INTRODUCTION TO ROOTED IN TRUST

Rooted in Trust (RiT) is a project run by Internews to support humanitarian and public health agencies, our work also includes cooperation with community actors, CSOs and community health workers to strengthen information ecosystems. The project ensures that all Information Ecosystem actors better respond to communities’ needs and manage the spread of rumors and misinformation health issues. Additionally, the project tracks misinformation on diseases like malaria, cholera, and dengue fever in the affected areas of north and south Yemen with a focus on IDPs and marginalized people.

In this bulletin, Internews profiles commonly occurring rumors across Yemeni social media and through offline and face-to-face collection in the month of June 2023.

During this period 422 rumors were collected as follows: Face to face (54), Social Media (368). The rumor collection was done online on Facebook and Twitter accounts and offline via face-to-face and private in-person group activities, as well as other community engagement activities. Rumors were subsequently selected for this bulletin based on the recurring themes of “Children / Vaccination Programs”

HEALTH SITUATION IN YEMEN

As the health system is deteriorating in Yemen, and access to health care became more difficult, it is reported that more than 10 million children and close to 5 million women cannot properly access health services. Since the ceasefire, the level of conflict has diminished. However, the aftermath has brought about a deteriorating health and humanitarian emergency. The scarcity of medical resources and personnel persists, making primary healthcare unaffordable for many amidst an economy in ruins. Disturbingly high rates of malnutrition were recorded, and the absence of regular vaccination services has resulted in outbreaks of preventable illnesses such as measles, tetanus, and diphtheria.

Yemen recorded more than 22,000 measles cases in 2022, including 161 deaths. In 2023, to date, cases have already spiked to 9,418, with 77 children dead. Diphtheria and pertussis – whooping cough – cases are also on the rise, as are deaths from each disease. In the first quarter 2023, more than 13,000 new cases of measles, 8,777 cases of dengue fever, and 2,080 suspected cholera cases were reported. But the actual numbers are likely much higher, due to gaps in surveillance system. As of 22 June 2023, a total of 25,935 suspected cases of measles have been reported, with 1,406 laboratory-confirmed cases and 259 deaths across all governorates of Yemen this year.

While multiple measles and polio vaccination campaigns led by the authorities and supported by UNICEF and WHO have been implemented in the governorates under the control of the Internationally Recognized Government over the past two years, the ongoing deadlock in the northern governorates over supplementary immunization activities puts children there at particular risk. The restriction of vaccination campaigns to only fixed-site health facilities, combined with prohibition of integrated community outreach services in all northern governorates, has led to continued multiple outbreaks of polio and other vaccine-preventable diseases, specifically measles and diphtheria. However, following a series of intensive engagements with the authorities in the De facto authorities areas, a measles outbreak response vaccination campaign is planned to be conducted in the 3rd quarter of 2023, covering all governorates and targeting 5.7 million children between 6 and 59 months of age.
Colostrum, often referred to as the “golden liquid,” is produced by the body immediately after birth for a period of 2 - 5 days, after which it transitions into a mixture of colostrum and mature milk known as transitional milk.

The name “golden liquid” stems from its yellowish color and its critical role in providing essential nutrients and health components that set the foundation for a healthy and secure life for the baby. Dr. Doaa, a nutritionist at the SOUL Organization in Yemen, emphasizes the significance of colostrum as the first line of defense for the infant’s immunity. It is rich in vitamins, minerals, and beneficial bacteria that the child needs after birth.

The components of colostrum include high levels of protein, fats, magnesium, carbohydrates, Vitamin A, Vitamin B, and Vitamin C. Some of the most prominent components in golden colostrum are Lactoferrin, a protein that strengthens the body’s immunity and protects against diseases, as well as white blood cells that boost the immune system with antibodies. Additionally, colostrum contains beta-carotene, which contributes to its yellowish color and is rich in essential mineral elements like sodium, potassium, and chloride.

Based on the collaboration with the nutrition experts, Dr. Doaa and Dr. Sakina working at the nutrition department of SOUL for Development, and with reference to the SOUL Center for Communication and Awareness’s nutrition guide, the following conclusions have been drawn:

Breast milk is a remarkable source of nutrition for infants, comprising essential components vital for their growth and development. It contains 87% water, 7% carbohydrates, 1% protein, 4% fat, and 50% vitamins and minerals. Among the breast milk types, colostrum stands out as the first food a newborn consumes in their initial days of life. Often referred to as “golden milk,” colostrum holds numerous benefits for the baby.

The advantages of colostrum are manifold: it is easily digestible, bolsters the infant’s immune system, promotes healthy growth, facilitates the first bowel movement, induces better sleep patterns, shields the baby from stomach-related illnesses, supports optimal brain development and reduces the risk of jaundice in newborns.

Emphasizing the significance of colostrum for newborns, Dr. Doaa highlights the importance of exclusive breastfeeding. This process involves feeding the baby solely with the milk produced by the mother’s breast, without any additional water or foods. By promoting exclusive breastfeeding, Dr. Doaa underscores the optimal nourishment and protection that colostrum and breast milk offer for the baby’s early development and well-being.
Rumor #1
Theme: Other

“Colostrum is dirt and pus”

WHY IS THIS RUMOR IMPORTANT?

Associating colostrum with pus and dirt can discourage mothers from breastfeeding their newborns with colostrum, depriving infants of its vital benefits. Not mentioning that spreading such a rumour could eventually develop a stigma around colostrum-fed children. Increased rates of delayed breastfeeding - skipping the first few days - could lead to a negative impact on the general health of newborns. Mothers are replacing the body produced colostrum with other alternatives such as formula milk and cow milk for the entire period of colostrum production can deprive newborns from vital benefits and leads to weakened immune systems, nutritional deficiencies, increased risk of illness, and poor gut health.

WHAT IS BEHIND THE RUMOR?

According to Dr. Doaa, one probable reason behind the misinformation that colostrum is dirty is the lack of awareness and the prevailing inherited belief among people. These beliefs stem from two main factors: the yellow colour of colostrum and its heaviness. Because colostrum does not resemble regular milk and is thick in consistency, people may assume it is harmful. The misconception arises from the perception that the yellow colour resembles pus or that it contains harmful substances.

RECOMMENDATIONS
For The Humanitarian Organizations

- Conducting awareness-raising work for pregnant mothers and soon-to-be – married women, through seminars, brochures, audio clips, and community based events. Culturally relevant content in Arabic should also be widely distributed and available online, and in offline settings such as clinics and health centres.

- Training for Healthcare Providers including community health volunteers: train healthcare professionals and frontline workers on the significance of colostrum and best breastfeeding practices. This will enable them to provide accurate information and support to mothers during the critical early days after birth.

- Incorporate Colostrum into Health and Nutrition Programs: Integrate colostrum education and support into existing maternal and child health programs.
The claim that diphtheria affects children who have been vaccinated with oral vaccines is entirely false. Diphtheria is a highly contagious bacterial infection caused by Corynebacterium diphtheriae. Vaccination is the most effective way to prevent diphtheria, and the vaccines used are both safe and successful in protecting against the disease.

As per the Yemen’s Expanded Programme on Immunization (EPI), Vaccination is possible against Diphtheria either by using a separate vaccine by using a combination vaccine (DTP) for all three (Pertussis, tetanus, and diphtheria). The current trend is to administer the combined vaccination, using a unified vaccine that contains antigens (which have the property of stimulating antibody production) for all three diseases. This triple vaccine is usually initiated at the age of two months and given in three doses with a two-month interval between each dose. After one year from the last dose, a booster dose is given. It is recommended to administer booster doses every four years.

Two shots help protect children against diphtheria: DTaP and Tdap. Both also help protect against tetanus and whooping cough. These shots do not offer lifetime protection. People need booster shots to keep up protection. Diphtheria vaccines are safe and effective at preventing diphtheria. Vaccines, like any medicine, can have side effects. These are usually mild and go away on their own.

Ensuring global immunization against diphtheria is crucial for the well-being of children worldwide. Establishing lifelong immunity involves a three-dose primary series given during infancy, followed by three booster doses of diphtheria toxoid-containing vaccine throughout childhood and adolescence. Any individuals, regardless of age, who have not received or are incompletely vaccinated against diphtheria should complete their vaccination to remain protected.

Recent diphtheria outbreaks in several countries underscore the consequences of insufficient vaccination coverage, emphasizing the importance of maintaining high levels of coverage in childhood immunization programs. The risk of diphtheria remains for unimmunized individuals, regardless of their environment. While approximately 86% of children worldwide receive the recommended three doses of diphtheria-containing vaccine during infancy, 14% still lack complete protection, making comprehensive vaccination efforts imperative.
Rumor #2
Theme: Vaccination programs

“Diphtheria affects children who have been vaccinated with oral vaccines”

Disturbingly high malnutrition rates and the absence of regular vaccination services have caused diphtheria outbreaks in Yemen. From October 2017 to August 2018, there were 2203 probable diphtheria cases (including 116 deaths). Prior to the official outbreak declaration, few diphtheria case alerts were issued by the electronic surveillance system. Misinformation against diphtheria vaccines can lead to decreased vaccination rates, resulting in easier diphtheria transmission and increased outbreaks, especially in children. This strains healthcare systems, reduces care quality, and poses higher risks for vulnerable populations like infants and pregnant women. Additionally, eroding trust in vaccines perpetuates hesitancy, undermining public health efforts.

This is also important as clearly there is a confusion of the different vaccines. The oral vaccine mentioned in the rumour is not related to diphtheria but rather refers to the oral polio vaccine, which serves a different purpose altogether. The oral polio vaccine is administered through drops taken by mouth. On the other hand, DTP vaccines, which protect against diphtheria, tetanus, and pertussis, are administered through injections.

Some factors may lead to the spread of this rumor, like lack of awareness among the society and confusion between different vaccines. An escalating campaign of anti-vaccine propaganda led by the de facto authorities in the north has taken root on YouTube, television, radio, and social media, calling into question established scientific fact and sowing fear and doubt in parents’ minds.

**RECOMMENDATIONS**

For The Humanitarian Organizations

- Enhance the capacity of vaccination health workers by providing technical training on vaccines. Equipping health workers from the Expanded Programme on Immunization with comprehensive knowledge about vaccines will facilitate effective communication within the community.

- Collaborate with the Expanded Programme on Immunization to initiate community-targeted awareness campaigns. These campaigns must educate people about the available vaccines, their administration, benefits, impacts, and potential side effects. Humanitarian partners should allocate budgets for a range of activities to conduct awareness sessions, involving not only health workers, community volunteers, and Information, Education, and Communication (IEC) materials but also utilize diverse media outlets like social media, radio, and TV, in coordination with the Centre of Health Education under the Ministry of Health, to maximize outreach.

- Advocate for vaccination programs and seek public endorsements from respected national figures. Engaging in constructive dialogues with government officials and encouraging them to publicly support vaccination can significantly improve vaccination rates. This effort is essential to counter the damage caused by officials who contributed to anti-vaccination propaganda campaigns.
SOURCES

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