Community feedback considered in this report was received through reports from Community Engagement and Accountability (CEA) focal points, as well as through primary data collection, in 21 African countries.

Red Cross and Red Crescent National Society CEA focal points were asked to share the main rumours, observation, beliefs, questions or suggestions they are hearing in their countries and to grade them according to their frequency. Focal points from the following 15 countries provided information this way: Benin, Botswana, Burkina Faso, Eswatini, Gabon, Gambia, Ghana, Kenya, Lesotho, Malawi, Namibia, Nigeria, Mozambique, Zambia, Zimbabwe.

Community feedback was also collected during social mobilization activities in the Democratic Republic of Congo (4202 feedback comments), Cameroon (44), Côte d'Ivoire (40), and Togo (50). Activities include focus group discussions, household visits, as well as social mobilization in public spaces. Information was not gathered through structured surveys, but volunteers documented comments relating to COVID-19 they heard during their interactions with community members.

Community feedback shared through social media in Burkina Faso (6), as well as by ICRC in Niger (16).

Burundi Red Cross shared community feedback received through their National Society hotline (41).

Information included in this report was collected between 8 and 14 April.

These highlights are not representative for the countries mentioned in the update but indicate broad trends in community perceptions of COVID-19.

### OVERVIEW

#### MOST COMMON FEEDBACK TOPICS ACROSS COUNTRIES

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<th>Topic</th>
<th>No. of Countries</th>
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This report shows there is still a lot of confusion in communities about COVID-19, particularly about who is or is not affected by the disease. Common beliefs are that it is only white or rich people that are affected, only old people, or only those who have traveled to foreign countries. Many countries report rumours around how to best prevent or treat COVID-19, with people relying on drinking hot drinks, alcohol or traditional herbs. There are also many rumours and misperceptions on how COVID-19 is spreading, with a lot of people believing that the disease will not spread in hot climate or can be killed by hot water or alcohol.

Many comments indicate mistrust in people or organizations in relation to the outbreak. There are comments that the outbreak is used for political purposes and/or making money, as well as that the disease is intentionally spread in African countries. There is also an increasing number of negative rumours about the role of Red Cross volunteer in vaccination.

If these rumours are not addressed, they could affect the safe access of Red Cross and Red Crescent volunteers. Based on the feedback in the report, National Societies and partners are recommended to scale up risk communication to explain who can be affected by COVID-19 and correct methods of prevention and treatment. It is also important to explain the virus is a natural phenomenon and what the Red Cross Red Crescent is doing to bring the outbreak under control, including explaining why these activities are expected to help.

Beliefs about who can be affected

Heard in: Benin, Botswana, Côte d'Ivoire, DRC, Eswatini, Gabon, Gambia, Kenya, Malawi, Namibia, Niger, Nigeria, Togo, Zambia


“COVID-19 is for the rich.” – National Society report, Zambia, 13 April 2020

“The disease is only for foreign travellers.” – National Society report, Kenya, 9 April 2020

“It is a traveller’s disease (this is why we insist on border closures and barriers with reference to preventive barrier measures). Those who do not travel risk nothing.” – Social media, Niger, 13 April 2020

“Covid19 is a dangerous disease not for blacks but for whites.” – Household visit, DRC, 8 April 2020

“Corona is a disease of Chinese.” – Household visit, DRC, 8 April 2020

“This disease is for whites, we blacks can’t be killed, it’s to scare us.” – Focus groups discussion with volunteers, Côte d’Ivoire, 8 April 2020

“The virus cannot attack little children.” – National Society report, Benin, 14 April 2020

“The disease only affects the sick and the old.” – Focus groups discussion with volunteers, Togo, 12 April 2020
Beliefs about protective behaviors

Heard in: Benin, Burkina Faso, Burundi, Cameroon, Côte d’Ivoire, DRC, Ghana, Malawi, Niger, Togo, Zambia, Zimbabwe

“Washing with warm salt water helps prevent the new Coronavirus.” – Social media, Burkina Faso, 12 April 2020

“Alcoholic drinks and herbs derived from chloroquine eliminates the virus.” – National Society report, Benin, 6 April 2020

“To reduce the contamination of CORONA it is necessary to often drink lemon or TANGAWISI [ginger drink].” – Household visit, DRC, 8 April 2020

Beliefs about how the disease spreads

Heard in: Botswana, Burkina Faso, Burundi, Côte d’Ivoire, DRC, Ghana, Lesotho, Niger, Nigeria, Namibia, Togo

“Sexual intercourse can also transmit corona” – National Society report, Namibia, 13 April 2020

“Coronavirus is in the air” – Focus groups discussion with volunteers, Togo, 12 April 2020

“Covid-19 cannot survive in Nigeria because the weather is hot” – National Society report, Nigeria, 14 April 2020

“Botswana being partially a desert with high annual temperatures, corona virus cannot survive” – National Society report, Botswana, 13 April 2020

“Covid19 can’t withstand the heat of Africa” – Household visit, DRC, 8 April 2020

“Covid19 is transmitted by 2 vectors: 1. Covid19 (male) and 2. Corona (the female) which is to be feared because like anopheles malaria it remains the most harmful. Corona (the female) is not heat resistant.” – Social media, Niger, 13 April 2020

Beliefs about ways to treat COVID-19

Heard in: Burkina Faso, Burundi, Cameroon, Côte d’Ivoire, DRC, Lesotho, Niger, Togo

“The virus is not heat resistant, so drinking hot herbal teas is a good cure for Covid-19.” – Social media, Burkina Faso, 11 April 2020

“Burkina Faso traditional healers found the cure for COVID-19 and presented it to Mogho Naba.” – Social media, Burkina Faso, 11 April 2020

“There is a rumour that putting hair in Bible can remove COVID-19.” – National Society hotline, Burundi, 9 April 2020

“Pray sincerely with faith, then open the bible and you’ll find a hair. Put the hair in the water and drink the water, you and all your family will be healed.” – Focus groups discussion with volunteers, Côte d’Ivoire, 8 April 2020
Beliefs about ways to treat COVID-19

“To prevent ourselves from CORONA virus we are already informed by a little child of ten years old to open and check in the bible until you find a bit of hair and take it to put it in a cup and once you drink it you will find life again.” – Household visit, DRC, 8 April 2020

“Pineapple in hot water + lemon + ginger is the remedy for coronavirus.” – Focus groups discussion with volunteers, Côte d’Ivoire, 9 April 2020

“Chloroquine cures corona virus.” – Household visit, DRC, 8 April 2020

“Covid19, the other name for malaria. A new viral and contagious form. An antimalarial treatment would alleviate the symptoms and guarantee cure.” – Social media, Niger, 13 April 2020

“Smoking cigarettes cures Covid-19.” – Focus groups discussion with volunteers, Togo, 12 April 2020

“Consumption of tamarind, alcohol, mustard, aloe, hot water, lemon juice, chloroquine, neem, bitter herbs, Kaya, ginger cure COVID-19.” – Focus groups discussion with volunteers, Togo, 12 April 2020

“Those who are sick with coronavirus must stay in the sun from time to time.” – Focus groups discussion with volunteers, Togo, 12 April 2020

Statements indicating mistrust of people or institutions responding to the disease outbreak

Heard in: Burkina Faso, Cameroon, Côte d’Ivoire, DRC, Gambia, Niger, Nigeria

“This is all politics. The authorities themselves do not respect these measures” – Focus groups discussion with volunteers, Cameroon, 12 April 2020

“The medical supplies donated by China are believed to have some Corona Virus in it and they intended to kill Africans therefore people must not to use them.” – National Society report, Gambia, 8 April 2020

“Covid-19 is not real, the government made it up to loot funds.” – National Society report, Nigeria, 12 April 2020

“Politicians manipulate data to present more positive cases for support from agencies such as the WHO.” – Social media, Niger, 13 April 2020

“Some people say that the state puts forward figures to get money from donors. They don’t show us sick people, but numbers.” – Focus groups discussion with volunteers, Côte d’Ivoire, 8 April 2020

“They think that the teams on the ground have money and means but do not want to share. They have heard that the Government has received billions of FCFA.” – Focus groups discussion with volunteers, Cameroon, 8 April 2020

“Corona virus is for politicians and businessmen.” – Household visit, DRC, 10 April 2020

“There is no case of coronavirus in Beni, the politicians are creating the cases to justify the money financed by the World Bank.” – Face to face to Red Cross volunteer, DRC, 8 April 2020
Observations or beliefs about preparedness or response activities

Heard in: Benin, Burundi, Côte d’Ivoire, DRC, Gabon, Togo

“The authorities want to give the experimental vaccines there to the Red Cross to come and vaccinate us, if vaccine there is good why they do not experiment on them in Europe. You Red Cross people are not trusted to come here.” – Focus groups discussion with volunteers, Côte d’Ivoire, 8 April 2020

“Red Cross volunteers are given the vaccine against the virus and one must avoid them.” – National Society report, Benin, 14 April 2020

“From now on, the COVID-19 vaccine is combined with all the old vaccines: all vaccines must be refused.” – Focus groups discussion with volunteers, Togo, 12 April 2020

“The corona vaccine is already out but it’s a satanist vaccine and we Christians refrain from taking it.” – Household visit, DRC, 10 April 2020

“They say they are going to vaccinate people against COVID-19, by will or not.” – Household visit, DRC, 10 April 2020

“There are rumours that Government will lock markets.” – National Society hotline, Burundi, 9 April 2020

“Elderly and disabled people are not given the right to information related to Covid 19.” – Focus groups discussion with volunteers, Togo, 12 April 2020

Observations or beliefs about governments not responding or not responding well

Heard in: Burundi, Côte d’Ivoire, DRC, Zimbabwe

“Government is not testing people coming from Tanzania.” – National Society hotline, Burundi, 9 April 2020

“The government donations are given to people with relations.” – Focus group discussion, Côte d’Ivoire, 8 April 2020

“There are rumours that the government is covering up cases.” – National society report, Zimbabwe, 14 April 2020

“The corona’s going to wipe us out because the government can’t protect us.” – Household visit, DRC, 8 April 2020
Questions about protective behavior
Heard in: Cameroon, Côte d’Ivoire, Burundi, DRC

“Can we be infected by handwashing stations?” – National Society hotline, Burundi, 9 April 2020

“What are the recommended face masks because you can see anyone who makes face masks out of other fabrics, even traditional African fabric, to make them?” – Focus group discussion with volunteers, Côte d’Ivoire, 9 April 2020

“Does hot water protect against COVID-19?” – Focus group discussion with volunteers, Cameroun, 9 April 2020

“Is it dangerous to smoke when you are infected of COVID-19?” – National Society hotline, Burundi, 9 April 2020

“Why do you say that washing your hands is a preventive measure against corona virus when it is transmitted through the respiratory tract?” – Household visit, DRC, 8 April 2020

“If we wash our hands with soap-free water can it fight corona?” – Household visit, DRC, 10 April 2020

Questions about how the disease spreads
Heard in: Burundi, Côte d’Ivoire, DRC

“Can we be infected by sharing the same bottle of beer?” – National Society hotline, Burundi, 9 April 2020

“Can we be infected by banknotes?” – National Society hotline, Burundi, 9 April 2020

“Can a child be infected during breastfeeding?” – National Society hotline, Burundi, 9 April 2020

“Can a breastfeeding woman pass on COVID-19 to her baby?” – Household visit, DRC, 8 April 2020

“How long does the virus live in free air?” – Focus group discussion with volunteers, Côte d’Ivoire, 9 April 2020

“Is it true that COVID-19 is airborne?” – Household visit, DRC, 8 April 2020

“Can intercourse also transmit covid-19?” – Household visit, DRC, 8 April 2020

Questions about health care services
Heard in: Burundi, Cameroun, DRC

“Can we consult a doctor only for headache and cold or shall we wait to have breath shortness and cough?” – National Society hotline, Burundi, 9 April 2020

“Does the Red Cross test for COVID-19?” – Focus group discussion with volunteers, Cameroun, 9 April 2020

“Where is the coronavirus test done?” – Household visit, DRC, 8 April 2020
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“Is treatment free of charge for people with corona?” – Household visit, DRC, 10 April 2020
“Is there a Covid-19 treatment centre in Kisangani?” – Household visit, DRC, 10 April 2020
“Where can we refer people with corona?” – Household visit, DRC, 10 April 2020

Questions about the disease
Heard in: Burundi, Cameroon, DRC

“What are the signs of Coronavirus?”– Household visit, DRC, 8 April 2020
“Does having a fever mean you have corona?”– Household visit, DRC, 10 April 2020
“Does an infected person die of COVID-19 directly after infection?”– National Society hotline, Burundi, 9 April 2020
“How is COVID-19 different from the flu?”– Focus group discussion with volunteers, Cameroun, 7 April 2020
“What is the difference between normal flu and Covid-19?”– Household visit, DRC, 8 April 2020
“What is the incubation period for coronavirus?”– Household visit, DRC, 8 April 2020

SUGGESTIONS

Suggestions about preparedness or response activities
Heard in: Cameroon, Côte d’Ivoire, DRC

“Sensitize communities on this pandemic.” – Household visit, DRC, 8 April 2020
“Use megaphones to better raise awareness.” – Focus group discussion with volunteers, Cameroon, 9 April 2020
“Provide hand sanitizer.” – Focus group discussion with volunteers, Cameroon, 9 April 2020
“Provide things for washing your hands.” – Focus group discussion with volunteers, Cameroon, 9 April 2020
“The police should chase away the children from the market.” – Focus group discussion with volunteers, Cameroon, 9 April 2020
“If you want us to protect ourselves, give us the face masks, hand gel.” – Focus group discussion with volunteers, Côte d’Ivoire, 8 April 2020
“We don’t want a covid19 vaccination campaign in our community.” – Household visit, DRC, 8 April 2020
“That we close all barriers so we don’t get the corona virus.” – Household visit, DRC, 8 April 2020
“We need the corona virus protective materials.” – Household visit, DRC, 8 April 2020
Call for killing people infected with COVID-19

Heard in: Togo

“Coronavirus patients should be exterminated.” – Focus group discussion with volunteers, Togo, 12 April 2020

Twitter Poll

What is your biggest concern about the #Coronavirus (#COVID19)?

<table>
<thead>
<tr>
<th>Concern</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family catching the virus</td>
<td>36.8%</td>
</tr>
<tr>
<td>Catching the virus</td>
<td>30.9%</td>
</tr>
<tr>
<td>Money and the economy</td>
<td>25.0%</td>
</tr>
<tr>
<td>Children's education</td>
<td>7.4%</td>
</tr>
</tbody>
</table>

The poll was posted on the IFRC Africa twitter account and open from 12 to 14 April. 68 twitter users answered the question on their biggest concern about Covid-19. The most frequent concern was people’s family catching the virus.

Next Steps

How should we respond to community feedback? Update your messages and activities to;

- share this factsheet with staff and volunteers
- address rumours and misinformation, you hear in communities by providing the correct information,
- answer questions communities have about COVID-19, and
- use community suggestions to improve the response where possible.

To support this process, the IFRC CEA team will;

- support more National Societies to collect, use and act on community feedback,
- produce weekly fact sheets addressing the most commonly asked questions, rumours and fears, collected that week from communities across Africa,
- produce weekly videos with a health expert answering most relevant questions from community members and providing the needed facts, the videos will be shared through IFRC Africa’s Twitter platform.

For more information on IFRC risk communication and community engagement efforts on COVID-19 in Africa, please contact Sharon Reader at Sharon.Reader@ifrc.org.