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 and offline through our partners’ activities in Lebanon between 1 and 31 May 2022. Our partners “Endless Medical Advantage” are active in engaging both the Syrian & Lebanese communities in the Bekaa region, and “Maharat” engage with different communities of all nationalities living in all regions of Lebanon. During this period, 51 rumors were collected from Facebook, WhatsApp, Twitter, and Instagram, in addition to private groups and accounts that have a relatively high user engagement. An additional 160 rumors were collected offline through aimed activities conducted by our partners, with the goal of reaching populations and groups that are less active online and who get their rumors through word of mouth.

Two unique rumors were subsequently selected for this bulletin which fall under the recurring themes of “COVID-19 Vaccines”, “Hoax,” and “Death”.

Methodology

We collect our data manually from social media, digital engagement activities, face-to-face (offline) data collection, data from local media, and rumor data collected from other humanitarian organizations. Qualitative data is collected by both digital and physical means through public and private social media groups and conversations and listening groups/private networks, respectively. We analyze our data focusing on rumors, themes, trends, level of engagement, and frequency/level of risk.
Lebanon has seen 2,790 new cases over the period spanning the 1st til 31st of May, with 48 new deaths, (2) but the number of cases and deaths is likely an underestimate, since many people are not getting tested due to high expenses of transportation as well as PCR tests. Total number of administered vaccine doses across population is 5,645,233 as of June 3. The virus is still spreading more prominently among young adults aged 20 to 29. (3) Lebanon is currently situated in Level 2 of community transmission. (4) High vigilance continues to be recommended with a focus on abiding by public health and social measures such as getting vaccinated and boosted when eligible, wearing a mask where required and on public transit as well as places that are crowded and/or not well-ventilated, and getting tested if you are sick. (5)

The complex crisis in the country is having severe impacts on access to necessities for all populations, especially marginalized groups. Poverty in Lebanon has spread dramatically over the past year and now affects about 74% of the population. Lebanon is host to approximately 1.5 million Syrian refugees, 90% of whom live in extreme poverty. (6) Deprivation is rampant across areas including healthcare, electricity, water, sanitation, transportation, connectivity, and means of income. The situation has led to a crisis in the quality and accessibility of healthcare. Access to medicines and basic medical services is deteriorating due to import shortages and lack of fuel for transportation and electric function in hospitals.

Vaccine roll-out now includes people of all nationalities living in Lebanon, including Syrians, Palestinians, and migrant workers, even if their residency documents are not up to date. Children under the age of 5 years old are still excluded from COVID-19 vaccinations.

According to a new study done by NRC and AUB, Syrian refugees said they did not take the PCR when they suspected they have a COVID-19 infection because of its high cost. Refugees can check this list of hospitals they can access and contact the UNHCR NExtCare Hotline 01 504020 at any time to check if they are supported by UNHCR and other humanitarian partners. (7)
Vaccine, Hoax

"Cancer, AIDS, monkeypox and all diseases are a result of vaccinations given to innocent people and fools under the guise of COVID-19, which is in reality just an Influenza!"

Shared on Twitter, with 245 likes and 105 shares

What's behind the rumor?

Communities are facing anxiety around monkeypox, as information about transmission, symptoms, and severity are not yet of public knowledge everywhere, especially among vulnerable communities with lack of access to trusted sources of information. This can lead to them trying to find a source of blame to the spread of new diseases, and in this case, we see the blame falling on the COVID-19 vaccine.

The grouping of cancer and AIDS, which are more widespread diseases than monkeypox, could be an attempt from these communities to make themselves feel “safe” from these diseases as well. In the light of lack of information as well as lack in access to healthcare, blaming the COVID-19 vaccination for all of these diseases could make communities feel protected from them if they simply abstain from taking the vaccine.

Medium Risk
COVID-19 Vaccines & Cancer:
There is no data that suggests the existence of a link between COVID-19 vaccines and cancer, its recurrence, or its progression. (8) Above that, individuals who have cancer are recommended to be fully vaccinated against COVID-19. (9)

COVID-19 Vaccines & Monkeypox:
The recent outbreak of monkeypox cases in over 23 countries has understandably caused consternation, and rumors and hoaxes regarding purported links between COVID-19 vaccines and the monkeypox outbreak have proliferated. However, there is no evidence to suggest that monkeypox is one of the side-effects of COVID-19 vaccines. (10)

Over 12 billion doses of COVID-19 vaccines have been administered throughout the world since December 2020, (11) while the number of confirmed and suspected cases of monkeypox remain comparatively minuscule. As of May 26, 2022, the WHO reported a mere total of 257 confirmed cases and 120 suspected cases of monkeypox, none of which were in Lebanon or anywhere close in the region. (12)

COVID-19 Vaccine Safety:
An official statement from the MoPH issues that “There are strict precautions in place to help ensure the safety of all COVID-19 vaccines. Before receiving validation from WHO and national regulatory agencies for emergency use, COVID-19 vaccines must undergo rigorous testing in clinical trials to prove that they meet internationally agreed benchmarks for safety and efficacy.” (19)

COVID-19 Vaccines, HIV, and AIDS:
Authorized COVID-19 vaccines do not contain, nor do they cause, HIV or AIDS. (16) The contents of the Pfizer vaccine can be seen here, contents of the Moderna vaccine can be seen here, and contents of the AstraZeneca vaccines can be seen here.

Right now in Lebanon, both the Pfizer and the Moderna vaccines are available through MoPH vaccination centers, (17) which the MoPH ensures that they are safe for use and within their expiry dates. (18)

According to WHO, globally as of 6 June 2022, there are 530,896,347 cumulative cases and 6,301,020 deaths. (20) In Lebanon, as of 31 May 2022, there are 1,099,199 cumulative cases and 10,429 deaths. (21)

COVID-19 can be severe and has caused millions of deaths around the world as well as lasting health problems in some who have survived the illness. (22)

In the first 3 months of 2020, nearly 6,000 people around the globe were hospitalized because of coronavirus misinformation, recent research suggests. During this period, researchers say at least 800 people may have died due to misinformation related to COVID-19. (23)
**Recommendations**

- Inform communities about COVID-19 vaccines, their side-effects, and how they have no link with other diseases. This can be done through appearances national TV, on social media platforms and instant messaging applications, as well as in mainstream media outlets (e.g., television stations in Lebanon) as the late Dr. Roy Nasnas had done during the early days of the COVID-19 outbreak in 2020. (24)

- Print brochures that are rich with visuals, spread informative voice notes, and share simple videos with voice-overs (such as this one by Campji: https://fb.watch/dPNWntKrnH/) on instant messaging applications to reach people who can’t read or who have no presence online.

- Awareness-raising efforts should be coordinated with the Ministry of Public Health, particularly when it comes to promoting the ministry’s Circular 23 on the Identification of Monkeypox Cases so that the appropriate measures can be taken should a monkeypox case be suspected or detected. (25)

- Spread information about local services available to people who have cancer or HIV, so that they can get the accurate information and healthcare:

  **For people in need of cancer medications:**
  From the campaign “#لليُعمق_نحن”. For all cancer patients who cannot find their medicines in Lebanon, or are finding them but they are unaffordable, please contact us via WhatsApp on the following number: 76303335 to secure the medicines at a much lower price.

  **For people in need of HIV or AIDS related services:**
  whether they require urgent support, assistance, and/or counseling, they may dial any of the centers here: (26)

<table>
<thead>
<tr>
<th>Centers</th>
<th>Numbers</th>
</tr>
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<tbody>
<tr>
<td>Anwar Al Mahabba Association</td>
<td>01-391396</td>
</tr>
<tr>
<td>Armenian Relief Cross (ARC)</td>
<td>01-253793</td>
</tr>
<tr>
<td>HELEM</td>
<td>01-748258</td>
</tr>
<tr>
<td>Jeunesse Contre la Dрогue (JCD)</td>
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<tr>
<td>SKOUN</td>
<td>01-202714</td>
</tr>
<tr>
<td>Soins Infirmiers et Développement Communautaire (SIDC)</td>
<td>01-482428</td>
</tr>
<tr>
<td>Vivre positif</td>
<td>01-480714</td>
</tr>
<tr>
<td>L’Escale Drop-in Centre(DIC)</td>
<td>01-491705</td>
</tr>
<tr>
<td>Marsa</td>
<td>01-737647</td>
</tr>
<tr>
<td>Proud Lebanon</td>
<td>76/608204</td>
</tr>
<tr>
<td>Oui pour la vie</td>
<td>78/881331</td>
</tr>
</tbody>
</table>

**Why does it matter?**

This medium risk rumor is particularly important because in addition to fueling vaccine hesitancy, it can also lead to mistakenly blaming certain vulnerable communities who are more vulnerable for the spread of disease in some instances, as opposed to seeing the diseases being blamed on the COVID-19 vaccines. Such rumors can lead to tensions in social cohesion as well as stigma towards certain communities who already suffer from more obstacles in their access to adequate healthcare, leading them to avoid seeking healthcare in fears of being stigmatized.
02. Vaccine, Death

“The Vaccine causes infertility and death”

What's behind the rumor?

Medium Risk

When the COVID-19 vaccines were undergoing clinical trials back in 2020, pregnant people were excluded, as is standard practice with new treatments or vaccines. (27)

Moreover, women have reported menstrual changes after receiving the COVID-19 vaccine both on social media and through official channels for documenting adverse vaccine events. (28) This may have contributed to women-and men too or communities as a whole-being afraid of getting vaccinated out of concern for their health and reproductive health. However, recent research on the effects of COVID-19 vaccines to fertility and menstrual cycles recorded a variation of 2 days in women's cycles-however, no further consequences on women's health nor reproductive health and conception abilities have been observed. (29)

According to UNICEF, the number of women in Lebanon dying from pregnancy-related complications has nearly tripled amid a crushing three-year economic crisis that has seen doctors and midwives leave the country, especially among Syrian refugee communities. (30)

Pregnant women who are COVID-19 positive are particularly at risk especially if they are symptomatic or have comorbidities, as new studies show. (31)

This could be a key reason behind the association of COVID-19 vaccines with death in relation to fertility and COVID-19 vaccines.
Fact check

1. **Vaccines do not cause infertility.** There is currently no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems in women or men. (32)

2. Real-world evidence has shown that COVID-19 vaccines are safe if you are pregnant, breastfeeding, or planning pregnancy, (33) and you can receive the vaccine at any stage of pregnancy.

3. High maternal death rates are linked to COVID-19 infections, particularly the Delta-variant, as well as lessened doctor visits by expecting mothers throughout their pregnancy and after, especially Syrian mothers, due to the unaffordability of medical visits when it comes to transportation and high fees. (34)

4. According to the non-profit organization Anera, (35) public health interventions have been scarce across refugee camps since the beginning of the COVID-19 pandemic. Consequently, COVID-19 deaths were elevated among Syrian and Palestinian refugees in Lebanon, with a fatality rate that is four times and three times the national average, respectively. (36)

5. All of this can lead to unwillingness to seek medical care until their health deteriorates severely to life-threatening cases, making room for such rumors as the one above to prosper. The above-mentioned factors contribute to the proliferation and believability of this type of rumors among the Syrian communities.

6. In reality, a higher percentage of Syrians and Syrian moms are dying not because of vaccine side-effects, but they do face obstacles to healthcare that push them away from seeking it until they have already reached critical and dangerous health situations.

7. As of 8 April 2022, WHO has evaluated that the following vaccines against COVID-19 have met the necessary criteria for safety and efficacy: AstraZeneca/Oxford vaccine, Johnson and Johnson, Moderna, Pfizer/BionTech, Sinopharm, Sinovac, COVAXIN, Covovax, and Nuvaxovid. (37) Right now in Lebanon, both the Pfizer and the Moderna vaccines are available through MoPH vaccination centers, (38) which the MoPH ensures that they are safe for use and within their expiry dates. (39)

8. **COVID-19 is more dangerous for women who are pregnant (40) than women who are not pregnant, and the best way to reduce your risk is to get vaccinated.**
Recommendations

- Organize FGDs with women to understand their fears around vaccination and the information voids on reproductive and maternal health. Take into consideration the value that motherhood has within the community and the gender norms built around it when discussing fertility, maternity and sexuality.

- Target vaccination campaigns towards women who are expectant, trying to conceive, or new mothers. Discuss vaccine safety during and around pregnancy so women are aware of their options and the benefits that come with getting vaccinated, especially amidst the increased lack of specialized care for pregnant women.

- Provide printed material on vaccine safety with a lot of visuals for mothers who can’t read and disseminate them in house-visit programs, as well as in PHCs you operate. Consider also talking to women committees and leaders of women community meetings so they can share the information with their peers.

- Increase vaccination efforts especially among vulnerable communities that live far away from hospitals and PHCs, and support MoPH vaccination campaign. Provide transportation fees and services to vulnerable communities in your healthcare programs planning.

- Disseminate resources such as the one below with communities you are in touch with, in order to provide options and actionable information that can support pregnant women amidst this crisis.

Why does it matter?

This medium risk rumor matters because it fuels vaccine hesitancy, which is already rampant in vulnerable communities. It is particularly of high importance to protect expecting mothers and new mothers, as they face increased risk on their health with the mortality rate climbing up. This not only poses a risk on mothers, but on their children as well, and affects communities at large. This is dangerous because Syrian refugees in Lebanon are particularly vulnerable to chronic diseases, as many have no access to healthcare, might not be able to afford it, and some might not even know they have a chronic illness in the first place. (41)

Midwifery Network

With the economic collapse the country is currently facing, and the increasing cost of health services as well as inaccessibility to affordable and safe transportation, many people are opting not to seek medical help even when it is needed. For these reasons, a network of midwife coordinators has been set up to facilitate the referrals and health care access of high-risk pregnant women and pregnant women with COVID-19 in particular. Below are contact details for midwife focal points per area:

<table>
<thead>
<tr>
<th>Governorate</th>
<th>Name</th>
<th>Phone #</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Bekaa</td>
<td>Zeinab Zeaiter</td>
<td>03 643 829</td>
<td><a href="mailto:zeinabzeaiter4@hotmail.com">zeinabzeaiter4@hotmail.com</a></td>
</tr>
<tr>
<td>2 North Lebanon</td>
<td>Mahdieh Awad</td>
<td>70 100 703</td>
<td><a href="mailto:mehdiehawad@gmail.com">mehdiehawad@gmail.com</a></td>
</tr>
<tr>
<td>3 Mount Lebanon</td>
<td>Mimo Haddad</td>
<td>81 480 619</td>
<td><a href="mailto:mimo_h_haddad@hotmail.com">mimo_h_haddad@hotmail.com</a></td>
</tr>
<tr>
<td>4 Beirut</td>
<td>Alaa Joumaa</td>
<td>71 246 955</td>
<td><a href="mailto:Alaa.joumaa@icloud.com">Alaa.joumaa@icloud.com</a></td>
</tr>
<tr>
<td>5 South Lebanon</td>
<td>Amal Jawad</td>
<td>03 544 587</td>
<td><a href="mailto:amaljawad_@hotmail.com">amaljawad_@hotmail.com</a></td>
</tr>
</tbody>
</table>
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 to 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

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18. The MoPH Ensures That Safe And Effective Vaccines Are Strictly Used
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29. Same source
33. Same source
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36. Same source
38. NDVP Lebanon (moph.gov.lb)
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