when it comes to the treatment of COVID-19. Moreover, local news channels in Lebanon quoted a recent study conducted by a Japanese pharmaceutical company which claimed that the drug had “anti-viral” effects against the Omicron variant. Rumors surrounding potential treatments for COVID-19 are not new in the context of Lebanon where many people still choose to self-mEDIATE while the purchase of drugs needing prescriptions from doctors remains largely feasible and irregulated. Public health facilities have also suffered a great deal since the economic crisis began, with power cuts, staff and supply shortages greatly impacting their work. As a result, many residents of the country—including vulnerable Lebanese and Syrian refugees—prefer to treat themselves at home whenever possible.

Why does it matter?

Rumors and misinformation surrounding Ivermectin can lead people to self-medicate instead of seeking the advice of health professionals. Self-medicating can have dangerous and sometimes even lethal health consequences. In addition, persons who choose to self-medicate with Ivermectin might stop abiding by social distancing measures and avoid receiving the recommended vaccine doses.

Recommendations

- Engaging with public health actors and disseminating updated information regarding ongoing scientific trials—pharmacists in particular—is crucial to address self-medicating trends in Lebanon while encouraging them to adopt policies that would prevent people from acquiring any type of medication without the proper prescription.
- Stressing on the importance of vaccines is also key, as they have shown to provide long term immunity against severe COVID-19 symptoms as opposed to short term relief which certain drugs could provide.
- Listening groups with the community and health care workers can also help humanitarian actors understand why certain affected population groups would prefer self-medicating as opposed to seeking health services and address these barriers and misconceptions accordingly.
What are the facts?

- Migrants, refugees, and other marginalized populations often face challenges accessing health and social services. The dire living and working conditions they are often exposed to contribute to additional burdens on their health and wellbeing.

- Throughout the COVID-19 pandemic, these challenges have been exacerbated, resulting in a higher risk of infection of coronavirus due to a range of vulnerability factors such as settlement in overcrowded spaces, inadequate water supply and sanitation, limited use of masks, inadequate access to health care, and inadequate health literacy levels, among others. (9)

- Nevertheless, COVID-19 does not discriminate between race, gender or socio-economic status and anyone can get infected with the virus when social distancing and protective measures are not taken into account or implemented accordingly.

What's behind the rumor?

The recent economic crisis in Lebanon has resulted in a drastic devaluation of the local currency in addition to higher rates of unemployment. The prices of daily goods and services have also skyrocketed leaving many Lebanese and non-Lebanese below the poverty line. This has also further destabilized the already fragile social cohesion in a country where Lebanese, refugees and migrants are now even competing for underpaid and degrading jobs. Because migrants and refugees have historically worked in garbage picking, construction, and agriculture, they have been much more vulnerable to contracting the disease. As a result, they have often been branded by the Lebanese population as “disease spreaders” even though Lebanese employers are usually accountable for the poor working conditions that these vulnerable groups are subjected to.

Why does it matter?

Vulnerable population groups such as refugees and migrants already face widespread discrimination in Lebanon where attacks against vulnerable workers have already taken place on numerous occasions. Similar rumors must be taken seriously as they are able to fuel even more intra-community hatred and violence which could easily spiral out of control in the current economic climate.

Moreover, these trends may endanger further integration of vulnerable communities if they choose to isolate themselves from host communities out of fear of being stigmatized. Increased discrimination can even affect their decision to come forward for testing or treatment for COVID-19 symptoms.

Recommendations

- Tailoring awareness materials to the language and cultural insights of the diverse range of residents in Lebanon – including migrants and refugees – is key to ensure communities have proper access to information while we focus on the common goal to fight the spread of the virus.

- Amidst increasing intra-community tensions, it is essential to listen to both host communities and refugee and migrant populations to understand and address their specific fears. Fighting stigma starts with acknowledging each other, debunking myths, and promoting community dialogues that everyone can benefit from.

- Advocating for refugees and migrants’ access to the vaccine remains crucial. Although recent improvements have been made when it comes to needed identification document guidelines for vulnerable population groups, transportation costs and vaccine hesitancy remain key barriers to be addressed.
How Do We Define Risk at Internews?

Risk is measured by Rooted In Trust (RiT) data analysts, information managers, and social media monitors based on a range of factors including:

- Cultural relevance
- Timing
- Online engagement
- The "believability" of a rumor, and most importantly...
- The potential negative impact a rumor may have on the health, well-being, and safety of local communities or service provider

## High Risk

A rumor 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 rumors may encourage avoidance of testing and treatment, or even 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 also 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 very minimal negative repercussions if it is spread.

Sources:

2. WHO Daily Brief 31 January 2022
3. Impact Open Data (cilp.gov.lb)
4. WHO Daily Brief 31 January 2022
7. [https://www.elnashra.com/news/show/1549843/%D9%86%D9%82%D8%A7%D8%A8%D8%A9-%D9%85%D8%B3%D8%AA%D9%88%D8%B1%D8%AF%D9%8A-%D8%A7%D9%84%D8%A3%D8%AF%D9%88%D9%8A%D8%A9-%D9%88%D8%A3%D8%B5%D8%AD%D8%A7%D8%A8-%D8%A7%D9%84%D9%85%D8%B3%D8%AA%D9%88%D8%AF%D9%8A-%D8%A7%D8%AA-%D8%A3%D8%B9%D9%84%D9%86%D8%AA-%D8%A8%D8%AF%D8%A1-](https://www.elnashra.com/news/show/1549843/%D9%86%D9%82%D8%A7%D8%A8%D8%A9-%D9%85%D8%B3%D8%AA%D9%88%D8%B1%D8%AF%D9%8A-%D8%A7%D9%84%D8%A3%D8%AF%D9%88%D9%8A%D8%A9-%D9%88%D8%A3%D8%B5%D8%AD%D8%A7%D8%A8-%D8%A7%D9%84%D9%85%D8%B3%D8%AA%D9%88%D8%AF%D9%8A-%D8%A7%D8%AA-%D8%A3%D8%B9%D9%84%D9%86%D8%AA-%D8%A8%D8%AF%D8%A1-)