For this week’s rumor bulletin, mistrust in hospitals, and perceived “immunity” among homeless people are presented. This regular collection of community insights aims to provide humanitarian and public health agencies ideas to integrate and align their risk communication activities with community perspectives and the information needs of the community.

Initial reported cases of COVID-19 in Lanao del Sur and Marawi City came mostly from the repatriation of Locally Stranded Individuals (LSIs) and Returning Overseas Filipinos (ROFs), however, clusters and hotspots have emerged due to local transmission in the community. There has also been a significant surge of local transmission in the provinces of Maguindanao and Tawi-Tawi in recent weeks, recording an all-time high of new cases in September.

This has prompted the local governments to revert to stricter community quarantine measures, including closure of government offices and the suspension of entry of LSIs in the region. Ever since the pandemic broke out, a total of 13,000 LSIs have returned to the province, averaging at 275 individuals per day.

COVID-19 SITUATION IN BARMM

How we do it: The feedbacks presented here were collected by the Coalition of Moro Youth Movement (CMYM), a consortium of Moro youth groups advocating for peace and inclusive development in BARMM. These were taken from various platforms (Facebook posts, comments, stories, and Instagram) from September 4 to September 15. Feedback selection was based on a risk assessment matrix that accounts for the frequency of the scenario or social media engagements and its potential impact on the community.

WHAT ARE PEOPLE SAYING

• Poor living conditions and a lack of regular access to basic hygiene supplies, health care services and verified information increases the risks for people with unstable housing contracting COVID-19 (Tsai & Wilson (2020). Further, pre-existing health conditions especially among the older age group, and inability to practice preventive measures such as hand washing, face masks, and social distancing further exacerbates their condition.

• Homeless population might also be more transient and mobile, making it difficult to trace and prevent transmission of COVID-19. Perpetuating this myth that this vulnerable group is immune, may encourage individuals to avoid testing and treatment facilities and to ignore public health messaging. In addition, this misinformation contributes to harmful stigma towards this vulnerable group.

FACT: Homeless people are not immune to COVID-19. There are no accurate up to date statistics of how many homeless people are in Mindanao, making it difficult to understand the weight of the COVID-19 situation among this group. As a result, underreporting of cases and underestimation of the scenario is likely to occur.

Facebook post from a user in Lanao del Sur, with 102 reactions, 63 comments and 29 shares.

Rooted in Trust (RIT) is a USAID-funded project run by Internews to support humanitarian and public health agencies combat and manage the spread of rumors and misinformation about COVID-19. In the Philippines, the focus is on the island of Mindanao, specifically in the Bangsamoro Autonomous Region of Muslim Mindanao (BARMM) which is facing several coexisting humanitarian crises that add to the impact of the COVID-19 pandemic.
WHAT ARE PEOPLE SAYING

“Several people whose deaths were not COVID-19 related were tagged as COVID-19 deaths. Our family doctor warned us not to visit or seek care in hospitals but the reason behind it was not shared. Our friend from the army also told us that his friend, who is a military doctor had a similar advice on avoiding hospitals.”

Allegations that hospitals are claiming higher numbers of COVID-19 deaths and recoveries in order to take advantage of the government benefits has led to a general mistrust of the healthcare system. According to feedback from the community, people are reluctant to go to hospitals as they fear they may be reported as having COVID-19 even if they are don’t.

MISTRUST OF HOW HOSPITALS REPORT THE ACTUAL NUMBER OF COVID-19 CASES

WHY DOES IT MATTER?

FACTS

Cebu Governor Gwendolyn Garcia raised concerns about PhilHealth paying “false COVID-19” patients on August 1, 2020. The Garcia family also questioned on a September 17 press conference, the practices of Cebu hospitals where two of their brothers died due to COVID-19. PhilHealth and private hospitals indicated in the corruption case have denied the allegations while Cebu hospitals are ready for dialogues with the Garcia family. These allegations escalated in BARMM, particularly in Lanao del Sur as presented in one of the feedbacks shared by our CMYM partners in the community.

Following these allegations, PhilHealth suspends release of cash advances to hospitals intended for COVID-19, in efforts to make the interim reimbursement mechanisms more responsive to the needs of healthcare facilities. As early as April 2020, PhilHealth has released series of circulars detailing the benefit packages for Filipinos availing of COVID-19 services from testing, community isolation, and up to hospital confinement.

In the circular, benefit package for testing will cover screening/clinical assessment up to the analysis of results that would cost Php 2,000-8,000. The COVID-19 Community Isolation Benefit Package includes all identified services needed to effectively manage cases needing isolation services and up to a payout ranging from Php 43,000 – 700,000 depending on the severity of the disease.

As of 27 September, a total of 635 cases were reported in Lanao del Sur, with 211 active cases, 400 recoveries, and 24 deaths. Figures still prove continuous transmission in communities, thus still posing high risk of outbreaks in the province.

HOW CAN HUMANITARIAN ACTORS HELP?

• The WHO has raised alarms on the increasing attacks on health care and health systems as a result of COVID-19 misinformation, &emphasized its potential impact to the overall COVID-19 response. In Lanao del Sur, rumors have resulted to threats and discrimination against healthcare workers in Amal Pakpak Medical Center.
• Mistrust in the health system in a rapidly changing context may:
  o Deter or prevent individuals from seeking COVID-19 related medical care, which could lead to an increase in community transmission
  o Encourage the community to dismiss evidence-based COVID-19 prevention guidelines, posing a long-lasting impact on the well-being of populations.
  o Disrupt the flow of information between communities and public health agencies.
  o Have long-term impacts on ability of healthcare system to respond to future health crises.

Further, medical mistrust has been recognized as a social determinant of health and health care disparities among racial and marginalized groups.

We welcome your feedback and suggestions to help the government and humanitarian organizations address and manage misinformation. Please Contact Ms. Leanne Lagman: ylagman@internews.org (Humanitarian Liaison Officer, Rooted In Trust, PH)

rumors and misinformation fill a void.
• Listening sessions with communities will help capture gaps in understanding of COVID-19.
• Focusing on these gaps and the information needs of the community can help fight misinformation and rumors and strengthen public health messaging.
• At the core of these rumors is the denial of the existence or severity of COVID-19.

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• Going back to basics and sharing COVID-19 basic information through trusted leaders in the community will address doubts about COVID-19. Discussion topics may include:
  o What is COVID-19 and how does community transmission happen?
  o What are the measures to prevent transmission?
  o How is COVID-19 diagnosed?
  o What goes on in quarantine and isolation facilities and hospitals, including the processes in identifying and treating COVID-19 patients
  o Stories of healthcare workers in fighting COVID-19 and the role of the medical community and frontliners

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