Rumors on vaccines rose in January by 144% from December and the highest in the month alone among other topics. It ranked fourth among the other topics since September, comprising 8% of the total rumors. Almost a third of these rumors say that vaccines are deadly and will decrease the population. 8% are related to the immunization campaign and/or about vaccines not being safe for children. Other rumors are saying vaccines have microchips; vaccines are not real; and declaring that they will not get any vaccine due to false information. Unique rumors say vaccine can cause infertility and is mixed with pork.

Sub-Topics of Vaccine Rumors

Vaccines are deadly: 31%
Vaccine are not real: 24%
Vaccines are not safe for children: 8%
Religion and culture-related: 13%
Others: 24%

Data as of January 26 and based on collected data online and offline.
**COVID-19 NEW VARIANT IS SENSATIONALIZED**

“The new COVID strain in Europe and USA is more contagious but less fatal. Here in Cotabato City, those who are commonly infected seem not to feel anything at all. We get some positive results since we do the RT-PCR test and surprisingly, most recovered even with COVID. Sometimes we don’t mind anymore about the infection and just treat the injuries. Those who died here with COVID-19 complications are those with severe diseases. They are going to die anyway even without the virus. COVID-19, you are nothing, but sensationalized by people who wants to earn money.” (Male Doctor, 60+ years old)

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Rumor risk level: Medium  Platform: Facebook  Reactions: 72  Comments: 11  Shares: 43

This rumor was posted by a doctor in Cotabato City who claimed that the new COVID-19 variants is sensationalized. The variants of COVID-19 are real, and it is important for us to understand them so health and humanitarian actors can take appropriate action. Scientists have detected COVID-19 variants in different parts of the world: in United Kingdom (variant B.1.1.7), in South Africa (501.V2), and in Brazil (B.1.1.248). They spread faster than the original virus but there is no evidence yet whether they cause a more severe illness or increased the risk of death. More studies are being conducted to understand their nature.

Physicians and health experts have varying opinions, approaches, and specializations. Information providers and health and humanitarian actors must be carefully vet experts they consult for COVID-19 related information.

People are experiencing anxiety and fatigue towards COVID-19 and pandemic-related community quarantine restrictions and health protocols, especially as it has affected access to basic needs and services, livelihood, education, and religious and social practices. Statements that downplay the severity COVID-19 and the new variants may trigger people to lower their guard and not comply with minimum health standards.

Despite news on COVID-19 vaccines, there is no clear end to the pandemic. Health and humanitarian actors must continue to strengthen risk communications and community engagement on COVID-19 to ensure protocols remain in place.

From the Information Ecosystem Assessment (IEA) conducted by Internews in BARMM, communities have showed high awareness on COVID-19 health protocols such as wearing of masks and hand-washing. However, beyond compliance, there is minimal understanding as to why these protocols need to be followed. A significant percentage of communities also believe in COVID-19 rumors.

The IEA report recommends health and humanitarian actors to partner with trusted and influential members of communities, such as religious leaders and local health workers, to strategize and implement sharing of much needed information and strengthening two-way communication with communities.
Vaccines are not designed to hurt people. As emphasized in previous SALIG Bangsamoro bulletins, vaccines are the single most, lifesaving and cost-effective medical intervention that reduces the risk of getting a disease. They have been proven effective to control, eliminate, and remove of some of the most life-threatening diseases in our history. And just like medicines that we take, side effects are usually common, mild, and self-heal after a few days.

The rise in rumors that COVID-19 vaccines have killed people is worrying. As seen in the latest rumor trends, almost a third of vaccine rumors collected in BARMM say that it can cause death. Recent news reports with misleading headlines on deaths after COVID-19 vaccination may have triggered and contributed to the further spread of such rumors.

Mis and disinformation can affect public perceptions on vaccines for years, as seen in the case of Dengvaxia. [LL1] The Philippine government stopped its Dengvaxia immunization campaign in 2018 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 just 21 percent. The resurgence of polio virus and a measles outbreak both in 2019 highlights the lasting impact of anti-vaccine sentiment. Health authorities also struggled with vaccine hesitancy in its Measles-Rubella Supplemental Immunization Activity the last quarter of 2020.

Increasing vaccine hesitancy in the region has led to challenges with health service delivery. According to the BARMM Ministry of Health, health-seeking behavior have significantly decreased last year due to vaccine hesitancy, doubts towards health services, and limited services reaching communities due to COVID-19 restrictions. As a result, cases of completely immunized children have decreased by 12%, facility-based delivery by 52%, and prenatal visits by 48%.

Vaccine hesitancy places vulnerable groups at risk. Children in BARMM are immediately affected by being at risk to vaccine-preventable diseases. Internally displaced persons and indigenous people are who are experiencing the impact of conflict and the pandemic, along with difficult access to health and nutrition services, may be more prone to outbreaks and other health crisis.

Rumors and misinformation have also led to stigma towards health actors and mistrust with healthcare facilities, as reported by the Ministry of Health and reflected in previous rumor bulletins. This adds to the burden and security concerns faced health actors and makes service delivery even more challenging, given that health and nutrition systems in BARMM are already overstretched.

Doubts on new vaccines are not necessarily wrong. Communities are worried about vaccine safety and side-effects, which is understandable given a long history of rumors and misinformation on vaccines. It is important that people are vigilant, however, they must have a platform where they can receive the correct information, provide feedback, and ask questions on COVID-19 vaccines.

Health and humanitarian actors need to understand the root causes of vaccine hesitancy, varying contexts and crisis experienced by communities, and vaccine complexities to effectively communicate COVID-19 vaccine safety prior to its roll-out:

- Visualize information on vaccine safety by using stories, photos, and graphics. For example, during the height of rumors on COVID-19 testing, CMYM’s Sindaw Ranaw Facebook Program visited a hospital where a local health expert explained and showed the COVID-19 testing process.
- Be transparent about risks and side-effects of COVID-19 vaccines. Avoid directly debunking myths. Instead, provide information that is easy to understand and contextualized to the religion and values of the Bangsamoro people.
- Provide a space where people can freely ask questions, provide their feedback, and easily access correct COVID-19 information in their local languages.
- Support capacity building initiatives for local information providers, journalists, and community leaders to improve COVID-19 vaccine communications. This includes trainings on science and health reporting for journalists and workshops to plan COVID-19 vaccine risk communication and community engagement strategies.

**COVID-19 VACCINES KILL PEOPLE**

“We will still go on with the vaccination even after the death of Tiffany Dover. I have a link that I can share to those who want to know. Don’t get vaccinated if you don’t want to die. That Tiffany in the left is impostor.” [with screen captured photos of two identical women said to be Dover].

(Male, 26-35 years old)

**Rumor risk level: High**

Platform: Facebook  
Reactions: 825  
Comments: 2,200  
Shares: 937

“We are miserable. I won’t really get vaccinated if it will just cause me death.” [with social media card by local media organization Brigada News with screaming head saying: 23 people died of vaccines; and subtext saying: 23 nursing home patients allegedly died after they got Pfizer COVID-19 vaccines in Norway and the those who died were elderly and had existing diseases.]

**Rumor risk level: High**

Platform: Facebook  
Reactions: 172  
Comments: 50  
Shares: 361

**RUMOR #2**

Why does it matter?
Religious leaders and governments in Muslim-majority countries, such as Indonesia and the United Arab Emirates, have been coordinating with vaccine companies to check production processes and issue guidance on COVID-19 vaccines that are halal, or allowed by Islam. This is considering increasing concerns among Muslim communities regarding the components of the COVID-19 vaccines.

Some live vaccines such as those intended to prevent flu, measles, mumps, rubella, and chickenpox contain gelatin derived from pigs. This gelatin is used as a stabilizer wherein it functions to protect the live virus against the effects of temperature especially during storage and transportation.

However, companies producing COVID-19 vaccines such as Pfizer BioNTech, Oxford-Astrazeneca, and Moderna have already confirmed that their vaccines do not contain pork-derived gelatin stabilizers. Indonesian clerics that assessed Sinovac Biotech’s COVID-19 vaccine have also declared it as halal. Further information is yet to be release by other companies who will be manufacturing COVID-19 vaccines.

The National Commission on Muslim Filipinos recently endorsed COVID-19 vaccines and emphasized that any substance that will safely protect people is considered halal. In January, Muslim leaders in different countries have confirmed that COVID-19 vaccines are halal, citing that Islam emphasizes the need to protect and save lives.

Concerns about vaccine side-effects or its safety are the most common reason for vaccine refusal based on the rumor trends in BARMM and studies globally. Additional concerns due to religion and cultural beliefs will strengthen vaccine hesitancy further in the region. Lastly, this may lead to a further disconnect between advice given by health and humanitarian actors and religious leaders in BARMM.

At the global and national level, governments are working closely with religious leaders and faith-based groups to support COVID-19 vaccine information campaigns by addressing skepticism and misinformation. Health and humanitarian actors must take the lead in localizing and contextualizing these discussions to the BARMM context. Facilitate regional and community-level dialogues on COVID-19 vaccines between health experts, government, and religious leaders to discuss that COVID-19 vaccines are safe and halal and identify key strategies to communicate this effectively to the Bangsamoro people.

Have you spotted a COVID-19 rumor? CLICK & SUBMIT HERE. For feedback, suggestions, and questions, please contact Leanne Lagman at ylagman@internews.org