The Sudan Rooted in Trust Project (RiT) aims to address COVID-19 rumors, perceptions, and misinformation by collecting and analyzing rumors found on Sudanese social media, and through listening groups with communities affected by conflict. This regular collection of community insights aims to address questions and common misperceptions about COVID-19 found across Sudan. It is meant to help volunteers and field staff provide trustworthy information, and resources to help respond to their communities’ concerns and information needs about COVID-19 and the vaccines.

This bulletin is based on an analysis of 514 rumors collected in Arabic and Dinka languages, between 27 October and 12 December 2022, from Facebook, Twitter, Instagram, WhatsApp, and through face-to-face listening groups with communities affected by conflict and displacement in Al-Gedaref, Central Darfur, East Darfur, Kassala, North Darfur, and South Kordofan States.
This is the thematic breakdown of 514 rumors collected in Arabic and Dinka between 27 October and 12 December 2022, from Facebook, Twitter, Instagram, and WhatsApp, and through listening groups with communities affected by conflict and displacement in Al-Gedaref, Central Darfur, East Darfur, Kassala, North Darfur, and South Kordofan States.

55% of rumors about COVID-19 and vaccines have been shared by **men** on social media and during listening groups.
This is an analysis of the emotions expressed in 514 rumors in Arabic and Dinka between 27 October and 12 December 2022. Internews found that 33% of the rumors expressed feelings of apathy and indifference. This was prevalent among rumors downplaying the pandemic saying that COVID-19 is over, or a hoax. Meanwhile, rumors that exuded fear where those citing the harmful effects of the vaccines.

**COVID-19 and Vaccine Rumors Based on Risk Level**

- **Low Risk**: 85.8%
- **Medium Risk**: 13.6%
- **High Risk**: 0.6%

Rumor risk breakdown based on the analysis of 514 rumors collected in Arabic and Dinka between 27 October and 12 December 2022.
This is a breakdown of 216 rumors collected during listening group sessions held in refugee and IDP camps in Arabic and Dinka between 27 October and 12 December 2022. Internews found that 60% of the rumor data was collected from Alhesahisa IDP Camp in Central Darfur.

Sudan COVID-19 Statistics

As of 23 December 2022, the official COVID-19 statistics rose to 63,686 confirmed cases and 4,994 COVID-19 deaths.

As of 12 December 2022, a total of 10,504,568 persons were vaccinated with at least one dose of the COVID-19 vaccine in all states of Sudan, while 8,302,878 people have been fully vaccinated against COVID-19, accounting for 20 percent of Sudan's population.

In December 2022, statistics of vaccination have been updated for the first time since May 2022, revealing a leap of around 5 million administered doses during that period, bringing the total to 13,711,970 vaccine doses.
Penicillin, nor any other antibiotic, can not kill the SARS-CoV-2 virus, the virus that causes COVID-19. Penicillin is used to treat infections caused by bacteria. It works by killing the bacteria or preventing their growth. There are several different kinds of penicillin, including liquid penicillin, but it does not treat viral infections like flu, cold, or COVID-19. Dr Mohamed Salah Eldeen Hamid, Director General of Quality Development and Accreditation Directorate at the Ministry of Health said:

“It’s impossible for penicillin to treat COVID-19, antibiotics cannot treat viral infections. Misuse and overuse of antibiotics can result in antimicrobial resistance - any medical condition that relies on antibiotics for treatment will become incurable. For example, surgical wounds, diabetic wounds, chest infections, and UTIs could become untreatable. Any surgery would be life-threatening in a situation where bacteria has become resistant to antibiotics.”

US-based Mayo Clinic explains that overuse of antibiotics could cause harmful effects. If a person develops antibiotic resistance, they are more prone to severe illness, longer recovery periods, and more frequent or longer hospital stays.

The National Institutes of Health (NIH) recommends against the use of antibacterial therapy for non-hospitalized COVID-19 patients unless the person also has a bacterial infection as well as COVID-19. The World Health Organization does not recommend antibiotics to be used for COVID-19 in the ‘Guideline Therapeutics and COVID-19: living guideline’, unless prescribed during treatment.
The COVID-19 vaccine does not cause gangrene, there is no relation between the condition and the virus. Dr Tasneem Tajelsir, a COVAX National Consultant for Adverse Events Following Immunization explains:

“Although there have been several cases of gangrene after a COVID-19 infection, there have been no reported cases of gangrene after a COVID-19 vaccination.”

US-based Mayo Clinic defines Gangrene as the “death of body tissue due to a lack of blood flow or a serious bacterial infection”. Gangrene can impact our arms, legs, muscles, and body organs. The earlier we treat the condition, the better the recovery. In some cases, if treatment is delayed, gangrene can lead to death. Some health conditions increase our risk of developing gangrene, like diabetes, smoking, and surgery.

It's worth noting that some people do not experience any side effects following COVID-19 vaccination, however, many people have reported minor to moderate side effects, like headache, fatigue, and pain in the upper arm where the vaccine was injected. These side effects usually go away within a few days. According to the Centers for Disease Control and Prevention, “severe reactions” following vaccination are extremely rare.

If you or your loved ones want to learn more about the vaccine, you can refer to the Ministry of Health's Facebook page or call the national pandemic hotline at 9090.
RUMOR #3

“Even if the virus comes to you, you will get better by yourself because of your body's immunity there is no need to take the vaccine”

Man - Age: 26-35 - Al-Gadarif – Al-Faw

Vaccines work by strengthening your immune system. Natural immunity is essential but is not sufficient to fight off many serious diseases, including COVID-19; vaccines are critical in teaching our immune systems how to fight different diseases. Immunity varies for individuals, same as the severity of infections.

Being infected by COVID-19 is very risky as it might result in long-term effects, organ damage, or hospitalization. Even if your infection is mild, you can still spread it to others who may face severe illness and death.

According to the World Health Organization (WHO), vaccines reduce the risk of getting a disease by working with your body’s natural defenses to build protection. When you get a vaccine, your immune system responds by producing a variety of cells that fight invading germs. Some of these cells release proteins called ‘antibodies’ into your bloodstream. These antibody-producing cells can ‘remember’ a particular germ—such as the Coronavirus—so they can detect its presence if it returns and produce antibodies to stop it. Vaccines train your immune system to create these antibodies, just as it does when it’s exposed to a disease.

It is also recommended to take the COVID-19 vaccine even if you had COVID-19, as new studies show that natural immunity to the virus wanes over time and does so faster than immunity provided by COVID-19 vaccination. A study published in August 2021, indicates that if you had COVID-19 before and are not vaccinated, your risk of getting re-infected is more than two times higher than for those who got vaccinated after having COVID-19.

If you or your loved ones would like to get vaccinated but still have some questions or concerns, please visit the closest vaccination center or call the pandemic hotline to speak to a healthcare worker at 9090.
There is no Coronavirus in the COVID-19 vaccines, this is a common misconception about the vaccines. Dr Tasneem Tajelsir, a COVAX National Consultant for Adverse Events Following Immunization, refutes this rumor:

"This is not correct. The virus is present only in an infected human or animal, but the virus cannot survive within the vaccine, therefore the COVID-19 vaccines can't infect us with the Coronavirus."

In Sudan, the Ministry of Health (MoH) vaccination teams are providing the following COVID-19 vaccines: Johnson & Johnson, AstraZeneca, Sinopharm, and Pfizer-BioNTech.

The vaccine ingredients differ by manufacturer and the AstraZeneca, Sinopharm and Pfizer vaccines do not contain any virus of any type. The Johnson & Johnson vaccine does contain a modified, weakened virus of a different type, which is not the same virus that causes COVID-19. This modified virus is unable to replicate or cause disease.

Vaccines help protect us from developing severe symptoms from COVID-19, and they have been proven to be effective in reducing hospitalization and death due to a COVID-19 infection. Vaccines trigger our immune response should we become infected with the virus, which sends a message to our body to fight the disease.

If you would like to ask questions about the vaccine, please contact the National Pandemic Hotline at 9090. If you would like to get vaccinated, please refer to the closest healthcare facility for information about the nearest vaccination points or refer to the Ministry of Health's Facebook page for updated information on vaccination centers.
RUMOR #5

“Corona is only in the winter season”

Man – Age: 36-45 – Facebook

This is a common misconception in several African countries, and among many people around the globe that warmer weather can protect from COVID-19. According to the World Health Organization (WHO), European countries experience spikes in the number of COVID-19 cases as temperatures drop. Since COVID-19 spreads through air, increased indoor socializing activities during the winter season, poor ventilation, and not maintaining sufficient physical distance with a significant reduction in the number of people wearing face masks may all contribute to the spike in cases during the winter season.

Wind speed and rainfall results were not consistent across studies. The study concluded that weather variables including temperature and humidity can contribute to increased transmission of COVID-19, particularly in winter conditions through increased host susceptibility and viability of the virus.

However, a recent US study on the effect of temperature on COVID-19 infections tackled earlier observations of COVID-19 transmission in settings that experience distinct seasonal changes. The study concluded that “while a distinct seasonal pattern of COVID-19 has not yet emerged, warm and humid weather should not be generally regarded as a time of reduced risk of COVID-19 infections.”

Accordingly, based on such available data and research, the WHO states that COVID-19 can still be transmitted in any climate, including very hot and very cold weather, as countries with hot weather, such as Sudan, continue to report cases of COVID-19.
With a significant reduction in weekly reported COVID-19 deaths since March 2020, Dr Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization (WHO) said on 14 September 2022, that the end of the pandemic “is now in sight”. The WHO Chief underscored:

“A marathon runner does not stop when the finish line comes into view. She runs harder, with all the energy she has left. So must we. We can see the finish line. We’re in a winning position. But now is the worst time to stop running”.

Dr Adhanom also warned that if the world does not take the opportunity now, the risk of new COVID-19 variants and deaths will remain. With the availability of COVID-19 vaccines, the world is at a hopeful phase in the pandemic, as immunization can help prevent infection growth and significantly reduce COVID-related deaths.

Meanwhile, Sudan’s Ministry of Health (MoH) urges at-risk groups, such as healthcare workers, older people, people with chronic disease and pregnant women to seek vaccinations. On 16 November 2022, the WHO reported that global COVID-19 cases increased for the first time in several months. Weekly cases have been either steady or decreasing since mid-July 2022. However, the second week of November witnessed a 2% increase in reported cases, raising the number to 2.3 million infections. As of 21 December, a 36% increase in recorded cases was reported globally compared to the previous 28 days.

To access the latest COVID-19 statistics in Sudan, please refer to the Sudan COVID-19 Dashboard.
“...China forgot something called Corona and you're still talking about it”
Unknown – Age: Unknown - Facebook

According to the World Health Organization (WHO), COVID-19 cases are still being reported. As of 14 December 2022, 9,962,694 confirmed cases of COVID-19 have been reported in China. A news report published by Reuters on 14 December 2022, confirms that there is a surge of COVID-19 cases in China.

One of the doctors working at a Chinese hospital said:

“Our hospital is overwhelmed with patients. There are 700,800 people with fever coming every day.”

The doctor also explained that the hospital was running out of medical supplies. According to another article published by Foreign Policy, COVID-19 cases are spreading rapidly in Beijing and other Chinese cities.

In addition, people have been posting their positive test results online while some workplaces have declared that 90% of their staff are sick with COVID-19.

Undermining a global pandemic can have negative consequences on the world and our communities, especially with understaffed hospitals, funding shortages, and scarcity of medical equipment.

Therefore, we are also responsible for fighting the pandemic by protecting ourselves by following the preventative measures and seeking COVID-19 vaccination, while continuing to protect our communities by not spreading false and inaccurate news and misleading information as it can put us at a greater risk.
Anyone can get infected with COVID-19, the virus does not discriminate based on religion, gender, ethnicity, or race. There is no definitive evidence to suggest that the COVID-19 virus is manufactured or man-made. According to scientists, COVID-19 is of natural origin. It is worth mentioning that scientists suggest that the virus has lived in animals, such as bats long enough for it to be incapable of making them sick, in 2019 it mutated in a way that allowed it to infect humans.

The first cases of COVID-19 were found in a seafood market in Wuhan, China, which led some scientists to suggest that the source of infection was likely from animals. COVID-19 is a global pandemic. Cases have been reported all over the world, including Muslim-majority countries such as Saudi Arabia and other parts of the world, such as the United States of America and Japan.

As of 23 December 2022, there have been 651,918,402 confirmed COVID-19 cases all over the world.

As COVID-19 does not discriminate and it can infect anyone regardless of age, sex, nationality, or religion, we can protect ourselves by following the preventative measures set by the World Health Organization and the Sudanese Ministry of Health, such as:

- Covering our mouths and nose while in public and crowded spaces by using a mask or face covering
- Socializing outdoors or opening the windows to ensure proper ventilation
- Seeking a COVID-19 vaccination at the nearest healthcare facility
What are Rumors?

Rumors are currently circulating stories or reports of uncertain truth collected from first-hand sources within the community which could take the shape of a question, criticism, or general comments on a situation or topic. We should also note that rumors can be tricky to tackle because they might carry some element of truth.

RESOURCES

TO FIND OUT MORE ABOUT COVID-19 AND THE VACCINES

MINISTRY OF HEALTH FACEBOOK PAGE

SUDAN COVID-19 MOBILE VACCINATIONS

ADVICE FOR THE PUBLIC ABOUT COVID-19

COVID-19 Hotline - Serving all areas of Sudan: 9090

How Are Rumors Collected?

Questions, comments, and misconceptions about COVID-19 were collected by Internews’ analysts, who compiled and assessed feedback gathered from Sudanese social media and through face-to-face listening groups with displaced people and communities impacted by conflict. The rumors, perceptions, and misinformation identified have been assessed to be the most prevalent or damaging to the health response. The selection was based on the level of engagement and its potential impact on the community.

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

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