In this bulletin, Internews profiles commonly occurring rumors from across social media sites in Lebanon. Featured rumors include vaccine rumors, new COVID-19 strains, false treatment methods, rumors around the healthcare system, and a conspiracy connecting COVID-19 with Christianity. Data was collected from Facebook, WhatsApp, Twitter, and Instagram pages, groups, and accounts that have a relatively high user engagement. Similar rumors were expressed and identified during two listening groups conducted by Internews and Maharat in January 2021 with groups of Lebanese and refugee communities.

HOW WE DO IT:

A social media mapping exercise underpins our qualitative approach to listening by pinpointing where discussions about COVID-19 are happening and highlighting key influencers of information. Feedback highlighted in this bulletin is selected based on a risk assessment matrix that accounts for: the frequency of times the issue was shared, the level of engagement around it, and its potential impact on individuals, the community, and pandemic response services. This regular collection of community insights aims to provide humanitarian and public health agencies ideas for integrating and aligning their risk communication activities with community perspectives and needs.

The analysis presented here is based on 433 rumors collected by Internews’ Lebanon Rooted in Trust team and Maharat Foundation from December 10, 2020 to January 4, 2021.

COVID-19 SITUATION IN LEBANON

According to the World Health Organization (WHO), there are 264,647 cases of COVID-19 in Lebanon as of January 21, 2021.(1) After the Christmas and New Years holidays, the country witnessed an apparent surge in case numbers, due in part to the government’s loosening of measures during that period, in addition to an increase in large social and family gatherings in homes, restaurants, and bars. This led to the implementation of a partial lockdown on January 7 followed by a countrywide lockdown on January 14 due to the steady rise in infections. The new and stricter measures enacted on January 14 are expected to last until February 8.

Similarly, the situation of hospitals has been worsening and many health facilities are currently at maximum capacity. Several state and private hospitals have announced their COVID-19 and ICU wards are fully occupied and accounts of patients being treated in their cars or denied services altogether are rapidly spreading on Lebanese social media. In fact, the WHO announced during the Health Cluster Meeting on January 12 that 94% of ICU beds in Lebanon were at full capacity with only 53 beds available across the whole country.

Figure 1: Distribution of 433 rumors collected between December 10 and January 4, by platform
Rumors around the safety of the vaccine have been spreading in Lebanon since November 2020 when the Ministry of Public Health (MOPH) announced the country’s engagement in the COVAX initiative as well as a bilateral partnership with Pfizer to secure two million doses of their Pfizer-BioNTech vaccine for the Lebanese public in 2021.

Recently, influential Lebanese figures with large followings have taken to social media to express their fears about the vaccine; some of which only strengthened rumors that had already been circulating.

Singer Carole Samaha who has more than 4.8 million followers on Twitter tweeted that the COVID-19 vaccine is the “deal of the century” stating that “the game is now clear” while also using a #no_vaccine hashtag.

Another influential singer, Haifa Wehbe, shared her absolute refusal to take the vaccine on her Instagram stories to her 6.8 million followers.

These posts along with several similar statements coming from influential figures have been reshared heavily on social media.

Several Facebook pages dedicated to Christian audiences in Lebanon have been increasingly spreading rumors around COVID-19. Some rumors describe the disease itself as a conspiracy, or characterize people sharing information on the virus as having ulterior motives.

Some posts also characterize the vaccine as having demonic components, while others contain alleged stories of vaccine recipients suffering from severe side effects. Additionally, one page openly criticized the pope’s approval of COVID-19 vaccines and hinted that they might contain aborted fetal cells.

Such unchecked beliefs aimed at discrediting the very real existence and spread of COVID-19 could deter people from adhering to protective and preventive methods such as wearing masks and social distancing. False information surrounding the vaccine could also increase religious leaders’ reluctance to receive it once it is rolled out. Community mobilization and outreach are necessary to counter these rumors.

Humanitarian and health workers should also be aware that this trend of linking religious beliefs to anti-vaccine sentiments could eventually affect other religious and social groups, therefore preventative awareness measures in Christian and non-Christian communities are key to counter misinformation in a timely and effective manner.

“Every believing Christian should reject getting vaccinated against COVID-19!” Posted on a Facebook group with a majority of Christian audience. 1100 likes, 1500 comments, 92 shares.
The Risk Communications and Community Engagement (RCCE) component of the COVID-19 response in Lebanon has been engaging with influencers around COVID-19, encouraging them to share verified information from WHO and other trusted sources about the vaccine. Inviting high-level contacts from the humanitarian health sector to engage with concerned influencers who are spreading false information could be beneficial.

Ensuring that accurate messaging around the vaccine, especially its safety and side effects, is reaching all concerned communities including refugees and vulnerable groups is needed to stop the spread of rumors and the rise of stigma and fear around the vaccination process. Highlighting the crucial role of healthcare workers—including nurses and doctors who will be administering the vaccine and monitoring its side effects—is also key to maintaining the community’s trust in the medical process. Coordinating with local news channels could be one way of ensuring that these messages are reaching a significant number of people among concerned population groups.

In addition, utilizing visuals and audio tools such as descriptive images, videos or voice notes through WhatsApp (one of the most widely used applications among vulnerable and illiterate populations) could serve in increasing humanitarian organizations’ reach within target populations.

Nevertheless, allowing members of the community to express their fears and concerns while answering any pressing questions that they may have whenever possible remains a priority. It is also important for humanitarians to remain transparent during focus group discussions or awareness sessions about the information they do or do not yet have at this point in time, in order to preserve trust while also enabling the community to be more receptive to new information about the vaccine whenever it arises.

Decentralized awareness raising efforts through local religious leaders in the community and through faith-based NGOs, schools, youth groups, and scouts’ movements could also be useful to disseminate fact-checked information.

It is crucial to properly address concerns linked to new strains of COVID-19 to avoid fueling fear and rejection of the vaccine which is about to be rolled out next month. Humanitarian actors could organize awareness sessions where available information regarding the new strains are transparently conveyed and fact checked accordingly. These awareness sessions could be organized remotely through WhatsApp, Facebook, or Zoom in order to adapt to new lockdown measures.

18 rumors were captured related to the new strains of COVID-19. Confusion about the effects of the new strains on children and the effectiveness of the COVID-19 vaccines against these mutations were two primary concerns expressed online.

It is true that the new strains have been shown to be more easily transmissible, however according to Johns Hopkins University, there is not enough evidence yet that suggests children are more susceptible to them than to other COVID-19 strains. The data shows that children are being infected by old strains as well as new ones. (3) As for the vaccine, experts claim that there is no reason to believe they won’t be effective against the new strains, due to the nature of how the vaccine works. The body attacks several parts of the spike protein which is introduced to the body through the vaccine. Thus, one mutation in the protein is unlikely to disrupt the vaccine’s effectiveness against the virus as a whole. (4)

Previous vaccines have shown to be effective against mutations in diseases like oral polio, inactivated polio, measles, and yellow fever. Humanitarian and health workers can also use the influenza virus as an example to explain how a vaccine is regularly updated to address a constantly changing virus more effectively. (5)

“The new Corona strain carries mutations that enable it to affect children as well as adults, unlike the original strains that did not kill the young” Posted on a Facebook group.

How can humanitarian actors help?

The Risk Communications and Community Engagement (RCCE) component of the COVID-19 response in Lebanon has been engaging with influencers around COVID-19, encouraging them to share verified information from WHO and other trusted sources about the vaccine. Inviting high-level contacts from the humanitarian health sector to engage with concerned influencers who are spreading false information could be beneficial.

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Rumors dating back to October 2020 primarily referred to the use of home remedies and the consumption of certain foods to treat COVID-19. Since then, these rumor trends have become more concerning as different medications that could cause serious harm if not prescribed by a doctor are being advertised as potential treatments. This worrying development, and the obvious risks attached to it, reinforces the importance of addressing the issue of self-medication without proper medical consultation, especially considering that some of these drugs are widely accessible at low cost in Lebanese pharmacies.

With the absence of a proven cure, it is expected that speculation about potential treatments and home remedies will continue to increase. In addition to that, Lebanese hospitals are currently at almost full capacity with many facilities only accepting severe cases of COVID-19 while advising home care instead of hospitalization for mild cases.

A study conducted by Lebanese doctors back in 2017 drew attention to widespread self-medicating behaviors among the Lebanese population with 42% of the 319 participants admitting to purchasing antibiotics without a prescription. (6)

According to Human Rights Watch (HRW), Syrian refugees are discouraged from seeking medical care even when suffering from worrying symptoms. According to the rights group, there is a general lack of trust among the Syrian refugee population in the Lebanese healthcare system, with many fearing deportation if they decide to seek medical attention. (7)

Social media monitoring show that false treatments and home remedies for COVID-19 are still being circulated among social media users.

At least 35 rumors have been recorded claiming the efficiency of a wide-range of treatments for COVID-19.

Alleged treatments include, but are not limited to: lemons, oranges, donkey’s milk, onion, garlic, and apple cider vinegar.

Other mentioned treatments that are at a higher risk of causing harm included medications such as Chloroquine which is used to treat Malaria, the antibiotic Azithromycin, and Ivermectin which is normally used to treat parasite infestations.

“"In my personal experience with dozens of Corona patients, the drug Ivermectin proves day after day its effectiveness and excellent results in helping patients recover quickly and effectively. This drug has been effective in many studies conducted in Australia, India, Pakistan.”

Posted by a Lebanese doctor on his Twitter account, 101 likes, 13 comments, 13 retweets.

Azithromycin is an antibiotic. Antibiotics are designed to treat bacterial infections and are not effective against viruses or viral infections. (8) Antibiotics cannot treat COVID-19 since it is caused by a virus. That being said, antibiotics are sometimes used to treat serious cases of COVID-19 for people who have developed a bacterial infection as a complication from the virus. Taking antibiotics without a doctor’s prescription and guidance could have negative consequences on the consumer and may even lead to antibiotic resistance which could increase the risk of serious infection.

Chloroquine is an FDA-approved treatment and prevention medication for malaria. After the deaths of some patients who were given this medication, the FDA issued a warning against the use of it as a treatment for COVID-19. (9)

Ivermectin is a medication used to treat many types of parasite infestations such as head lice. A study done in vitro showed that this medication could inhibit the replication of the COVID-19 virus. However, this has not yet been tested on humans and its side effects remain unknown. The FDA has issued a warning against its use as a COVID-19 treatment. (10)
How can humanitarian actors help?

Dismissing people’s approaches to home remedies is not recommended, especially if the concerned ingredients are natural and not particularly harmful. On the contrary, acknowledging target communities’ traditional approaches while engaging in respectful and mindful exchanges will only increase vulnerable groups’ openness and acceptance of other proven treatment methods rooted in medicine and science.

Clear messages should be conveyed when communicating with infected individuals whose cases are deemed too mild to be admitted to hospital. Needed medications and methods or frequency of consumption should be clearly outlined by healthcare workers while regular follow up through a social worker or health promotion officer is also recommended.

Communication campaigns disseminated through local media channels which stress on the serious dangers linked to self-medication would help raise awareness on the matter and encourage people to consult their doctor prior to purchasing or consuming medications which they believe might prevent or even treat COVID-19. Moreover, sharing real testimonies from COVID-19 patients who have followed their doctor’s recommendations and recovered from the virus alongside testimonies from people who were adversely impacted by self-medication could be useful to deter others from making the same mistake.

The fact that some unproven treatments are being shared by medical professionals and licensed doctors is extremely worrisome. Humanitarian agencies and health actors in particular should hold these medical professionals to account by highlighting their responsibility in spreading misinformation and the negative impact it may have on people’s lives. Doctors are uniquely positioned and regarded by many as trusted sources of information during this pandemic. Therefore, targeting the community of Lebanese doctors, nurses, and other health care workers active online and holding them accountable via relevant channels professional channels could make them more aware of their responsibility to counter the spread of misinformation as opposed to fueling it.

Other rumors: Fears of harm at hospitals for economic gain:

People have expressed their fear of seeking medical attention at hospitals across social media as well as during listening groups conducted by Internews and Maharat Foundation due to rumors claiming that hospitals are killing patients in order to increase the national death toll and receive more international funding.

This rumor was recently captured 16 times and has been mentioned in previous bulletins produced by Internews. The Lebanese healthcare system was already under threat before the spread of COVID-19, and the pandemic has only further depleted the human and material resources of the sector while more and more hospitals are reaching full capacity.

It is therefore not surprising that the Lebanese people still do not trust their government and the public healthcare system it presides over.

Conducting media campaigns where frontline workers share their personal experiences treating patients from different backgrounds in health facilities across the country could highlight the special bond between patient and caregiver and help humanize healthcare professionals while also breaking the stigma around health facilities treating COVID-19. It is also important to make sure beneficiaries are aware of all available primary and secondary health care centers near their area of residence while also regularly disseminating an updated list of services and coverage by relevant agencies.

“Hospitals are spreading terror and fear among people! Are you making money off our backs? Hospitals in Lebanon feel that they are competing for who gets the highest number of deaths so that they can make more money! This is a case of dirty business.”

Posted by a Lebanese man on a Facebook group. 229 likes, 54 comments, 16 shares.
Read Internews’ Frequently Asked Questions (FAQ) Document about the vaccine in Lebanon and other bulletins by scanning the QR code.

Or open the following link: http://bit.ly/2M540Be

SOURCES

(9) FDA, FDA cautions against use of hydroxychloroquine or chloroquine for COVID-19 outside of the hospital setting or a clinical trial due to risk of heart rhythm problems, https://www.fda.gov/drugs/drug-safety-and-availability/fda-cautions-against-use-hydroxychloroquine-or-chloroquine-covid-19-outside-hospital-setting-or