September 2020
What have we learnt since April?
Changing views - communicating with Somalis on COVID19
What the webinar will cover

- What is Imaqal? A reminder
- How has Imaqal adapted to COVID-19?
- What have we learnt since April 2020 that can further inform the response to COVID-19 in Somalia?
- Conclusions and recommendations
What is Imaqal? Objectives

Equality and Inclusion of marginalised groups*
- Women
- IDPs
- Youth
- Minorities

Increased inclusive & participatory governance
Reduced community vulnerability to conflict
Increasing stability

*valuable in its own right
Imaqal reach

3 Seasons Radio Drama (30 radio stations)
- 2x 15-episode Radio Magazine (30 radio stations)
- Social media discussion
- 6 TV debates
- 28 On-the-ground forums

*Imaqal's audience estimate as per representative phone survey in March-April 2020 (n=1632)
Sustained Engagement (Pre-Covid 19)

335,288 messages (SMS)

53,840 unique participants

65% participated more than once
How has Imaqal adapted to COVID-19?

Experience Africa’s Voices interactive radio method in Somalia.

**Rapid social insights for better interventions in health crises.**
Key themes/Issues tackled on COVID-19 programming response

- Community perceptions on COVID-19
- Community protection (collectively)
- Religious/Cultural perspectives
- Effects on Livelihoods
- Effects on vulnerable groups
- Access to health & wellness
- Rumors & misinfo
- Gender inclusion on COVID-19 response
- Access to PPEs
Key themes/Issues tackled on COVID-19 programming response

- Impact on girls education
- Economic impact
- Impact on IDPs

109,426 messages
30,105 Unique participants
## Adapting Imaqal to COVID-19 response needs

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Adapting Imaqal to COVID-19 response needs

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Adapting Imaqal to COVID-19 response needs. What have we learnt since April?
Topline findings

- Change from reliance on fate and religion to more concrete knowledge on the virus and emphasis on its existence. A change particularly seen among displaced persons.

- Concern on the impact of the pandemic on people’s lives, especially jobs and businesses, education, healthcare access and social interaction.

- Persistent minority who deny the existence of the virus.

- Predominant voices that call for the right practice to be followed, especially young voices and women.

- Work, social interactions and stigma can be barriers to follow the health advice for those aware of its importance.
Change in overall prevalent views since April’20


“Dear Imaqal Listener, your voice is important for the response to COVID-19. What are your thoughts on Coronavirus?”

Prevalence of themes in Phase 1 (April) and Phase 2 (August)

- Phase 1 (n = 5494)
- Phase 2 (n=3924)
From fate and abstraction to concrete knowledge

1- Less reliance on religion in phase 2 (August) compared to phase 1 (April) and more statements on the virus itself and its danger, suggesting more knowledge.

2- Misinformation conversations have moved from rumours and stigma attached to religion to a debate on denial vs existence of the virus.

Concern on the impact of the pandemic on people’s lives

3- There is currently a concern on the impact of the pandemic and the containment measures in rather than on how the virus can be identified, prevented or how it is transmitted.

Demographic trends

4- Men’s SMS received continue to reflect misinformation more than women’s.

5- Younger participants (particularly 15-17) continue to champion the need to follow the right practices and rely less on religion as seen in the first phase and throughout programming. They are telling us more about the impact on their lives than older groups.

6- Displaced persons who participated are sending more messages stating the characteristics and risk of the virus, suggesting improved knowledge compared to phase 1, when they were more likely to express misinformation. Yet, health information and resources on prevention continues to be important.
Understanding these changes in the context of Imaqal programming

More engagement with Imaqal, more knowledge

Those who engaged with Imaqal at least three times in the last 4 months were significantly less likely to inquire about the prevention strategies (OR = 0.05, p-value = 0.0394),

Those who engaged with Imaqal at least four times in the last 4 months were significantly less likely to send rumour/stigma/misinfo messages (OR = 0.45, p-value = 0.0074)

In addition, participation in at least one of the programmes was significantly associated with:

(i) increased call for right practice

(ii) decreased messages on religious/hope practice during phase 2 of diagnostics
In the context of a wide government, humanitarian and RCCE response, what other factors could explain this change in views?
Risk perception and barriers to adopt advice  
(SMS survey July 2020// n=4463)

Key insights:

- Participants perceive people in their communities to be worried about contracting COVID-19 and think that **lack of awareness** affects how others respond, although displaced participants were significantly more likely to mention the poor economy as a barrier to respond.

- Participants admit that **livelihoods, social life in the community**, and **stigma** make it difficult for themselves to follow all the measures.

- Religion continues to be an important lense from which to address skepticism and lack of action among those who don't perceive a risk.

- There are also clear differences among **displaced communities** compared to non-displaced, with a higher concern among displaced for their **livelihoods and poor economy** as well as the **gap in authorities' leadership**.
"Sameyn aad uweyn ayuu ku yeshay Haba udrnatee Dadka danyarta ah Oo Waxay malintii dhcdasan hbnkii cunan."

It has caused a lot of impact especially to the poor people who eat at night what they get during the day.

Woman, 19 years, Baydhabo
Livelihoods (ep. 4)

How has COVID-19 affected your normal life/way of life generally?
Sidee cudurka COVID-19 saameyn ugu yeeshay hab-nololeedkaaga guud?

![Impact on life - % Prevalence of themes (n=4105)](image)
**General impact**

saamiin waa kuyiilanaa maxaa yiilay saameen ayoo kuyiishay soomaaliya COVID-19 ii daawo maloohayaa

“It has (a negative) impact because Covid-19 has affected Somalia and it has no cure.” Man, Dhuusamareeb

**Education**

wuxuu ugaystay dhibaato aad uweyn gees walba siiba waxbarashada. Dheddig, 35, Galkacyo.

“It (COVID-19) has caused me a considerable impact particularly on education.” Woman, 35, Galkacyo.

**On economy**

si weyan ayu usameyay no lasha guud

“It has hugely affected livelihoods more generally.” Woman, 18 years, Hodan

Dhaman dadka somaliyed wa samen ad balar e dhaga dhaqalha gancsiga

“It has widely affected the economic sector and business operations of all Somali people.” Woman, Yaaqshiid

Waxbarashaddii ayuu hakad iga galiyey socodna hasheegin dhaqdhaqaageygii waa uu igaxanibay

“It has suspended my education let alone walking freely, it has restricted my movements.” Man, 22 years, Dharkenley.
Recently displaced felt the impact more, especially on livelihoods. Non-displaced participants report more on ‘no impact’ or impact on education. 

"It has affected the economy and made the lifestyle very expensive."
Man, IDP-Mogadishu

"It has largely affected the economy and the business."
Woman, 20 years, IDP-Hodan.
Livelihoods (ep. 10)

What needs to be done to address the economic impact of COVID-19 on people's businesses, jobs and livelihoods?

*Waa maxay waxa ay tahay in la sameeyo si wax looga qabto saameynta dhaqaale ee xanuunka COVID-19 uu*

% theme prevalence (n=2459)

Sameyn weyn ayow kuyeshay xaga dhaqale xaga ganacsiga iskuqirka bulshada

*“It has hugely affected the economy, trade and community integration.”*

Woman, 20, Belet weyne
**Re-opening businesses**

“Normal situations can be restored by reopening businesses and taking further precautions to stop the spread of the pandemic.” Man, 58

**Funds**

“The government should provide funds for development projects to help with the economic crisis that's affecting the whole world, the government should work on developing agriculture, marine, land resources and financial resources such as trade and diplomatic relations.” Man, 25, Afgoye.

**Cooperation**

“Something can be done if the community cooperates with each other to help those in need” Woman, 32, Cadado
As seen throughout Imaqal’s COVID programming, women continue to ask for people to follow the health guidelines (‘Call for right practice’), showing they can be champions in communication efforts.

Inlaqaato talooyinka caafimaad siloogahortago cove19
“To (they should) follow the authorities’ advice so as to prevent Covid-19.”
Woman, 24, Guriceel.
Participants from the North East highlight the need to reopen businesses and government support whereas more of those from the South East refer to general impacts felt and call for trusting religion.
Vulnerable households (ep.5)
What should be prioritized to support vulnerable households against the effect of COVID-19?
Waa maxay waxa ay tahay in mudnaanta la siivo si govsaska nuqul looga taageero saamavnta xanuunka Koroona fayraska?

- Financial resources
- Preventive materials and healthcare support
- Awareness, education, following advice
(General) support

Waxey illa tahay inlooga hortagikaro ina lasiiyo wax eey isku dabaraan inta lagu jiro xaalada karoona FERS SIda cunto iyo agabka nolosha dhamaantis

“I think this could be prevented by providing vulnerable people with basic necessities during the Coronavirus era such as food and all sorts of basic needs.” Man, 26 years

wad mahad santihin knn dhaman waxa kamid ah waxa laga tagera cuno kirada guriga oo laga sacido iwm

“Thank you, the thing they need to be supported in is getting food, rent and daily sustenance in the running of their house.” Man, 30 years, Karaan

Healthcare

Waxay mudanyiihin in la taakuleeyo oo laga warqabo caafimaadkooda lana siiyoo daryeel caafimaad lana caawiyiyo shaqada

“They deserve to be supported and their situation monitored by providing them with health care services as well as jobs.” Woman, 15 years, Hodan

Waxa xusid mudan oo haboon in la caawiyo qoysaska nugul waayo ma awoodan iney helaan daawo iyo daryeel ku filan sababo dhaqaalo xumo awgeed

“It is worth mentioning and good that vulnerable people get assistance because they are unable to get medication and sufficient health care services due to the poor economy.” Man, 26 years, Hudur

Preventive items

Wxey ila tahay in mudnanta lasiiyo marka hore nadafada biyo fcn Oo nadiif ah iyo waxayabaha looga hortagi Karo sida sabunta iyo jeermis dilayasha in si bilash ah loogu qeybiyo si ey uga hortagan cudurkan

“Cleanliness should be prioritised first of all, while using clean water. There should be a plan to distribute preventive items such as soaps and disinfectants freely to prevent further spread of the virus.” NA
Health (ep. 6)

How has COVID-19 affected your access to health services?

Sìde ayuq cabuqa Koroona u saameeyay helitaankaaga adeegyada caafimaad?

Theme prevalence by participants %

- Inadequate facilities
- Stigma
Inadequate healthcare

Magacaygu wa duraan cali waxa dib lugu Zixun ayuu usaameeya xero barakacayaal ah baan joognaa caafimaadna mahelno Allah baa caafimaadka hayee ankee wax aan caafimaadka kutagno mahaysano iyo maamul noo xilsaraan

“It has affected me very badly, I am an IDP and we don't have healthcare or finance to access healthcare services, we also don't have local administration that looks out for us.” Man, 19, IDP

Magaceyga wa maxamed axmed o jogo gobalka gado gar ah damada luuq cabuqa karona adegyada caafimad wuu sameyey sabto ah goobihi caafimadka dhamantod wey xirment xanunadi caadiga aha xita mel la,iskaga daweyo wa lawayey marka karoona wuxu noqdey caqabad aduunka ku so korartey mahadsanidin adinkana

“Corona has affected the health sector because all health centres have closed down. Even normal disease we have nowhere to get it treated and so corona has become a challenge all over the world.” Man, 30 years, Luuq

Stigma

asc abriil malariyo ayaa igu dhacday ma aadin gobaha caafimadka anigoo ka cabsanaya in la iyarahdo carona ku haya

“I got malaria and I did not go to the hospital because I was scared I will be told it is corona.”
Man, 46 years, Guriceel

dabcun siweyn ayu usameyy helitankayga adegyada caafimadka wxana kamida in lga shakiyo marka ad qufacyso ama hindhisayso marka ad gleyso gobaha caafimadka sidasna ad adigu istakorto

“It has really affected the access to health care service, if you sneeze or cough when in hospitals people suspect that you have covid and thus brings about stigma.”
Woman, 16 years, Cadaado
A girl says: "It (COVID-19) has caused me a considerable impact particularly on education." What does the community need to do to ensure girls continue learning during COVID-19?

Gabar ayaa oranaysa:"Xanuunka COVID-19 wuxuu igu yeeshay saameyn badan khaasatan dhanka waxbarashada." Maxaa looga baahanyahay bulshada inay sameyso si loo xaqiijiyo in gabdhaha ay sii wataan waxbarashada inta lagu gudo-jiro COVID-19?

- **Need to support and encourage girls to continue learning**
- **Strong emphasis on the impact on education**
Need for encouragement

“The community needs to encourage and motivate girls while giving them healthcare advice.” Woman, 25, Galkacyo, Recently displaced

Impact

“COVID-19 has hugely impacted education.” Woman, 60, Recently displaced

Follow right practice

Gabdhaha keliya mahee wiilashaba waa kuyeeshay waayo gabdhaha keliya xarumaha waxbarashada madhigtaan oo wiilasha ladhigto abdhaha iyo wiilasha waxbarta maadama ay bulshadu kamidyihiiin waa iney qaataan awaamiirta dhaqaatiirta

“It is not only girl’s education but also boys’ because it is not only girls who learn in education centres. Both boys and girls are among the community so they should follow the doctor’s advice.” Man, 22, Dharkeynley.
Conclusions and recommendations (1/2)

- Imaqal participants speak about COVID-19 in more concrete, knowledgeable health terms. This change is particularly seen among displaced persons, who in April stood out in our research for expressing misinformation.

- There is a demand for government support for businesses and job loss as well as food assistance for those more vulnerable. The impact on livelihoods is particularly mentioned by displaced persons although not exclusively.

- Aside from the economic ramifications of COVID-19, there is a need to address disruption in service delivery, especially education, the impact of which has been reported mostly by women and younger people.

- The impact on education is closely related to the impact on livelihoods. There is a need to identify ways to address the pre-existing inequalities on access to education that are likely exacerbated by COVID-19. Education recovery funds should extend to community groups to encourage and, where necessary, provide incentives for vulnerable girls to return to education.
Conclusions and recommendations (2/2)

- There is an ongoing call for people to follow health advice and this is associated with the possibility of returning to education safely. Young people particularly ask for others to follow the right practices. Communication campaigns should build on this readiness by many, particularly women and youth, to champion best practice alongside financial support that can help families bring their children back to school.

- Delivery of healthcare also needs ongoing attention from the point of view of resources to keep up with demand. In addition, communication efforts need to also tackle stigma and fear in accessing facilities.

- Women and young people have consistently and clearly shown their support and call for people to follow the advised guidelines. They are important champions for communication and behaviour change efforts.

- Despite evidence of knowledge improvements, there is still a relatively small but persistent proportion of participants who deny the existence of the virus. Addressing misinformation through trusted religious leaders, particularly in the South East and targeted at men, remains important. Communication efforts should anticipate the need for tackling skepticism in the next phases of the pandemic.
AVF team

Thanks
MediaINK team
Centre for Humanitarian Change, Nancy Balfour, Peter Hailey, Badra Yusuf

Contact
Agnes Gakuru, Senior Programme Manager, agnes@africasvoices.org
Samuel Kimeu, Executive Director, samuel@africasvoices.org