HUMANITARIAN SNAPSHOT

Rooted in Trust

Rooted in Trust 2.0 Project

Iraq – December 2022

170
Rumors collected

What do people say?

1. "There is no more Coronavirus, it has been gone one year ago."

2. "Coronavirus previously existed, but the current infections are normal flu and Coronavirus is over."

3. "Coronavirus is over, and countries have almost canceled the vaccine."

4. "There is no more Coronavirus and no vaccines; because they don't care about it in traveling and border crossings."

Top Rumor Themes

- Safety/Side Effects
- Hoax
- Vaccine Agenda
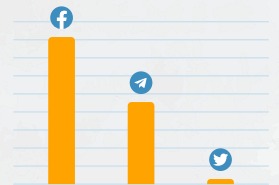
Source of Online Rumors

What is the truth?

- According to the WHO dashboard, Iraq reported 1,057 confirmed COVID-19 cases in December 2022, regardless of the cases having symptoms but not making COVID-19 tests. Also, there were nine death cases by the COVID-19 virus during the same month.[1]

- Both the Iraqi Ministry of Health and the KRG Ministry of Health publish the number of COVID-19 cases on their social media platforms on a weekly basis, this indicates that the virus still exists in the country.

- Dr. Riyadh Alhilfi, Director General of Public Health at the Ministry of Health - Iraq, stated to the local media that "the Omicron mutant has become endemic in Iraq, and there is no concern about the mutated entry again, being the same mutant, but the new strain transmits faster than the previous strains," noting that "almost half of the influenza cases are Omicron, and the remaining are influenza (A) and (B)". He concluded by saying, "If a citizen is vaccinated and wears a mask, he will achieve 90% protection from infection with the coronavirus, even if he is in crowded places."[2]

- One of the reasons behind spreading the rumors inside the IDP camps is that there is no healthy information ecosystem, especially between humanitarian actors and IDPs. Some of these rumors have been collected inside the IDP camps, and recently, the provision of health services in the camps through humanitarian organizations has decreased significantly, and some organizations have withdrawn their services in the IDP camps. This has affected IDPs in terms of a lack of trust in humanitarian organizations and their services. This once again paves the way for the creation and spread of misinformation about the various crises and on top of them the health outbreaks.

What can we do as humanitarians and public health responders?

- Humanitarian and health actors should build a strong relationship with media outlets and journalists to work more closely on health issues, mainly in highlighting the number of COVID-19 cases in the country. They can both together build a healthy information ecosystem between them. This can be done by establishing an active network to communicate effectively on the COVID-19 virus and other outbreaks, as well as tackling issues related to access to accurate and trustworthy information.

- Humanitarian and health organizations should monitor the media and provide factual information on any health issues to the community. They can do fact-checking on the false information that spreads in the different media platforms and among community members. They have to publish truthful information on their social media and other platforms in local languages.

- Humanitarian actors and community-based organizations should have a clear communication strategy regarding decreasing their services and withdrawal from the IDP camps. They have to coordinate with the camp management and other relevant stakeholders in providing a clear approach regarding cutting their services inside the camps. This affects the trust between them and the IDP community, in which the lack of trust feeds the concerns and hesitancy toward any issues, especially the COVID-19 vaccination.

Sources

1. https://covid19.who.int/region/emro/country/iq

2. https://www.ina.iq/174510--.html

We welcome your feedback, questions, and suggestions. Please contact:

Sara Sofiwan
Director of Programs
ssofiwan@internews.org