Humanitarian Bulletin Mali #3
May 2022

Theme trends

• Rumors addressed in this bulletin pertain to concerns surrounding vaccine side effects, particularly on pregnant and breastfeeding women as well as continuing doubts about the existence of the disease.

• This regular collection of information from the community aims to provide recommendations to humanitarian and public health agencies so that they can incorporate them into their risk communication activities, and align them with the perspectives and information needs expressed by the community.

274 rumors collected

Disinformation 40%
Treatment 30%
Efficacy/Side effects 20%
Denial 10%
Religion 0%

Methodology

Data collection is done in the field with field workers, through community radios and through monitoring of social media platforms and spaces where communities are active (Facebook, Twitter, WhatsApp, posts, comments and stories). The data collected is cleaned, analyzed and categorized by topic and according to risk level. Selection for this bulletin is based on a risk assessment matrix considering topic frequency, rumor credibility and potential impact on the community and on humanitarian and health services.
Since the arrival of the Pfizer vaccine in Mali, there have been numerous rumors questioning its safety and effectiveness. The false information relayed on social media about an alleged study by Pfizer recommending that pregnant women not get vaccinated may reinforce people’s hesitation and fears about the supposed side effects on the health of pregnant women and their children but also on fertility in general. Indeed, there is much discussion about the COVID-19 vaccine causing infertility, especially in women.

These concerns and/or beliefs may be supported by underlying socio-cultural representations of motherhood/fertility in the population. It is essential to take this into consideration when adapting intervention and community engagement strategies.

Furthermore, disease denial, doubts regarding the seriousness of the pandemic and usefulness/effectiveness of the vaccine reinforce this type of claim; vaccines are perceived as instruments serving foreign interests and are harmful to African populations.

(1) The study, from 2020, comes from the United Kingdom’s Medicines Regulatory Agency, which did not recommend vaccination for this specific group at that time. These recommendations have since been modified.
In a WHO document dated February 15, 2022, WHO’s Strategic Advisory Group of Experts on Immunization (SAGE) interim recommendations for approved COVID-19 vaccines reaffirm the safety and efficacy of vaccination against COVID-19 during pregnancy and suggest that the benefits of vaccination outweigh the risks of not getting vaccinated during pregnancy.

According to the United States’ Centers for Disease Control and Prevention (CDC), vaccines are effective in preventing COVID-19 while breastfeeding. Recent reports have shown that breastfeeding individuals who have been vaccinated with messenger RNA such as Pfizer have developed antibodies in their breastmilk, which may contribute to protecting their baby. However, additional data is necessary to determine the level of protection these antibodies may provide for the baby.

In a telephone interview, Dr. Ibrahima Diarra, Head of the Expanded Program of Immunization in Mali, Head of the “Immunization” Section at the General Directorate of Health and Public Hygiene, states that so far, no safety concerns have been identified in vaccinated pregnant women or breastfed babies.

On May 09, 2022, Mali introduced the Pfizer vaccine for ages 12 and over with 100,620 doses received through the COVAX facility. At the moment, vaccination with Pfizer is only for the six communities of the Bamako District and the Kati and Kâblâbôn Coro communities.

It should be recalled that Law 02-044 of 2002 on reproductive health recognizes and strengthens women’s rights in reproductive health and family planning, and several frameworks govern the implementation and coordination of family planning interventions in Mali (PANB PF 2019-2023). Community Health Centers in collaboration with the Social Development Service, provide family planning services for displaced persons.

On May 19, 2022, a total of 11,810 people aged 12 and over have received their first doses of the Pfizer vaccine, including 5,500 men and 6,310 women.

Vaccination of pregnant and breastfeeding women with Pfizer vaccine as of May 24th, 2022 (available data):
- Commune 1: 4 pregnant women and 27 breastfeeding women;
- Commune 2: 35 pregnant women;
- Commune 3: 10 pregnant women.

Pregnant and breastfeeding women in the regions vaccinated with other antigens (AstraZeneca, Sinovac, Sinopharm, and Johnson and Johnson) as of May 18th, 2022:
- 5 pregnant women and 70 breastfeeding women.

Why is it important?
- These perceptions can slow down COVID-19 vaccination programs, increasing the risks of contamination and spread, particularly among pregnant and breastfeeding women.
- In addition to encouraging vaccine hesitancy, this exposes pregnant women or those planning to become pregnant to an increased risk of developing more severe forms of the virus and having complications during their pregnancy and with the baby’s development if they are infected by the virus.
- It is essential to understand the communities’ socio-cultural context in order to reduce the risks of reluctance or rejection of the vaccination programs. Understanding them better will allow for the development of community engagement strategies and campaigns that specifically address community concerns, provide transparent and contextualized information, and promote community confidence in (and access to) the delivery of health services, including immunizations.

Recommendations
- Increasing the number of participatory and inclusive approaches by involving the leaders of women’s groups and associations, community relays and community health workers (CHW) in discussion groups with the communities to inform them of the immunization programs. Also promote listening along with psychological support to women belonging to vulnerable groups in specific discussion groups to facilitate sharing and discussing motherhood and women’s rights regarding reproductive health.
- Reaching communities where women are most present: humanitarian partners should engage further alongside faith communities, setting up listening groups in religious spaces, such as mosques and churches, encouraging dialogue that can result in a nuanced understanding of these communities’ concerns regarding preventive measures and vaccines.
- Supporting capacity-building of frontline health and humanitarian staff in the COVID-19 response so they can constantly transmit up-to-date and appropriate information on immunization, vaccines, and questions and answers related to maternal health and the disease in general.
Concerns around vaccine safety and effectiveness remain at the forefront of conversations in communities and on social networks. Perceptions that the disease does not exist/is behind us and that “foreign” or Western vaccines would be less effective or designed to control the African population are still part of the narrative.

Lack of access to reliable information on the operation and administration of vaccines may promote the persistence of such perceptions, especially in the case of internally displaced people on the move and/or with limited means.

Similarly, reluctance or negative perceptions of vaccination may be caused by a variety of socioeconomic reasons that need to be identified in order to provide the appropriate responses.

The possibility of contracting the virus even with partial or complete vaccination is a concern and is seen as an indicator of the vaccine’s ineffectiveness.

"COVID-19/Vaccines do not stop infection nor spread. Even worse, triple vaccinated individuals are the most likely to die. Why then pushing the world to get vaccinated?"

Facebook user

"Effective vaccines are not for Black people."

IDP, site of Bandiagara,

Additional resources

Vaccine Inequity and Communication with Communities

Previous Rumor Bulletins
This type of discourse can highlight the lack or the difficulty of access to information, especially for vulnerable populations on the vaccination campaign and the local health facilities that can welcome and support them.

While reinforcing vaccine reluctance, these rumors may deter people from getting tested, limiting the effectiveness of testing and the detection of new variants, which is conducive to the spread of the virus.

In addition to informing us of the specific needs of internally displaced people, it can also alert us to their worrisome living conditions, to the challenges and additional efforts that the actors of the COVID-19 response must implement in order to not only respond to the need for humanitarian assistance, but also to adapt (to socio-cultural and economic depictions and realities) and make communication strategies of the risks and community involvement in vaccination more effective.

**Fact checking**

Vaccines against COVID-19 used in Africa are the same as those used worldwide. Getting vaccinated provides protection against severe forms of COVID-19 and prevents dying of this disease.

Remember that since the first cases appeared in Mali in March 2020, there have been 31,071 positive cases for coronavirus and 734 deaths according to the Ministry of Health and Social Development as of May 26, 2022. In Africa, there are more that 11.8 million positive cases and 253,000 reported deaths (WHO Africa, May 26, 2022).

When contacted by phone, a PDI leader explained that the community's doubts about the effectiveness and safety of the vaccine are linked to fear and distrust of an alleged control of the population.

According to this PDI officer, the needs for daily subsistence are more pressing and critical than the disease and the COVID-19 vaccination.

Even if they had access to information about the vaccination campaign on their site (date, location, targets and age group), the internally displaced would not be interested or would attach less importance to it because of their precariousness and difficult living conditions due to the lack of food, shelter, hygiene kits or drinking water.

**Why is it important?**

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- While reinforcing vaccine reluctance, these rumors may deter people from getting tested, limiting the effectiveness of testing and the detection of new variants, which is conducive to the spread of the virus.
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**Recommendations**

- **Acknowledge the beliefs and open discussions with the community.** We often tend to ignore the perceptions and belief systems of the communities we interact with. The systematic implementation of listening and feedback mechanisms allows for dialogue with the people and setting up responses that make sense to them.

- **Relying on community radio stations and information networks within the internally displaced people’s sites.** Work with community proximity radio stations to share clear, popularized and transparent information on immunization, as well as to organize debates that allow communities to express themselves on topics that interest them.
Other rumor trends

Denial of the disease / Wearing a mask

"Watching TV, we see that the leaders themselves do not wear masks. So, it’s all a lie."

Disease denial, misinformation and associated conspiracy theories are numerous and continue to fuel conversations in Mali. The conditions under which vaccines are manufactured and distributed or even the inequality of vaccines between countries and populations boost these perceptions.

The recent easing of preventive measures by health authorities on April 11 through a press release may raise questions and reinforce talks questioning the existence of COVID-19, especially in a context where the vaccination campaign is in full swing.

Response actors should therefore insist, through clear, transparent and accessible communications to the whole population, on the benefits of vaccination, while recalling the importance of continuing to observe preventive and hygienic measures that are recommended but not compulsory in view of the evolution of the epidemiological situation and the progress of scientific research on the virus.

Vaccination remains an essential public health tool to protect oneself, reduce the risk of developing a severe form of the disease in case of infection and limit variant expansion. Prevention is still important even when people are vaccinated, until populations reach herd immunity.

Source: Communiqué from the Ministry of Health regarding wearing masks in Mali on its Facebook page

Rooted in Trust collects, analyzes, and responds to rumors in 10 countries with the generous support of USAID’s Bureau for Humanitarian Assistance (BHA). Our goal is to provide journalists and humanitarian communicators with the tools they need, in the languages they prefer, to fight rumors and misinformation in the COVID-19 crisis. For more information on the project, visit www.internews.org.