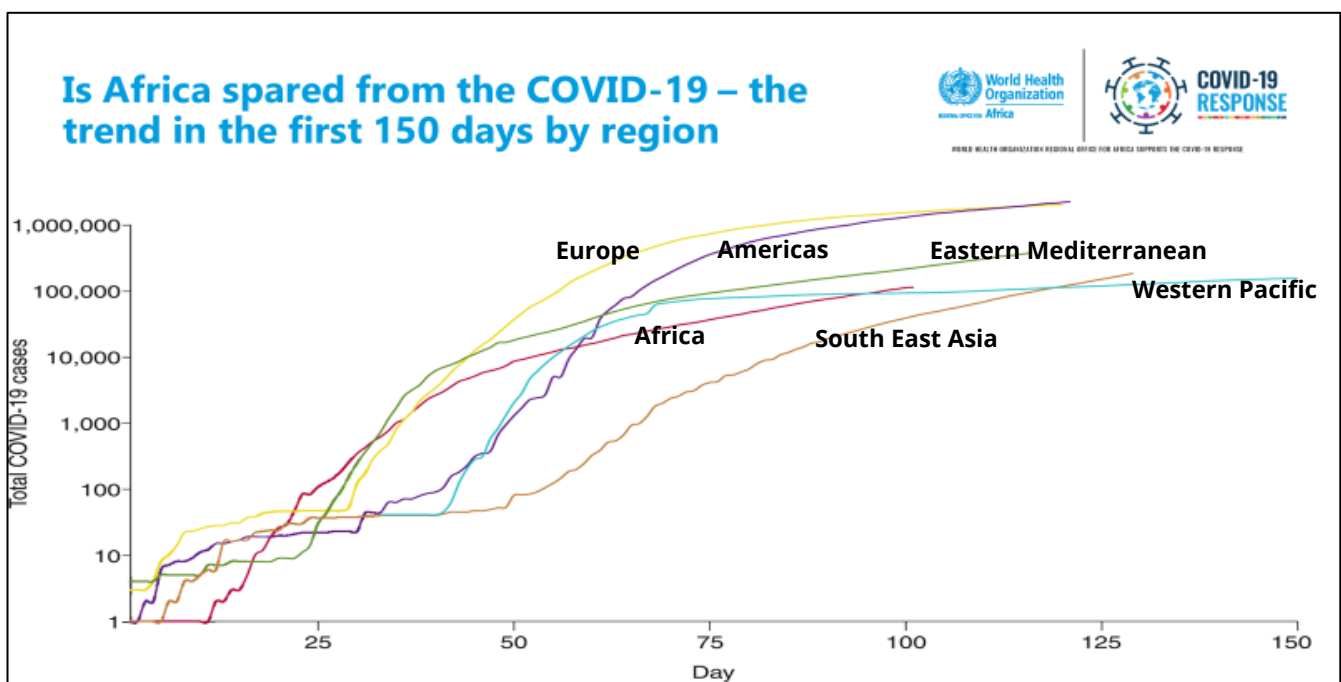


Mistrust, Denial & Disbelief: Is COVID-19 real and is it affecting people in Africa?

So far, Africa has been less affected by COVID-19 than other parts of the world, with a lower number of cases and deaths than Europe and the US. However, this is leading people to believe COVID-19 is not real, or that it cannot affect them, because they do not see sick people in their community or the media. Comments collected through community feedback mechanisms, include; *"We don't see people dying of COVID-19, is this COVID-19 real?"* or *"The virus is a disease of the rich, it only affects the white people"*. If left unaddressed, these beliefs could lead people to disregard health measures designed to stop the spread of the virus, causing a rise in COVID-19 cases and deaths. This factsheet is designed to help those working with communities to respond to these statements of mistrust and denial by providing clear information and key messages on the current case rate and the facts about who is affected by the virus.

What is the situation with COVID-19 cases and fatalities in Africa?

- COVID-19 is affecting Africa. As of 10 August 2020, there have been 891,942 cases of confirmed COVID 19 cases in the Africa region and over 16,669 deaths. These numbers are rising daily.
- The average Case Fatality Rate (CFR) in Africa is around 1.8-2%. This means that out of every 100 people who are infected, 2 will go on to die.
- It took Africa 98 days to reach 100,000 cases, but only 62 days to exceed 700,000 cases. This shows that the number of cases is increasing in Africa.
- South Africa is now one of the top five most affected countries in the world in terms of COVID-19 cases with more than half a million confirmed cases of the virus and 10,000 deaths.
- Other countries where the number of COVID-19 cases are now increasingly rapidly include Burundi, Comoros, Eritrea, Eswatini, Ethiopia, Kenya, Lesotho, Madagascar, Malawi, Mozambique, South Sudan, Zambia and Zimbabwe.
- When we compare the rate of COVID-19 cases in Africa within the first 150 days of the outbreak, we can see Africa is following the same path as other regions in the world, as the graph below shows.



Who can catch COVID-19?

- Coronavirus can affect everyone; men and women, young and old, and all races. The virus that causes COVID-19 has now spread around the world, and people from all continents have been affected, including Africans, Asians, Americans and Europeans. The virus has also now spread from cities to rural areas.
- Based on current evidence, it is clear that everyone can catch and spread the virus. However elderly people or those with existing illnesses are more at risk of developing severe symptoms of COVID-19.
- Information from one African country highlights that older people are more likely to die from COVID-19. The number of people who died from the virus was an average of 2.6% for those under 50 years of age, but 22% for those aged 60 years and over. This means those over 60 years old were 8 times more likely to die from COVID-19, than those under 50 years of age.
- This does not mean that young people cannot die from the disease. People of all ages including infants less than 1 years of age have contracted COVID 19 and died from it.
- The evidence has also proven that those with other medical conditions such as hypertension, diabetes, cancer, HIV and others, have a much higher chance of severe disease and death from COVID 19.
- However, anyone can spread COVID-19 to vulnerable groups even if they have mild or no symptoms at all, which is why everyone must follow prevention measures to protect those around them, particularly elderly family members of those with other illnesses.

Is COVID-19 real?

- Community feedback indicates many people do not believe COVID-19 is real, because they do not know someone who has had the virus or do not see stories in the media about people who have been affected. Stories which do appear in the media tend to feature politicians or famous people who have caught the virus, adding the belief that only rich, powerful people who travel are affected by the disease.
- However, as the numbers above show, COVID-19 is real and it is affecting Africa, with the number of people affected rising each day. People may not personally know someone yet who has been affected, but it is unlikely to stay this way.
- It is everyone's individual choice whether they want to have their story told publicly in the media. Forcing people who have coronavirus to be exposed in the media could lead to people hiding it when they are sick and refusing to be tested, which would only cause the virus to spread even more quickly.
- However, many who have tested positive for coronavirus have been willing to share their stories with the media. Some examples include:
 - [Two of the first coronavirus cases in Kenya](#) spoke about their experiences during a public appearance
 - [A Nigerian woman](#) talks to Al Jazeera about her experience
 - [A Ghanaian man calls for people not to discriminate against survivors on CTGN Africa](#)
 - [Seth Olale](#) shares his experience visiting a COVID-19 ICU ward.
- Journalists also need to stay safe and follow standard guidance to avoid close contact with people confirmed to have COVID-19.
- In order to encourage more people to share their stories through the media it is important not to discriminate or stigmatise people who have recovered from coronavirus. Once a person has recovered, they are no longer infectious and can return to their home and community and pose no risk to their family, neighbours, and friends.

Is COVID-19 just a tool to make money?

- The COVID-19 pandemic has had a very negative impact on the global economy, as well as peoples' health.
- It has heavily affected people's ability to work and make an income, businesses have shut, there is limited travel and it has become harder to transport goods and services from country to country.

- This means governments are collecting less income from taxes, while at the same time more funding is needed to scale up healthcare services, support people who have lost their income, and run COVID-19 prevention activities.
- There is also less donor funding available as all countries around the world have been affected by the pandemic, meaning richer countries require funds to respond to the needs in their own countries and have less to donate to other countries.
- So, while governments and aid agencies may receive some funding from donors to respond to COVID-19, the amount of funding received is not enough to meet the needs or offset the losses caused by the damage COVID-19 has done to the economy.
- When organisations receive funds from donors, they have to follow strict reporting requirements explaining what the money was spent on and why. This information is usually made available to the public and can be accessed on individual organisations' websites.

Key messages

1. COVID-19 has now spread to every country in Africa and cases are rising quickly so we should not wait until people are dying in our community before we believe the virus is real. It's the actions we take now that will end this outbreak as quickly as possible.
2. Just because you don't know someone who has had COVID-19 does not mean the virus isn't real. So far, we have been less affected in Africa than other parts of the world, but this is not a reason to relax or to think it's not real - instead we should do everything we can to keep the number of cases and deaths as low as possible.
3. We can all catch and spread COVID-19. There are cases of young people and children catching the virus, cases in rural villages, people who have never travelled, and those from all ethnic groups and religions. If you can catch a cold, you can catch COVID-19.
4. If you are young and catch COVID-19 you may only get mild symptoms, but you can still pass the virus to your older relatives who are more likely to become seriously ill and die. By protecting yourself, you are also protecting your family, friends and loved ones.
5. COVID-19 has had a terrible impact on the economy. No country wants the virus or is financially stronger since it started.

Recommendations

1. Carry out focus group discussions or key informant interviews to understand sources of mistrust and denial, speaking to lots of different groups in the community.
2. Find ways to share the stories of local people who have recovered from COVID-19 through the media and in communities to show that the disease is real and can affect anyone. For example, ask health care workers, social mobilizers, and trusted and respected community figures who have caught the virus to share their stories in the media or through community activities.
3. Share this factsheet widely with your staff and social mobilizers so they are equipped to respond to community feedback indicating mistrust and denial of the outbreak.
4. Enlist the support of local and national media to address mistrust and denial through their reporting, for example hold media webinars on the topic or facilitate visits to COVID-19 treatment facilities.
5. Brief governments on community feedback indicating mistrust and denial and support them to build trust in the response by giving more detailed information on the impact of the virus in their country and how funding is being used to tackle it.
6. Engage trusted community and religious leaders and key influencers such as youth groups to discuss how you can work together to address mistrust and denial in communities.
7. Build trust by working in partnership with communities to find local, practical solutions to preventing and managing outbreaks of COVID-19. Use the [interagency guidance note](#).