Main topics of this publication:

- Inspection and surveillance in reporting events related to COVID-19
- Death and other alleged adverse effects of vaccines
- Long COVID-19 and vaccines

About Rooted in Trust 2.0:

Internews’s Rooted in Trust (Rooted in Trust), is responsible for identifying, collecting, analyzing and responding to rumors in 10 countries around the world, with support from USAID’s Bureau for Humanitarian Affairs (BHA). We focus on providing journalists and humanitarian communicators with the tools they need, in their preferred languages, to respond to rumors and misinformation in the context of the COVID-19 crisis.

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During the month of April and early May, Internews’ Rooted in Trust 2.0 team was able to identify and analyze various publications that politicize and instrumentalize the COVID-19 as an ideological tool to stimulate voting decisions - in the run-up to the May 29 elections - which represent a growing trend since 2021, which has been increasing considerably as the election eve approaches.

Likewise, the initial decision of the National Government not to withdraw the use of face masks in educational institutions (as announced on April 25) generated many rumors that respond to pandemic fatigue, the effects it has had on children and young people, as well as the Colombian electoral panorama.
COVID-19 Data

- 540 municipalities in Colombia already have 70% of their schemes completed, indicating that 48.1% of all municipalities in the country can now be free from the use of face masks in open spaces.

Likewise, 329 municipalities have already completed 40 percent of the 70 percent reinforcements, which indicates that they can now eliminate the use of face masks in enclosed spaces.

- Caquetá, Chocó, Putumayo and Vaupés - departments where Rooted in Trust 2.0 is present - have not yet vaccinated 70% of their respective populations.

Data provided by the Colombian Ministry of Health and the National Institute of Health, as of May 19.
Events impacting information ecosystems:

Putumayo

The Congressional debate to relief the Minister of Defense from office didn't progress further, even after several inconsistencies became known and evidence denounced by independent press organizations showed that innocent civilians were killed by the National Army during the questionable military operation that left 11 dead and five wounded on March 28.

Chocó

Armed clashes between members of the “Clan del Golfo” and ELN guerrillas in a rural area of the municipality of Litoral del San Juan have taken place, leaving at least 25 ethnic communities (six of them indigenous from the Medio and Alto Tamaná), comprising approximately 4,000 people (900 families), confined to their homes, frightened by threats from members of the ELN guerrilla group, which announced weeks ago that it would enter into an armed strike.

Trends

“Death and adverse effects of vaccines”

Rumor

“My grandmother died of covid and in the death certificate they put natural death because she had the 3 doses and it was not convenient for them to put death by covid with 3 doses”.
In Colombia, there are 3 institutions in charge of counting COVID-19 deaths: The National Health Institute (INS), the Ministry of Health and the National Administrative Department of Statistics (DANE). It is difficult to determine the causes of death of a patient, but there are FOUR general parameters designed by the Nacional Institute of Health (INS) to determine whether it was due to COVID-19 or not. These are:

- If the patient has a positive COVID-19 test.
- If the patient has a positive COVID-19 test, but is determined to have died from different causes, it is classified as “died WITH COVID-19” and not “died FROM COVID-19”.
- If the patient had contact with a positive case.
- If the patient dies of a respiratory infection and a team of experts determines that this condition was caused by COVID-19.

Despite these parameters, the INS has pointed out that it is not an infallible method and, therefore, a system for reporting and detecting classification errors has been designed and can be accessed by the public.

As indicated in past deliveries, the occurrence of adverse effects due to COVID-19 vaccines such as myocarditis is 0.0008%, versus the possible risks of not vaccinating, which are still much higher for health, so when deciding whether to vaccinate or not, based on scientific evidence and vaccine efficacy rates, it will always be better to do so.

The rumor implicitly claims that being vaccinated should be synonymous with being immune to the virus, which is false since anyone can become infected despite having received a partial or complete vaccination schedule. However, as pointed out by the Director of Epidemiology of the Ministry of Health and Social Protection, the risk of hospitalization and death due to COVID-19 increases at older ages, but the probabilities increase up to five times more when patients have not been vaccinated.

Data verification

What is the significance and possible implications of these rumors?

This rumor is relevant because it responds to public concern and mistrust of vaccines, the health care system, and its methods of reporting and verifying data regarding COVID-19 deaths.

Likewise, the rumor implicitly claims that being vaccinated should be synonymous with being immune to COVID-19, which is false and could generate a reduction in the self-care parameters of vaccinated persons who think so.

This rumor has a high risk because it could encourage those people with a higher risk of hospitalization or death -and specifically the population in age groups with 5 times higher risk- to desist from being vaccinated against COVID-19 due to doubts about its possible side effects. Likewise, it could generate a bias in those people who have already started their vaccination schedule and now believe that they are immune to the virus and therefore should not continue to comply with biosecurity measures.
Recommendations:

1. It is necessary to establish synergies with hospital networks and municipal Health Secretariats to disseminate unlikely side effects that have been identified as a product of vaccines and to ensure the guarantee of procedures in the timely identification and treatment of these symptoms and conditions. The following is a quick guide to the adverse effects found so far, their symptoms and what to do in case you feel them: https://espanol.cdc.gov/coronavirus/2019-ncov/vaccines/safety/adverse-events.html (updated on May 10).

2. Es importante presentar un balance de los beneficios y posibles riesgos de las vacunas, destacando que 1. estar vacunado no es sinónimo de ser inmune, pero sí es garante de mayor protección y menor riesgo frente al virus en caso de contagiarse. 2. Los efectos secundarios graves identificados representan un porcentaje marginal y muy reducido frente al total de vacunas. Aún así, debemos mantenerlos vigilantes y propender por que se garanticen las rutas de atención y tratamiento respectivas en caso de manifestarse, pero también debemos poner en perspectiva los beneficios de las vacunas en la prevención de hospitalización y muerte versus dichos efectos adversos.
Trend

“Vaccines and long-term effects”.

Rumor

“I got only 3 doses and I will not get vaccinated again, I have been trying to recover my muscle strength for 1 year, after using my electric treadmill 3 times a week, since the 1st dose I lost my motor capacity, I can’t even walk 100 mts. due to severe muscular atrophy x vaccines”.

Verificación de datos

- As revealed by European Medical Agency studies in 2021, Guillain Barre Syndrome (GBS) can occur as an extremely rare effect of COVID-19 vaccines. This syndrome can cause inflammation of peripheral nerves that can result in pain and/or numbness, initially of the extremities, muscle weakness and difficulty walking. However, a large majority of patients recover from the symptoms.

- In countries such as Spain, where this possible causality between Janssen and GBS has been studied, it has been determined that only 3 out of 1.5 million doses administered have caused complications associated with GBS (i.e. 0.0002% of the population).

- In this regard, medical authorities have indicated that upon the appearance of any of the following symptoms associated with GBS, medical professionals should ensure immediate medical attention and assessment, acting as quickly as possible to avoid further complications. These are:
  - Double vision or difficulty moving the eyes.
  - Difficulty speaking, chewing or swallowing.
  - Difficulties in movement coordination, walking or standing.
  - Weakness in the extremities or face.
  - Pain and tingling in extremities and difficulties with bowel or urinary bladder control.

- Likewise, from the almost seven billion vaccines that have been administered worldwide, scientists have been able to identify some unwanted side effects that, in any case, are quite uncommon and most of them can be treated with medication, as is the case of myocarditis. Scientists agree that beyond these adverse effects, there is no possibility of vaccines triggering unwanted symptoms in the long term.
Distrust in scientific evidence and spokespersons who support this position:

Such as soccer player Joshua Kimmich, from Bayern Munich, who said in an interview that he did not get vaccinated for fear of possible long-term side effects not yet identified by science. This position is also supported on Twitter and Facebook by users skeptical of vaccines, who have pointed out that other vaccination processes against diseases such as swine flu have triggered alleged long-term side effects.

Why has this rumor gone viral?

01. Distrust in scientific evidence and spokespersons who support this position:

What is the significance and possible implications of these rumors?

This type of rumors are relevant because they implicitly induce the fear and apprehension of the general public regarding vaccines, their possible secondary symptoms and even future long-term health complications derived from the injections. This not only has to do with distrust and dissatisfaction with the national government and the health system, but also with the lack of scientific evidence available to the general public, which would explain in a simple way the evidence currently available and thus allow citizens to make better informed decisions.

This type of buzz may influence the decision to get vaccinated for the first time or to receive boosters against COVID-19. It should be noted, however, that although all vaccines have completed the three planned phases of trials that usually take place before they are offered to the general public, they will continue to be carefully monitored until (at least) 2023, thus ensuring that there is sufficient time to identify and study fortuitous events that have not yet been contemplated.

However, although such rumors may discourage inoculation in older people or those already suffering from associated mobility conditions, when the potential risks versus benefits of vaccines (based on current scientific evidence) are weighed, the latter still outweigh the former, so vaccination is always recommended.
It is important to inform citizens about their rights in the event of suspicion of an irregularity -such as alteration of death records, medical negligence, inconsistencies in diagnosis or errors in the application and/or results of COVID-19 tests- and to bring them closer to the channels for filing complaints with the National Health Superintendency.

Likewise, it is necessary to provide the public with information on how the causes of death of a patient were determined before proceeding with a complaint and subsequently extend the channels to request the so-called "statistical amendment", through which the National Institute of Health confirms whether there was an error or not and evaluates whether it is necessary to make a notation to the doctor responsible, who could be relieved of his position if it is proven that it is a repeated occurrence.

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