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.

About this Bulletin

In this bulletin, Internews profiles commonly occurring rumors across social media sites in Lebanon between 1 and 15 February 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. Two unique rumors were subsequently selected for this bulletin which fall under the recurring themes of hoax safety and side effects and Post-vaccination Behavior.
COVID-19 SITUATION & SOCIO-ECONOMIC CONTEXT IN LEBANON

As of 15 February 2022, there have been 1,020,204 COVID-19 cases in Lebanon, 9,855 deaths and 5,326,940 administered vaccine doses according to WHO, with the virus spreading particularly among younger age groups such as the 20- to 29-year-olds. (2) 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. (3)

The Ministry of Public Health announced the start of COVID-19 vaccinations for everyone who is 12 years and above, in addition to the opening of vaccine registration for children between 5 and 11, as a preparatory step for vaccine administration at a later stage. (4)

Lebanon’s healthcare system continues to struggle amidst an economic crisis, with the pandemic adding even more pressure on hospitals and health care staff. On the 14 February 2022, Egypt sent 480 tons of medical and food supplies to support Lebanese authorities with mitigating the crisis (5). Moreover, Syrian refugees in many parts of the country, particularly in the Beqaa area, are facing evictions as they take desperate measures to survive the winter season, sometimes even resorting to harmful methods (6).
Safety & Side Effects

The vast majority of those who receive the vaccine will suffer severe epilepsy from the launch of 5G on a large scale, and you will see them as zombies from the intensity of the vibrations that the graphene oxide will raise to a hundred times. They will either kill those close to them or commit suicide due to the severity of the tension and the high electricity in their body.

What's behind the rumor?

Rumors around the safety of the vaccines have been spreading in Lebanon since November 2020 when the Ministry of Public Health announced the arrival of the first batch of Pfizer vaccines. Conspiracy theories can fester in situations of fear, anxiety, and uncertainty. Conspiracy beliefs surrounding COVID-19 in the early days of the pandemic have since extended to include notions about vaccines. The conspiracy theories that claim that 5G cellular network is the cause of the disease could be associated with lower vaccination intentions, and lower levels of trust in governmental and health institutions. Even though rumors related to conspiracy theories have been debunked, the pervasiveness of misinformation and conspiracy theories on social media continue to spread leading to high levels of fear and low levels of trust.

In Lebanon, according to John Hopkins University (JHU), 43% of people are concerned about side effects of the vaccination. (7) Conspiracy theories have been supporting rumors and adding fear on the side effects of vaccinations and impacting their vaccination behavior.
COVID-19 vaccines are not a tool to connect individuals to 5G networks. The mRNA COVID-19 vaccines, such as Pfizer-BioNTech and Moderna, contain lipid nanoparticles, which are used to transfer RNA into cells. There is no evidence to suggest that these lipids can transfer 5G to cells, nor is there any evidence that 5G can connect to such lipids (8).

To date, and after much research performed, no adverse health effect has been causally linked with exposure to wireless technologies. Health-related conclusions are drawn from studies performed across the entire radio spectrum but, so far, only a few studies have been carried out at the frequencies to be used by 5G (9).

Like with any vaccine, some people will experience mild to moderate side effects after being vaccinated against COVID-19. This is a normal sign that the body is developing protection.

Side effects to COVID-19 vaccines include a fever, tiredness, headache, muscle ache, chills, diarrhea and pain or redness at the injection site. Not everyone will experience side effects. (10)

Lebanon's economic crisis has had a dire effect on the country's telecom services. Although some progress has been made with developing 5G, the poor economic conditions have contributed to an erratic electricity supply and a lack of fuel to maintain generators. This has meant that internet services to areas of the country are cut on a regular basis, frustrating all those who depend on stable connectivity, and stalling business growth. Additionally, this medium risk rumor can discourage individuals to get vaccinated, resulting in new peaks of COVID-19 which can in turn have a dire impact on already overburdened and under-resourced health institutions.

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**Fact check**

**Why does it matter?**

**Recommendations**

- Ensure that accurate messaging around the vaccine, types of vaccines and side effects is reaching all communities including refugees and vulnerable groups to stop the rise of fear around the vaccination process. Using audio tools and visuals could serve in increasing reach within target populations.

- Conduct FGDs and listening groups to address the concerns and questions on conspiracy theories, side effects and the differences between the different vaccinations. Based on the information gathered from the FGDS, partners could set up regular meetings to discuss these concerns and identify potential conspiracy theories that may be fueling them.

- Decentralized awareness raising efforts through schools, local NGOs and community-led movements could also be useful to disseminate fact-checked information.

- Strengthen a culture of dialogue, in which people exchange different opinions in a friendly atmosphere – such communication could be done through community members/groups who are trusted locally.

- Remain transparent about the progress of vaccinations, as well as successes and challenges faced along the way. This will increase trust and can contribute to higher vaccination acceptance.
The ongoing socio-economic crisis in Lebanon has only added to the population's daily struggles. 63.7% of Lebanese express that COVID-19 has had an economic impact on their lives, with 40.1% suggesting it has led them to food insecurity. Both vulnerable Lebanese and Syrian refugees are now competing for low scarce and low paid jobs, while also worrying about putting food on the table and making rent at the end of the month. This has turned into increasing public debates on lockdowns and isolation measures, resulting in the spread of many rumors claiming that COVID-19 is a lie or hoax. Additionally, due to the government's lack of transparency, as well as rising socio-economic and political tensions, some rumors are suggesting that any public health measure to contain COVID-19 constitutes a threat towards citizens' personal freedoms. These perceptions often result in feelings of anger and heightened mistrust among certain already vulnerable and marginalized population groups.
COVID-19 has placed a heavy burden on residents of Lebanon as a whole, whether they are vulnerable Lebanese, Syrian refugees or even migrants.

As of 14 February 2022, there were a total of 822 patients occupying hospital beds of which 373 are in ICU according to the MOPH and WHO. (12)

More importantly, 68% of positive cases are unvaccinated, demonstrating that the vaccine does provide some kind of protection, particularly against severe symptoms. (13)

According to WHO, there have already been 1,020,204 cases in Lebanon and 9,855 deaths. (11)

Why does it matter?

According to official data from JHU, 46% of Lebanese people are worried a little or not at all about catching COVID-19. (14) Disbelief in COVID-19 could drive these low-risk perceptions even further and could discourage already vulnerable population groups from taking preventative measures or getting vaccinated, resulting in increased community transmission. New peaks of COVID-19 could also overwhelm an already struggling public health sector leading to more deaths from the virus. Moreover, these rumors could be acting as false reassurance for already vulnerable groups who cannot afford or do not have access to health services. This is especially important, considering over 40% of Lebanese individuals declared they are facing obstacles to access health care. (15) As for the Syrian refugee community, according to the VASyR, they are mostly finding obstacles accessing medications, and receiving consultations. (16) Additionally, this rumor contributes to the lack of trust in institutions and absence of accountability measures, potentially adding to the social and political tensions.

Recommendations

- To address the concerns that COVID-19 is a hoax, partners could share personalized stories in Arabic of people from affected communities who have been directly impacted by the virus as well as stories of those who have recovered.

- Build stronger communication bridges between the major stakeholders in the COVID-19 response (WHO, MOPH, UNICEF etc.) and grassroots organizations to increase transparency and trust in institutions while also using bottom-up approaches to listen to the communities' concerns and adapt RCCE materials accordingly.

- Engage in listening groups which are free of judgement and where affected population groups can feel comfortable sharing their questions and concerns about COVID-19 and the vaccines.

- Identify the foundations of this hesitancy – whether it is socio-economic or linked to barriers in accessing healthcare – and address them through innovative and community-led programming which could optimize health awareness and vaccination coverage.
Sources

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