This sixth bulletin is the product of a collection of rumors identified by the Sudan team, and its partners Andariya and Y-Peer Sudan, as part of the Rooted in Trust project. In the period of 13 to 26 January 2021, the team collected 308 rumors from social media sources commonly used in Sudan (Facebook, WhatsApp, Twitter and Instagram) and through face-to-face discussions with community members in Khartoum, Kassala, South Darfur, West Darfur, Blue Nile and South Kordofan States. The rumors discussed 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 healthcare shortages, forging a negative result, home remedies as a cure to COVID-19, and Muslims cannot contract a COVID-19 infection.

COVID-19 in Sudan

As of 15 February 2021, the official number rose to 30,006 confirmed COVID-19 cases, compared to 28,097 cases on 15 January 2021. Most cases identified have been in the capital Khartoum and Al-Gezira State.

TOP RUMOR THEMES

Analysis of 308 rumors collected in Arabic between 13 to 26 January 2021.
During times of crisis, like the COVID-19 pandemic, people rely on food and herbs that bring a sense of comfort and hope, like grandma’s home remedies. Tea, lemon, baobab and tamarind are some of the few readily available home remedies that some people have experimented with to treat a COVID-19 infection. Some include herbal remedies, like acacia incense, which has been passed down through generations in Sudan, as a tried and reliable treatment against a bad cold or flu. With rising mistrust in the health system and COVID-19 testing facilities, many are relying on medical advice from others, including family and friends, as well as non-professionals on social media. There are Facebook groups where people are sharing their best and tried herbal and home remedies believing it to cure a COVID-19 infection.

Why is it important?

During times of crisis, like the COVID-19 pandemic, people rely on food and herbs that bring a sense of comfort and hope, like grandma’s home remedies. Tea, lemon, baobab and tamarind are some of the few readily available home remedies that some people have experimented with to treat a COVID-19 infection. Some include herbal remedies, like acacia incense, which has been passed down through generations in Sudan, as a tried and reliable treatment against a bad cold or flu. With rising mistrust in the health system and COVID-19 testing facilities, many are relying on medical advice from others, including family and friends, as well as non-professionals on social media. There are Facebook groups where people are sharing their best and tried herbal and home remedies believing it to cure a COVID-19 infection.

Recommendations

- Humanitarian partners and public health officials should conduct empathetic awareness raising sessions noting the nutritional and historical value of popular herbal remedies, while emphasizing the practice of the recommended preventative measures as the best protection against a COVID-19 infection.

- Most COVID-19 infections are mild, and many people will rely on harmless plant-based remedies—such as lemon and mint tea—passed down by their grandparents or recommended by loved ones believing both in their sentimental value and power to alleviate symptoms. Community health workers and volunteers should focus on providing basic guidance on managing a mild and moderate COVID-19 infection at home, while emphasizing the recommended preventative measures.

- Partners should work with the local media to clarify that although some natural remedies may help alleviate mild COVID-19 symptoms, they are not a cure for the virus and if people experience more severe COVID-19 symptoms, they should immediately seek medical care. Partners may want to refer journalists to Internews’ guide on reporting on COVID-19 and traditional medicines.

The Facts

Even though tea and lemon are beneficial to our health, there is no evidence that either of the two can help with the loss of smell or treat a COVID-19 infection. Most herbs and plant-based foods are beneficial for our bodies and are great sources of vitamins and essential nutrients. However, there is no evidence that herbal remedies can cure or prevent COVID-19. In fact, there is no cure for the virus.

Many people have been relying on herbal remedies, and other remedies readily available at home, falsely believing that they could prevent or treat a COVID-19 infection. In under-resourced areas and parts of the country affected by years of conflict, access to healthcare is a constant challenge. Herbal remedies and readily available home treatments are not only more accessible and affordable for these communities, but in some parts of the country, they are the only viable option.

What People Say...

“Lemon steam brings back the sense of smell, this is what I heard”
Female – Damazine, Blue Nile

“I heard that tea with salt is the cure to COVID-19”
Male – Damazine, Blue Nile
RUMOR BULLETIN #6

What People Say...

“My father had COVID-19 a month ago...two days ago, he relapsed. The problem is that no isolation center wants to accept him because they consider him recovered from Corona, nor does any hospital want to accept him and are insisting on a negative PCR test... and of course the results will take time, [this] is an urgent case for ICU.”

Female -Facebook

Why is it important?

Reports of hospitals closing their doors to those that are critically ill has become a common phenomenon in Sudan during the pandemic. Complaints about denial of healthcare, particularly life-saving care to those suffering from severe symptoms due to a COVID-19 infection, or other serious health conditions have been consistently reported in Sudanese social media space and shared within everyday conversations between families and friends. The real impacts remain unknown, however, reports on the ground and on social media are concerning, citing countless people dying because urgent medical care was denied or delayed.

The Facts?

Loss in human life due to the denial or delay of urgent medical care has been reported in Sudan, with most cases coming from the capital Khartoum, where internet access is widespread. With an overburdened and under-resourced health system coupled with the continuous exodus of the country’s healthcare workers to other parts of the world, the health response is further exacerbated due to a strenuous economic situation. Despite philanthropic local efforts, and health initiatives spearheaded by Sudan’s diaspora, the need for overhauling the country’s health system remains great.

Healthcare workers have also expressed concern in contracting a COVID-19 infection at work. Many hospitals and other healthcare facilities continue to function without providing the proper personal protective equipment (PPE) to their staff. Without adequate protection for healthcare workers and training on protection practices, denying people access to life-saving care will continue to be a public health concern.

Recommendations

- In ensuring Accountability to Affected Populations (AAP), partners should support the public health response by setting-up feedback mechanisms where COVID-19 patients and those seeking care can safely share their perspectives and concerns regarding the offered health services.

- Partners should support public health responders in providing ample information to hospital managers and healthcare workers on how to adequately protect themselves and their teams from contracting a COVID-19 infection.

- Partners should support the well-being of both COVID-19 patients and healthcare workers through open communication on the psychosocial impacts of the pandemic, and by disseminating key mental health messages and support.

- Partners and public health responders should discuss openly the challenges they face in the COVID-19 response and intended actions to remedy these concerns.

- Health authorities should share public updates on the available PCR testing facilities and isolation centers around the country, and ensure centralized communication between all the service providers.
Such fraudulent acts may have catastrophic consequences and further complicate the health situation in the country. Traveling with a COVID-19 infection increases the risk of spreading the virus to others, which can have fatal results for older people and those with chronic diseases. Forging a negative result to travel internationally may increase the risk of spreading the virus to other communities. These types of acts increase public mistrust in COVID-19 testing facilities and discourages others from seeking a PCR test when experiencing symptoms. For the skeptics, it may further popularize the COVID-19 hoax rumor, leading to the abandonment of preventative health measures, like wearing a mask when in public or maintaining a physical distance of two meters from others.

There have also been cases of people traveling from Sudan after receiving a negative PCR result but testing positive for COVID-19 at their destination. This may have aided in some people questioning the reliability of COVID-19 testing facilities in the country. Although COVID-19 tests are highly accurate, sometimes a false negative can happen. According to the Center for Disease Control and Prevention, if you have COVID-19 symptoms and test negative you probably were not infected at the time of testing.

Recommendations

- Humanitarian partners should reinforce the COVID-19 response by encouraging community engagement activities to better understand peoples views around COVID-19 testing and respond to questions and concerns on testing.
- Partners and public health responders should disseminate to the public and regularly update registered PCR testing facilities around the country, emphasizing the importance of COVID-19 testing to protect ourselves and our communities.
- Public Health responders should disseminate clear messages around guidelines on COVID-19 testing, such as reliable and safe testing.

Why is it important?

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Partners should work with religious leaders, such as imams of local mosques and Sufi leaders to pass on reliable and fact-based information on COVID-19, borrowing from faith-based texts to strengthen their public health messages.

Public health officials should increase their sensitization efforts by engaging closely with religious leaders across the country, as community feedback suggests that these views are especially common among vulnerable communities, and in low-income settings.

Partners and public health responders should work with religious leaders and communities of faith in creating safe and healthy spaces, where people can continue to worship, while practicing the recommended preventative measures and ensuring proper ventilation.

People citing immunity from a COVID-19 infection because of their religious background or religious cleansing rituals is not only common in Sudan, but in other parts of the world as well. Community feedback collected across several Sudanese states suggests that this perspective is widespread and may have an impact on how people perceive the virus, and in practicing the recommended preventative measures in their daily lives.

These types of rumors are also a source of hope in the face of uncertainty during the pandemic, as many seek strength from their faith during times of hardship. Globally, some people have found state restrictions on group prayers and religious gatherings as hurtful and limiting their right to worship.

Wudu is a healthy Muslim practice that cleanses the body with just water for at least five times a day. However, COVID-19 is a respiratory virus that can only be removed effectively from our hands with soap and water.

COVID-19 is a global pandemic that can affect anyone regardless of their age, gender, ethnicity, or religion. According to the World Health Organization, there are currently more than 110 million cases of COVID-19 around the world. In Sudan, the Ministry of Health recorded so far more than 30,000 cases.

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**What People Say...**

“Corona does not come to people who do Wudu [before] every prayer”
Female – Kassala

“Muslim countries do not get Corona”
Male – Damazine, Blue Nile

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