MABAN COUNTY COVID 19 RESPONSE
MABAN RISK COMMUNICATION AND COMMUNITY ENGAGEMENT WORKING GROUP
RUMOUR TRACKING AND MANAGEMENT SUB-COMMITTEE
COVID-19 MABAN RUMOR TRACKING OVERVIEW DATED 24th August 2020

Introduction

This document contains rumor (s) that are collected from the Maban community (both refugees and host community) with feedback from the community included as well. The aim is to provide a coordinated feedback to the community

Methodology: Information is collected by partners in the working Group through informal and formal discussions with the communities. The information is completed using a semi structured tool

PREVENTION & CURE

Outlined below is what the community believes can prevent or cure covid 19

1. Drinking coffee and lemon on a daily basis
2. Consumption of soda ash
3. local herb known as garrad in Arabic
4. Chewing of lalov tree leaves, when chewed prevents one from contracting the virus.
5. Consuming Tamaric tree fruit
6. Drinking alcohol
7. drinking water boiled of sour and bitter herbs
8. Mixing with leaves of lemon tree plus oil. By doing that it will prevent people from getting cov19.
9. Kaya community indicate that they have identified 13 species of trees for prevention & cure
10. Using Sesame Oil in food

FACT: There are no medicines so far that can prevent or treat COVID-19

While some western, traditional or home remedies may provide comfort and alleviate symptoms of mild COVID-19, there are no medicines so far that have been shown to prevent or cure the disease.

World Health Organisation does not recommend self-medication with any medicines, including antibiotics, as a prevention or cure for COVID-19.

There are several ongoing clinical trials of both western and traditional medicines.

World Health Organisation is coordinating efforts to develop vaccines and medicines to prevent and treat COVID-19 and will continue to provide updated information as soon research results become available. **Source WHO**

https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/q-a-

The Maban COVID-19 rumour tracking and management sub-committee is led by Internews and the Danish Refugee Council (DRC). For further information, please contact Philip Lukudu: jlukudu@internews.org and Regina Muchai: regina.muchai@drc.ngo

MYTHS

Rumour Brief (1): In Melbel village, community members are saying that there is no Covid-19 because of the rain which washes out the Covid-19 from the air. Therefore, the virus has died, but will appear again during the dry season

Rumour Brief (2): Coronavirus is not real. Country leaders have made it up in order to gain income from other supporting countries.

Rumour Brief (3): Covid-19 is not a disease; rather, it is just politics because the government wants to stop the activities of every community

Rumour Brief (4) Coronavirus is a way for businesses to increase especially sale of medicines.

STIGMA

Rumour Brief (1): That NGOs are not providing soap because they want refugees to die of Covid 19

Rumour Brief (2) With the recent report of individuals infected with Covid-19 in Maban, there are a lot of questions being raised... in which hospital, are they from the refugee camps or from outside the camps...

Rumour Brief (3) Reports that NGO staff brought covid-19 to camp, especially in Gendrassa camp.

Rumour Brief (4): covid-19 is in Bunj hospital

FACT: Exposing yourself to the hot sun or temperatures higher than 25°C DOES NOT protect you from COVID-19: You can catch COVID-19, no matter how sunny or hot the weather is. Countries with hot weather have reported cases of COVID-19. To protect yourself, make sure you clean your hands frequently and thoroughly and avoid touching your eyes, mouth, and nose with dirty or unclean hands. **Source WHO**

FACT: Covid 19 is NOT a manipulated disease: All available evidence suggests that SARS-CoV-2 has a natural animal origin and is not a manipulated or constructed virus. SARSCoV-2 virus most probably has its ecological reservoir in bats. **Source WHO**

https://apps.who.int/iris/bitstream/handle/10665/332197/WHO-2019-nCoV-FAQ-Virus_origin-2020.1-eng.pdf

WHY IS COVID-19 CAUSING SO MUCH STIGMA? The level of stigma associated with COVID-19 is based on three main factors: 1) it is a disease that's new and for which there are still many unknowns; 2) we are often afraid of the unknown; and 3) it is easy to associate that fear with 'others'.

DOS and DON'TS

DO - talk about the new coronavirus disease (COVID-19)
Don't - attach locations or ethnicity to the disease, this is not a "Wuhan Virus", "Chinese Virus" or "Bunj virus".

DO - talk about people "acquiring" or "contracting" COVID-19

Don't talk about people "transmitting COVID-19" "infecting others" or "spreading the virus" as it implies intentional transmission and assigns blame.

Using criminalizing or dehumanizing terminology creates the impression that those with the disease have somehow done something wrong or are less human than the rest of us, feeding stigma, undermining empathy, and potentially fueling wider reluctance to seek treatment or attend screening, testing and quarantine. **Source WHO**

https://www.who.int/publications/m/item/a-guide-to-preventing-and-addressing-social-stigma-associated-with-covid-