

Community feedback considered in this report was collected between the **6 and 12 May 2020** and shared by Community Engagement and Accountability (CEA) focal points in **16 African countries**.

Community feedback was collected during conversations with community members during social mobilization activities in 5 countries: the Democratic Republic of Congo (1604 feedback comments), Cameroon (1476), Ghana (75), Burkina Faso (49) and South Sudan (22). Feedback was also collected through social media in Cameroon. Focal points in nine countries shared the main rumours, observation, beliefs, questions or suggestions they are hearing in their countries: Comoros, Kenya, Madagascar, Mauritius, Mozambique, Rwanda, Seychelles, Somalia, Uganda.

The most common community feedback is related to **behaviors to protect yourself from COVID-19**. While some mention measures such as physical distancing and staying at home, others mention inaccurate prevention methods like frequent showers, having sex, sleeping less or consumption of lemon, garlic, or herbs as ways to prevent the disease.

There continue to be many comments indicating mistrust in people or organizations in relation to the outbreak, mainly about the **pandemic being used for political**

purposes, making money or reducing the population. Some believe that a cure exists and is being withheld. These comments were more prevalent in Western and Central Africa, where many people believed the **disease is not real**.

Confusions around **who is or is not affected by COVID-19 persists**. Common beliefs remain that Africans cannot get infected or that it is a disease only for rich people. Some people also state it is only old people or those living in big cities that are at risk.

A common topic is also the **treatment of COVID-19** with many mentions that the treatment has already been found, with some referring to the herbal tonic in Madagascar.

Many comments related to **response activities**, with many commenting on the lockdown or lifting of it. People suggest scaling up community health promotion, providing livelihoods and distributing hand washing equipment or PPE. There are also requests for COVID-19 testing and medicine and questions about where cases are treated.

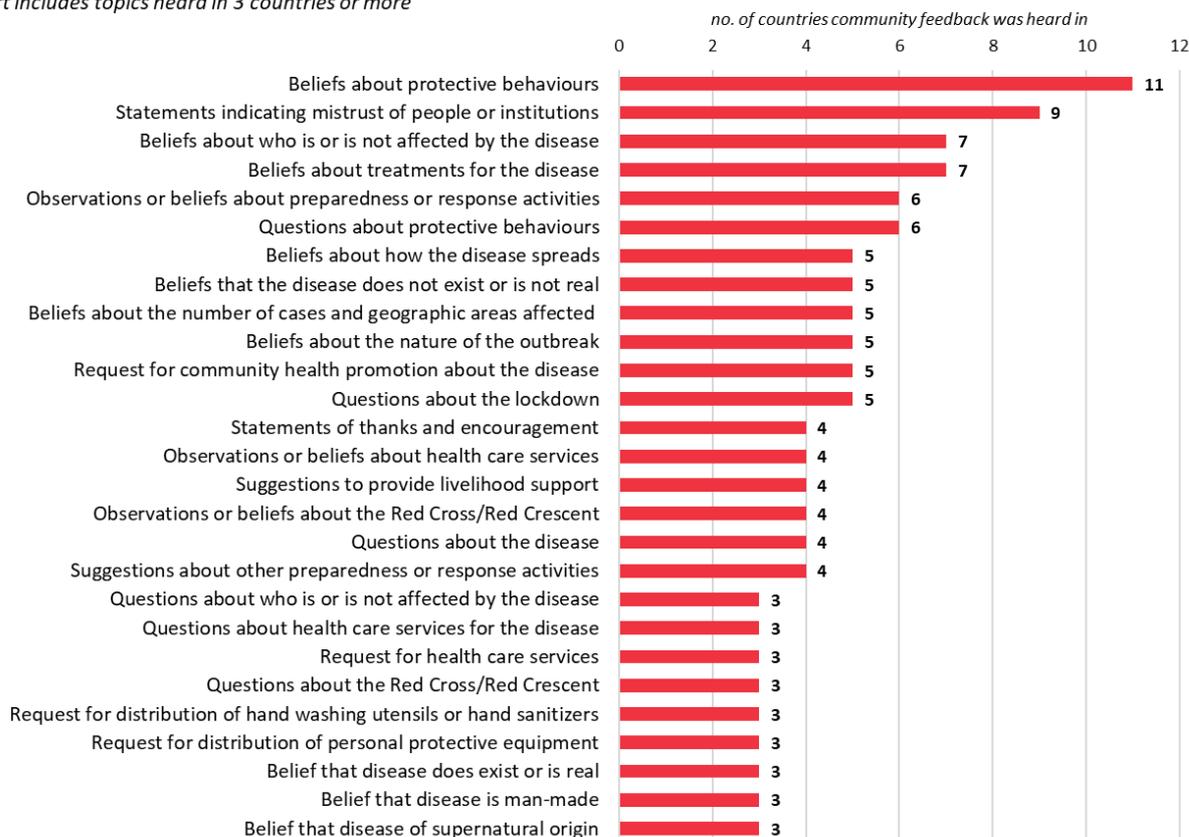
On information and communication about the disease, people mention that they believe **the numbers communicated are wrong**, or that the disease does not exist in their location. This is often supported with the statement that they don't see sick people in the media.

TO ADDRESS THIS FEEDBACK, WE NEED TO:

- Actively discuss COVID-19 prevention and who can catch the virus during all social mobilization activities. Explain how COVID-19 spreads, so people understand why prevention measures work. Also warn people about the measures that won't work.
- Engage communities, groups and leaders in conversations to understand why they mistrust the response and directly address these concerns to build their trust.
- If herbal cures are popular in your country, address this with communities by explaining that so far no cure has been proven to work, so until we have proof, people should continue to follow measures like physical distancing and hand washing as we know these definitely work.
- Work with local and national media and ask them to help address gaps in knowledge and misinformation through their reporting, including reporting stories about people who have recovered from the disease so people realize the virus is real.

MOST COMMON FEEDBACK TOPICS ACROSS COUNTRIES

This chart includes topics heard in 3 countries or more



MOST COMMON COMMUNITY FEEDBACK ACROSS COUNTRIES

1. Protective behaviours

Heard in: Burkina Faso, Cameroon, DRC, Ghana, Kenya, Madagascar, Mauritius, Mozambique, Rwanda, Seychelles, Somalia, South Sudan

Rumours, observations and beliefs:

“You need to stay at home, avoid gatherings and wash your hands after one hour.” – Cameroon, focus groups discussion with community members, 8 May 2020

“For corona prevention you have to shower consecutively and separate the couples at bedtime.” – Mozambique, National Society report, 11 May 2020

“To avoid getting ill, you need to boil “wilwigua” leaves (an ancestral plant), wash it and drink it. This plant that runs back through our elders has long been proven effective in combating contagious diseases.” - Burkina Faso, WhatsApp group with community members, 6 May 2020

“If you have sex every day, you cannot get Covid.” – Ghana, community meeting, 8 May 2020

Questions:

“Feedback are tired of masks all the time, when will normalcy return?” – Kenya, National Society report, 8 May 2020

“Can I wash my face mask regularly?” – Cameroon, National Society radio show, 6 May 2020

“Are face masks single-use?” – DRC, household visit, 6 May 2020

“Do you also need to keep the one-metre distance with your friends when eating?” – DRC, household visit, 6 May 2020

“Do you need to follow the protective measures within your household?” – Cameroon, National Society radio show, 6 May 2020

2. Statements indicating mistrust of people or institutions

Heard in: Benin, Cameroon, DRC, Ghana, Liberia, Madagascar, Mozambique, South Sudan, Uganda

Rumours, observations and beliefs:

“The coronavirus was created by the government.” – DRC, face to face to RC volunteer, 6 May 2020

“That corona virus was manufactured to decimate the Africans.” – Uganda, National Society report, 9 May 2020

“The government just want to raise funds, No CORONA in Liberia.” – Liberia, face to face to RC volunteer, 11 May 2020

“There is never a disease call Covid-19 the government, the health workers, and the politicians are all liars.” – Ghana, National Society radio show, 8 May 2020

3. Who is or is not affected by COVID-19

Heard in: Benin, Burkina Faso, Cameroon, DRC, Ghana, Mozambique, Rwanda, South Sudan, Uganda

Rumours, observations and beliefs:

“Covid-19 doesn't kill a black man.” – Cameroun, face to face to RC volunteer, 9 May 2020

“COVID-19 attacks old people.” – Rwanda, National Society report, 8 May 2020

“The virus infects people living in big cities and towns.” – DRC, household visit, 8 May 2020

“This disease cannot affect poor people because they are already used to drinking rum.” – Burkina Faso, household visit, 8 May 2020

Questions:

“Can the police avoid catching COVID-19?” – DRC, household visit, 8 May 2020

“Please, I want to know which group of people are more vulnerable to covid- 19?” – Ghana, National Society radio show, 8 May 2020

“Covid-19 is not affecting young people under 40 years, is it true?” – South Sudan, National Society report, 8 May 2020

4. Treatment of COVID-19

Heard in: Burkina Faso, Cameroon, DRC, Ghana, Madagascar, South Sudan, Uganda

Rumours, observations and beliefs:

“Coronavirus has treatment.” – South Sudan, National Society report, 6 May 2020

“The number of positive coronavirus cases has only increased. The government continues to use remedies found in our country instead of looking to other countries such as Madagascar.” – DRC, face to face to RC volunteer, 9 May 2020

“The cure for COVID-19 has been found in Douala.” – Cameroun, face to face to RC volunteer, 6 May 2020

“People are feared about the increase of cases while they have been told that COVID organics cures corona.” – Madagascar, National Society report, 11 May 2020

5. Response activities

Heard in: Cameroon, DRC, Ghana, Mozambique, Rwanda, Seychelles, South Sudan, Uganda

Rumours, observations and beliefs:

“It makes no sense to have relaxed the lockdown measures at this time.” – Cameroon, social media, 9 May 2020

“The main challenges are that the lockdown/confinement has worsened the most vulnerable communities. They now need support in basic needs.” – Seychelles, National Society report, 11 May 2020

“Schools and churches have been closed, but markets and hotels are still open. Even worse, during the lockdown, the authorities are having meetings of more than 20 people, which makes you think that the real COVID-19 does not exist in this country, because if it did exist, you would be collecting up the bodies.” – DRC, household visit, 8 April 2020

“IEC materials given are very few.” – Rwanda, National Society report, 8 May 2020

Questions:

“Why do the markets close at 4pm and the bars stay open?” – Cameroon, focus group discussion with community members, 6 May 2020

“Why have you only closed the churches and schools?” – DRC, household visit, 8 May 2020

“I want to know Why the Government lift the lockdown when the covid cases are still increasing daily?” – Ghana, National Society radio show, 8 May 2020

Suggestions:

“People get offended when they or their relatives are being quarantined or isolated so please GRCS intensify education on this topic and stigmatization.” – Ghana, community meeting, 8 May 2020

“It will be better to organize food distribution for people who are in need.” – Uganda, National Society report, 8 May 2020

“Schools should not open again until September in order to limit the infection rate.” – Cameroon, face to face to RC volunteer, 6 May 2020

“The government is making an effort to distribute soap and washing equipment to them.” – DRC, household visit, 6 May 2020

5. Health care services

Heard in: Cameroon, DRC, Ghana, Rwanda, South Sudan

Rumours, observations and beliefs:

“All of the laboratories are already coded to COVID-19 because all of the illnesses are positive for corona.” – DRC, face to face to RC volunteer, 6 May 2020

“People are scared to go to hospital out of fear of their ailments being confused with COVID-19.” – Cameroon, face to face to RC volunteer, 9 May 2020

“People are contaminated in hospitals, so there are some who don’t want to go to hospital.” – Rwanda, National Society report, 8 May 2020

Questions

“Which are the COVID-19 testing centres in Cameroon?” – Cameroon, WhatsApp group with staff and volunteers, 9 May 2020

“Why don’t we have medical experts here in Bunia to fight against this coronavirus?” – DRC, household visit, 8 May 2020

“Where are Covid-19 patients treated?” – South Sudan, National Society report, 8 May 2020

Suggestions:

“I want to appeal to the government to make testing machines available in every health facility and also encourage voluntary testing of covid 19.” – Ghana, community meeting, 8 May 2020

“The Archbishop of Douala’s COVID-19 medicine should be approved.” – Cameroon, face to face to RC volunteer, 6 May 2020

APPRECIATION - ENCOURAGEMENT

The statements of thanks and encouragement listed below represent the most frequently heard comments across countries in the IFRC Africa region.

Statement of thanks and encouragement

Heard in: Cameroon, DRC, Ghana, South Sudan

“We appreciate the efforts of the GRCS volunteers because many people are even afraid to talk to each other, but these volunteers are committed to educating us despite the danger.” – Ghana, community meeting, 8 May 2020

“Best of luck. At least you are explaining the disease to us unlike the people who come and distribute things.” – Cameroon, face to face to RC volunteer, 9 May 2020

“Thank you to the volunteers for teaching us about COVID-19.” – DRC, face to face to RC volunteer, 6 May 2020

“Many thanks to SSRC” – South Sudan, National Society report, 7 May 2020