

Community feedback considered in this report was collected between **01 February 2021 to 28 February 2021** and shared by Community Engagement and Accountability (CEA) focal points in **5 African countries**.

Most of the community feedback was collected through conversations during social mobilization activities such as face to face discussions and household visits in Cameroon (346), Malawi (349) and Cote d'Ivoire (18) and Gabon (68) respectively. Comments related to COVID-19 were also received from National Society radio shows in Gabon (102) and Cameroon (71), as well as through Social Media and on WhatsApp groups in Cote d'Ivoire (2) and Gabon (93).

Feedback was also collected through National society hotline in Cameroon (31) Sierra Leone (6) and Malawi (2), and through community gatherings such as focus group discussion and meetings by Malawi (11) and Cote d'Ivoire (1), other feedback channels were used both in Malawi (1) .

Preventative behaviours was the most talked about topic in community feedback during this reporting period. In particular, there were many pleas from people for others to respect the public health measures (PHMs) set by the Governments to stop transmission of COVID-19 cases. There were also questions related to face masks , such as what are the differences between the cloth and medical masks, why face masks aren't free and why should people wear face masks when authorities aren't wearing one themselves. There were also questions related to the reliability of face masks if borders and shops remained closed. There were several requests for distribution of personal protective equipment such as soap and hand sanitizers and face masks.

The **existence of the disease** was another major topic in this month's community feedback, with many people confirming the

existence of the disease. However, there were also a few comments stating that the disease is not real or that it does not exist in their region or country. There were also some questions about why we don't see sick people in the media or how we can make our friends and family members, who doubt the existence of the disease, understand that it's real and it does exist.

Among the widely discussed topics in community feedback was questions, statements, beliefs and observation about **Mistrust in the response**. Many comments indicated beliefs that institutions and people are using this outbreak response for their financial gain or for political purposes. There were also comments highlighting a concern that some patients upon arrival to the hospital are immediately diagnosed of the disease. More so, there were questions about why attention was given to this pandemic when other diseases have higher mortality rates as compared to COVID-19.

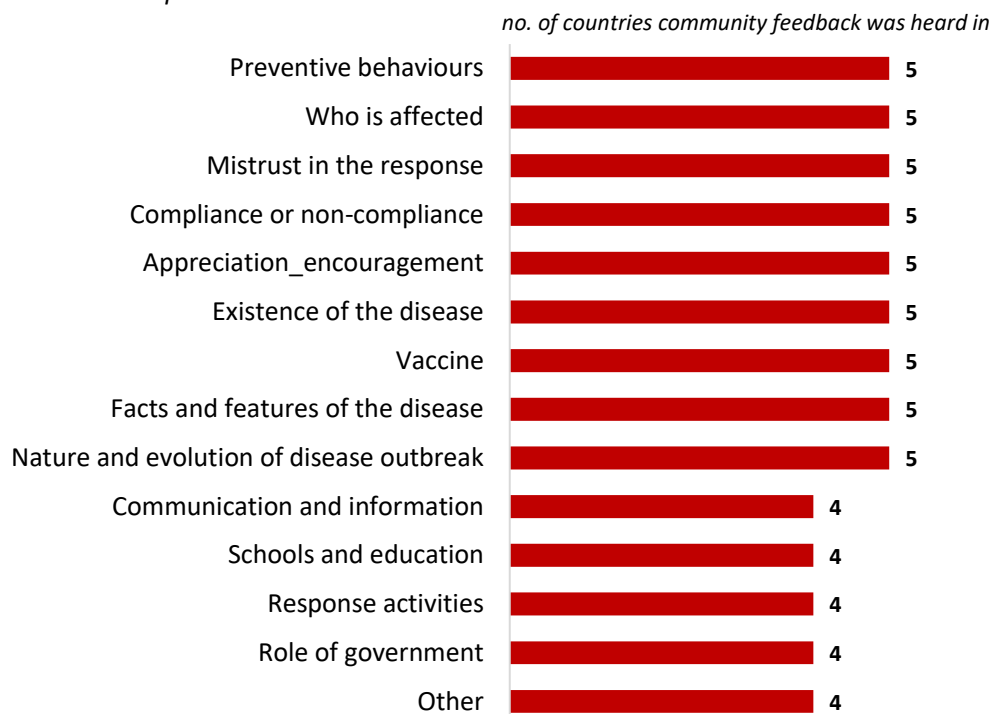
Many comments were also mentioning **vaccines** with people believing that the real vaccine is not made available for the population and that the vaccine was created for the purpose to control population size. There were also concerns about the side effects of the vaccines, with people mentioning that it could cause infertility, reduce life expectancy, or even death. Some comments referred to the vaccine as satanic or poison. Many people also asked questions on whether the vaccines will be compulsory, when will it be accessible to the population and why it was only available in some countries but not others. There were also questions related to the different COVID-19 vaccines and why they can't be combined into one vaccine.

TO ADDRESS THIS FEEDBACK, WE NEED TO:

- Ensure community members are informed of the evolution of the epidemic to help them better understand why it's still crucial to follow the public health measures. This Ask Dr Ben video gives [tips for how we can make our friends and families understand that COVID-19 is real](#) and encourage them to follow the prevention measures. See [Ask Dr Ben Factsheets 21, 26 and 28](#) for tips on how we can stay informed of the evolution of the pandemic.
- To help stop misinformation and rumours that the outbreak is over we need to provide up to date information on the number of cases and the outlook for Africa. This [video](#) helps to explain why the outbreak is not over and [Factsheets 23, 26 and 28](#) help to explain the emergence and eradication of infectious diseases and [Factsheet 23](#) address the question why Africa has been less affected than other parts of the world.
- Make sure that volunteers are updated on the COVID-19 vaccine developments and that they can respond to community member's questions and concerns about the vaccine. Use this new [vaccine FAQ guide](#) to help explain the vaccine's safety and benefits, when the vaccine will be ready for distribution, who will be immunized, IFRC's role and many more! Access all available materials on the COVID-19 vaccines [here](#).
- Continue to engage with community members on the public health measures, explain why it can help stop the spread of the virus, how you can practice these measures in your daily life, and in which situations you should follow the health measure to protect yourself. Use this video on [the story of coronavirus](#) to explain how the virus spreads and what we can do to protect ourselves. You can also use these resources including factsheets, videos, and IEC materials on face masks available [here](#), and for physical distancing [here](#).
- Work in partnership with communities to find and support local, practical solutions to preventing the spread of infection and bringing the outbreak under control. Use the [community-led solutions webinar package](#) and the [guidance note on community-led solutions](#), which provides step-by-step guidance to work with communities to plan COVID-19 response measures.
- Ensure volunteers know how to answer questions about how the disease spreads and consider doing a radio or TV show to explain this topic more clearly. [The Ask Dr Ben Factsheets 2,3, 4 8, 10, 14, 20, 21, and 26](#) all help to provide answers on this topics.

MOST COMMON FEEDBACK TOPICS ACROSS COUNTRIES

This chart includes topics heard in 4 countries or more



MOST COMMON COMMUNITY FEEDBACK ACROSS COUNTRIES

1. Comments and questions about the Preventive behaviours

Heard in: Cameroon, Sierra Leone, Gabon, Malawi, Cote d'Ivoire

Questions:

“Do you need to wear a mask if you wash your hands well?” – Cameroon, Face to face through social mobilizer, 7 February 2021

“Are the COVID-19 measures for all districts ?” – Sierra Leone, National Society hotline, 12 February 2021

“If the mask gives reliable protection, why close shops?” – Gabon, Social media (twitter, facebook etc), 13 February 2021

“Heard that the disease is deadly everyone can a victim regardless of being rich or poor if the disease is to spread to the rural areas what shall we do ?” – Malawi, Household visit. 16 February 2021

Rumours, observations and beliefs:

“do lots of sport, you can’t get COVID-19” – Cameroon, Face to face through social mobilizer, 7 February 2021

“Covid is still on and we can prevent by wearing of face masks and wash hands with soap regulary” – Malawi, Face to face through social mobilizer, 10 February 2021

“It’s the vitamin B that we have a lot of that protects us against the virus” – Gabon, Social media (twitter, facebook etc), 3 February 2021

Suggestions or requests:

“We want gloves to avoid having contact with contaminated objects, or people who are infected, we want gloves” – Cameroon, Face to face through social mobilizer, 7 February 2021

“For the state to distribute face coverings to the population who are vulnerable ” – Cote d’Ivoire, Household visit, 7 February 2021

2. Comments and questions about the existence of the disease

Heard in: Cameroon, Sierra Leone, Gabon, Malawi, Cote d’Ivoire

Questions :

“Does the disease really exist?” – Cameroon, Face to face through social mobilizer, 7 February 2021

“how can we make our friends and families understand that coronavirus is real?” – Gabon, National Society radio show, 10 February 2021

“ Why are we not seeing the corona patients ?” – Sierra Leone, National society hotline, 12 February 2021

Rumours, observations and beliefs:

“it doesn’t exist as I haven’t seen an ill person yet” – Cameroon, Face to face through social mobilizer, 7 February 2021

“Covid-19 is real but it raises questions to see that patients in hospitals suffering from this illness do not recover but die” – Malawi, Household visit, 18 February 2021

“The disease is a reality in our immediate circle” – Cote d’Ivoire, Community meeting, 2 February 2021

3. Comments and questions about Mistrust in the response

Heard in: Cameroon, Sierra Leone, Gabon, Malawi, Cote d’Ivoire

Questions:

“Is it true that the government received funds to give health workers everytime they diagnose covid 19 patient?” – Malawi, Household visit, 16 February 2021

“Covid tests have made almost 1 billion francs for the state, but where has this money gone?” – Gabon, National Society radio show, 14 February 2021

Rumours, observations and beliefs:

“We no longer believe that this disease exists, it’s a story about money that governments are making” – Cote d’Ivoire, Community meeting, 11 February 2021

“this disease is the result of a failed experiment” – Cameroon, Face to face through social mobilizer, 7 February 2021

“COVID-19 is in everything that is transported from the West to Africa, given that the transported material is handled by people that are infected but don't even know it.”–
Cote d'Ivoire, Community meeting, 7 February 2021

“There is some hidden secret about this disease among health workers, they are killing people from and lutting off their body parts” – Malawi, Household visit, 18 February 2021

4. Comments and questions about Vaccine

Heard in: Cameroon, Sierra Leone, Gabon, Malawi, Cote d'Ivoire

Questions :

“We understand there are several vaccines, so why not put them all into a single one?” – Cameroon, National Society radio show, 18 February 2021

“Africa is the continent that's least affected by coronavirus, yet why are governments already talking about vaccines?” – Gabon, National Society radio show, 7 February 2021

“Will this disease really have vaccines to prevent the covid-19 virus?” – Cote d'Ivoire, Household visit, 5 February 2021

“There is now a vaccine for Covid-19, and rumour has it that it is fatal, is this true?” – Malawi, Household visit, 17 February 2021

Rumours, beliefs and observations:

“We know that this vaccine was created in a laboratory with the aim of controlling the population” – Gabon, Social media (twitter, facebook etc), 6 February 2021

“We know about Covid-19 but we fear about the vaccine branded as Covid-19 but it's poison ”. – Malawi, Household visit, 18 February 2021

“The real vaccine won't really reach black Africa”– Cote d'Ivoire, Household visit, 7 February 2021

“Covid Vaccine is poison and make people stop having children(family planning).” – Malawi, Household visit, 19 February 2021

Suggestions and Requests:

“request for the vaccine for healthy people,”– Cameroon, Face to face through social mobilizer, 7 February 2021

“Let the Gabonese people choose whether they want to be vaccinated or not”- Gabon, Social media (twitter, facebook etc), 3 February 2021

APPRECIATION - ENCOURAGEMENT

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

Statements of thanks and encouragement

Heard in: Cameroon, Sierra Leone, Gabon, Malawi

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“We thank the state for their efforts to screen people for free” – Cameroon, Face to face through social mobilizer, 7 February 2021

“Thanks to Red Cross for the case transfer and educating us about government measures put in place to reduce the spread of Corona in Sierra Leone” – Sierra Leone, National society hotline, 12 February 2021

“Thank you for the information and good luck to the medical staff.” – Gabon, Social media (twitter, facebook etc), 3 February 2021

“Appreciates the work done by Redcross in fighting corona virus disease” - Malawi, Household visit, 18 February 2021

FOR MORE INFORMATION ON IFRC EFFORTS TO DOCUMENT, ANALYSE AND USE COMMUNITY FEEDBACK ON COVID-19 IN AFRICA, PLEASE CONTACT ELISABETH GANTER RESTREPO AT ELISABETH.GANTER@IFRC.ORG.