

# RUMOR BULLETIN #5

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FOR HUMANITARIANS



## Internews

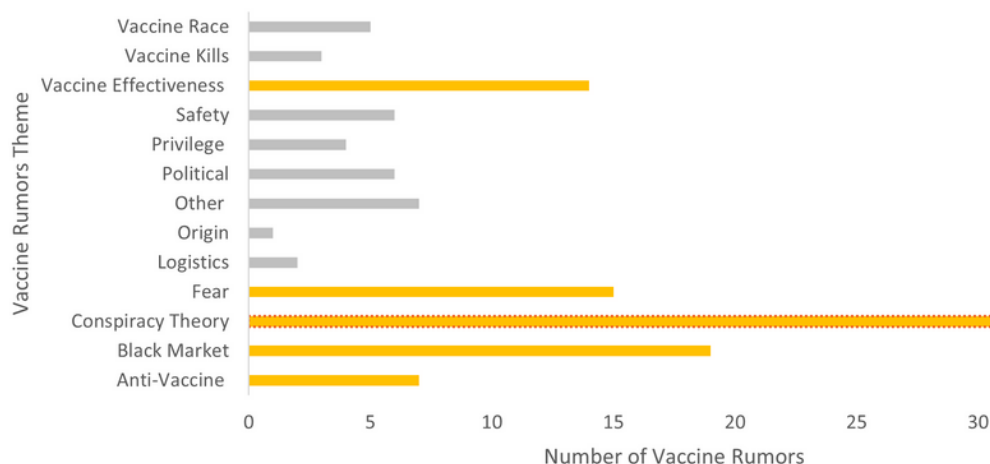
The Rooted in Trust project at Internews aims to respond to the COVID-19 “infodemic”, including fake news and rumors which affect access to basic services and assistance of vulnerable communities in Sudan. This periodic collection of the rumors that circulate throughout Sudan aims to provide humanitarian and public health actors suggestions for integrating community perspectives and concerns into their communication activities and strategy. Rumors gathered from social media do not derive exclusively from popular groups with large numbers of followers, but aim to include voices of diverse, vulnerable and marginalized groups.

This special edition rumor bulletin on COVID-19 vaccines is the product of a collection of rumors identified by the Sudan team, and its partner Andariya, as part of the Rooted in Trust project. In the period of 13 December 2020 to 18 January 2021, the team collected 120 rumors on the COVID-19 vaccines. The rumors were collected from social media sources commonly used in Sudan (Facebook, WhatsApp, Twitter and Instagram), and were selected through a risk analysis that brings to the forefront the misinformation with the highest risk and potential impact on vulnerable people, which are the target communities of the Rooted in Trust Sudan project. This week we focus on COVID-19 vaccine rumors: safety of the COVID-19 vaccine, concerns about vaccine’s impact on pregnant women and babies, questions about the side effects of the vaccine, and confusion over following the preventive measures prior to a COVID-19 vaccination.

### COVID-19 in Sudan

Sudan’s Health Ministry announced the second wave of COVID-19 on November 2, 2020. As of 19 January 2021, the official number rose to 28,233 confirmed COVID-19 cases, compared to 22,963 cases on 18 December 2020. Most cases identified have been in the capital Khartoum and Al-Gezira State.

### Vaccine Rumors Thematic Breakdown



*Analysis of 120 COVID-19 vaccine rumors collected in Arabic between 13 December 2020 and 18 January 2021*

## Sudan COVID-19 Vaccine Update

On 14 December 2020, Sudan's Prime Minister Abdallah Hamadok announced the country will be receiving 8.4 million doses of the COVID-19 vaccine, clarifying that at-risk groups, such as healthcare workers will be prioritized for vaccinations. The Ministry of Health will acquire the vaccines through COVAX—a global initiative aiming at securing COVID-19 vaccines for middle and lower-income countries—and expects their arrival in April 2021.

In a statement to Ayin Network, University of Ahfad Professor Dr Magdy Sabah Al-Zein revealed that the vaccines will cover about 20 percent of the population, and the government will need to acquire additional vaccines for the rest of the population – a serious challenge for any country emerging from the shadows of armed conflict coupled with brutal economic conditions. Some social media users questioned whether Sudan will be able to store the vaccines as they need to be kept at cool temperatures, which is a major task with recurring power cuts and increasing temperatures in April. In addition, anti-vaccine sentiments circulating on social media, adds another layer of challenges.

### Types of COVID-19 Vaccines

The COVID-19 vaccines instruct our bodies to recognize the virus and fight back. Currently there are two types of COVID-19 vaccines that are being used globally, including mRNA vaccines and vector vaccines.

#### mRNA Vaccines

The mRNA vaccines are developed using new technology, and contains parts of the virus that causes COVID-19, which instructs our cells to make a nontoxic protein that is specific to the virus. Our cells make copies of this protein to destroy the vaccine's genetic material. If we become infected with COVID-19 our bodies will then recognize that there are proteins that should not be there and will fight back.



#### Vector vaccines

Vector vaccines, which will be the primary COVID-19 vaccines used in Sudan in April, have been used since the 1970s, the flu and polio vaccines are also vector vaccines. The COVID-19 vector vaccines are produced out of weaker versions of a live virus that differs from the COVID-19 virus. This live virus is then inserted with genetic material from the COVID-19 virus. Once we receive this vaccine, the genetic material instructs our cells to produce a protein that is exclusive to the COVID-19 virus. Our cells go on to make these protein copies, and if we become infected with the COVID-19 virus our bodies are ready to fight back.



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## What People Say...

“Does the vaccine have side effects, and can anyone take this vaccine, even those with genetic and chronic diseases?”

Male – Twitter

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## The Facts

Essential workers, such as public health workers, supermarket employees and teachers, as well as older people and those suffering from chronic diseases and other serious illnesses will be prioritized for a COVID-19 vaccination.

It is natural for our bodies to have a temporary mild reaction to the vaccines. According to the [University of Oxford](#), there are a number of temporary side effects associated with the COVID-19 vaccines, which are mostly flu-like symptoms, such as fever, chills, arm pain (injection site), joint pains, fatigue, and nausea.

In rare cases, some people have severe allergies due to one or more ingredients in the vaccine. People who have severe allergies to an ingredient in the COVID-19 vaccine or have had an allergic reaction to one dose of the vaccine, should refrain from taking the vaccine. It is important to consult with a certified doctor before taking the vaccination.

## Recommendations

- Humanitarian organizations and national authorities should communicate clearly and proactively about specific groups that will be prioritized for a COVID-19 vaccination.
- Humanitarian partners should support public health authorities in disseminating clear and straight-forward messages on the possible side effects of a COVID-19 vaccination. Together they can help demystify some of the concerns around the vaccines, by explaining the difference between side effects and rare allergy reactions to the vaccines.
- Public health actors should proactively debunk and respond to misinformation around COVID-19 vaccines, as well as set-up a hotline that aims to respond to the most common questions and concerns regarding the vaccine.
- Humanitarian partners should encourage and launch discussions with local partners and public health authorities in identifying the best techniques and styles to communicate public health messages that meet the public's information needs and preferred channels of information.

## Why is it important?

Concerns on serious side effects, especially for chronically ill patients or the elderly are natural and have been recorded across many countries. While these are legitimate questions that reveal some gaps in information, it is important to monitor rumors and concerns that portray serious side effects. This is especially important as vaccines are rolled out in other countries with some news emerging of [severe vaccine-related side effects](#), which may trigger additional fears and concerns.

For this reason, the public should be well-informed ahead of the vaccination campaign in April of certain groups that will be prioritized for a COVID-19 vaccination, especially since Sudan will be receiving 8.4 million vaccine doses, meaning only 4.2 million people will be vaccinated. As rumors continue to circulate about the risk of a COVID-19 vaccination and its potential side effects, a vacuum in information will likely result in a rise in rumors and discourage those at-risk from getting vaccinated.



## Recommendations

- Humanitarian partners should consistently listen, monitor, and respond to specific questions from various groups of people, such as pregnant, and lactating women, as well as tracking concerns on children's health and vaccinations. As vaccine hesitancy is on the rise across the globe, partners must tailor public health messaging to the particular groups while responding to their concerns. Humanitarians should work on building trust and recognize people's fears, while providing up-to-date information.
- Humanitarian partners and other public health actors should coordinate a robust public health communication campaign ahead of the arrival of the vaccines in April 2021, including clear communication on the various recommended at-risk groups that will be prioritized for COVID-19 vaccinations as well as the roll-out timeline. This strategy must include activities to engage with different groups so as to discuss their access to the vaccine and safety-related concerns for the elderly, lactating women, pregnant women, children or chronically-ill patients.
- Humanitarian partners may choose to engage with women associations, midwife networks, community healthcare centers, neighborhood resistance committees or schools to provide up-to-date information on the official guidance on COVID-19 vaccines for pregnant and lactating women. Setting up listening groups in these spaces and encouraging dialogue within your own humanitarian teams may result in a nuanced understanding of the concerns of pregnant and lactating women.
- Humanitarian and public health actors should liaise with the media to meet the information needs of marginalized and vulnerable people, such as minorities, refugees, displaced peoples, and those living in under-resourced areas. Partners should rely on listening activities and community engagement sessions to flag any potential concerns around the vaccines and offer timely information to ease people's discomfort or anxiety on getting a COVID-19 vaccination.



## What People Say...



*"I would like to inquire about vaccinations for pregnant women, are there any reservations in vaccinating pregnant women? Or is better after delivering the baby?" Woman – Facebook*

*"If a lactating woman took the vaccine can it affect the baby through breastfeeding, given that the child is 8-months-old, is there a study clarifying the impact on babies?" Woman - Facebook*

## Why is it important?

A number of social media users were particularly concerned about the effects of the vaccine on pregnant and lactating women, as well as in newborn babies. These concerns have been raised across several countries worldwide, as vaccines have not been tested yet in these groups. In Sudan, some of these concerns have taken the form of questions which must be addressed before they turn into more dangerous rumors or viral pieces of misinformation. In some African countries, we are already observing a spillover of COVID-19 vaccine related-rumors to concerns on other vaccination campaigns, ultimately driving parents to avoid routine-immunization services for already time-tested vaccines.

## The Facts

Both pregnant and lactating women have taken COVID-19 vaccinations in other parts of world, however, according to the Center for Disease Control and Prevention (CDC), there is currently limited data on the safety of the COVID-19 vaccines on pregnant and lactating women, as well as on newborn babies. Therefore, pregnant, and lactating women who are considering a COVID-19 vaccination should consult with their healthcare provider before making this decision. However, CDC has states that mRNA vaccines are not thought to be a risk to a breastfeeding infant. Due to the limited number of available vaccines globally, only certain groups are prioritized for this first phase of vaccinations, such as healthcare workers, older people, and those suffering from chronic diseases. Lactating and pregnant women that fall within the recommend at-risk groups may choose to get a COVID-19 vaccination after a thorough consultation with their doctor.

# RUMOR BULLETIN #5



## What People Say...

“The vaccine is not a preventative measure or treatment, even after you take it you will continue to wear a mask, practice physical distancing and wash your hands”

Male – Twitter



## Why is it important?

There is increasing distrust in the effectiveness of the vaccine, and a rise in anti-vaccine sentiments since preventative measures are a must even after a COVID-19 vaccination. If community concerns and fears are left to fester without an explanation or engagement by humanitarian and public health actors, comes April 2021, these feelings may multiply and expand, and outright rejection of the vaccine or disregard for preventative measures could become the norm. This is a dangerous precedent, as without a cure for a COVID-19 infection, vaccinations are the only viable protection, particularly for at-risk and vulnerable groups of people.

## The Facts?

The COVID-19 vaccines are intended to provide protection against the virus and teach our bodies to fight the virus that comes with a COVID-19 infection. As medical experts are still trying to understand the “real-life effects” of the COVID-19 vaccines on people, the best way to protect ourselves and communities from a COVID-19 infection is by getting vaccinated while continuing to practice the preventative measures, including wearing a mask, physical distancing and washing our hands regularly. A change in public health recommendations will depend on the number of people getting vaccinated and the spread of the COVID-19 virus within a certain geographical location.

## Recommendations

- Strengthen complementary messages that promote vaccine-demand while they support sustained uptake of preventive measures before, during and after the roll-out of vaccines in April 2021. Focus must be placed on both lines of action simultaneously given the uncertainty on the duration of vaccine efficacy and transmission among those already vaccinated.
- Engage with local media to support their understanding and improve reporting on these complex health issues. It is essential that the media provide a comprehensive account to communities of this relation between vaccines and preventive measures, as well as raising awareness on locally relevant practices of encouraging adherence to preventative measures.
- Partners should consider a well-tailored social media campaign responding to misconceptions on vaccines vs preventative measures, while also setting up other community engagement activities to reach people that are not online (mobile radio, street theatre or tea corner discussions) as only 30 percent of Sudanese have access to the internet.

# RUMOR BULLETIN #5

## What People Say...

"This disease's threat increases everyday – can the vaccine treat the new COVID-19 variant?"

Female - Facebook



## Why is it important?

Since COVID-19 is a new virus and doctors are still learning about the disease, it is essential to regularly update the public on the latest developments as to quell some of the fear and apprehension. News on the emergence of a novel COVID-19 variant in UK and South Africa has only heightened the level of confusion and anxiety, as well as concerns about the effectiveness of the new vaccines in providing ample protection from the novel COVID-19 variants.

## The Facts?

The COVID-19 virus is from the Coronavirus family, and every virus undergoes various mutations, some of these mutations last and some disappear. New variants have been recorded in the UK, South Africa, Brazil, and Japan. Although the new COVID-19 variants can spread very quickly, according to the [Center for Disease Control and Prevention](#), there is no evidence that these variants which carry mutations cause more severe COVID-19 illness or an increased risk of death.

There is ongoing research on the effect of the variant on current COVID-19 vaccines. A preliminary study published on 7 January 2021, found that the new COVID-19 variants did not affect the antibodies produced by people who received the mRNA Pfizer vaccine. This means the Pfizer vaccine is effective against at least some mutations. AstraZeneca viral vector vaccine has been found effective in fighting the new COVID-19 variants. Vaccines can also be tweaked to accommodate mutations if necessary.

## Recommendations

- Humanitarian organizations, neighborhood resistance committees, media outlets, social media influencers and public health officials should widely disseminate fact-based and consistent public health information on the effectiveness of the vaccines on the new COVID-19 variants, as to ease people's fears.
- Awareness raising sessions should be held to dispel common misconceptions about the vaccines. Religious leaders and community elders could take an important role in this, as they are highly trusted figures within the communities.



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