



## KAP analysis report of Bedouin communities for awareness materials

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From the 10<sup>th</sup> of March until the 29<sup>th</sup> of March MdM-Spain conducted phone calls to some Bedouins communities located under the administration of the Jericho Governorate and Area C. Here the following discovering:

### Knowledge

- Most of the Bedouins communities define COVID-19 as a deadly disease whose symptoms are similar of those of the flu and that it can be transmitted through physical contact.
- Half of the communities did not know that high temperature and coughing are symptoms.
- Some of the communities know that some individuals can carry the virus without showing any symptoms but that are still able to infect others. This element constitutes a fear among the communities.
- All the communities know about the measures to mitigate the risks, especially the social distancing and the hand washing.
- None of the communities mentioned the importance to call the emergency number provided by MoH in case of detecting a suspected case.
- Only few interlocutors were aware about the isolation procedures to be taken in case of the presence of a positive case in the community.
- The information is hold by the most educated and the most experienced in the communities, that tend to be men.
- Regarding children, in some calls there were concerns about how to tell them about the nature of COVID-19 and why the life habitudes have suddenly changed. Many mentioned the boredom of the children and the difficulty in making them follow the social distancing rules.

- The main channels through which the communities receive information's is phone messaging from MoH and communication companies (i.e stay home, be safe, wash your hand for 20 sec etc.), TV, social media platforms and radio's.ç
- Many communities mentioned that receiving the messages from the media tends to rise the stress and the anxiety.

***Recommendations :***

1. Provision of more accurate information's about the procedure and the steps to be taken in case there is a suspected case (i.e. isolation, emergency number).
2. Information and tips how to deal with suspected cases and how to prevent the individuals more at risk (elderly and people with past diseases) to be infected.
3. Provision of awareness material on COVID-19 suited for children.

**Doubts and false information**

- Almost all communities fear for the heath of their children and their animals, suggesting that animals can be infected.
- None of the communities mentioned that the population more at risk are the elderlies along with the ones that have pre-existed diseases.
- The report underlines the concerns of pregnant women and the possibility for the fetus to be infected.
- Most communities believe that Palestinians are less affected by the virus compared to the Israeli given their good and strong resilience level given by their history and their struggle.

***Recommendations:***

1. Clarify the role of animals and whether they can be infected.
2. Clarify who are the members of the population at risk.
3. Recall information and address doubts to pregnant and lactating women.

**Attitudes**

- All communities are extremely worried about the economic consequences of the emergency. In particular, they fear the lack of groceries, the decrease of income as they are not any longer able to sell their products nor to move to work outside the community and the implementation of higher protection levels and movement restrictions that will undermine their trade business.

- All communities are stressed by the uncertainty of the situation and by the mobility restrictions.
- Many communities mentioned the lack of medicines given that no NGO has visited them since the beginning of March.
- All communities were aware on the importance of washing their hands with soap and water, but they are stressed that they don't have any sanitizers.
- Few of the interviews affirmed that some behavior problems are appearing, especially nervousness and anger between couples upon the man's constriction to stay at home.

***Recommendations :***

1. Clarify what are the favourable conditions for the virus to infect a person.
2. Highlight that soap and water is enough if movements are done correctly and frequently. Or, explain how to prepare "do-it-yourself" sanitizers.
3. Psychosocial support material addressed to the community to tackle stress, boredom, anxiety (creation of a routine, exercising etc).

**Practices**

- Most of the communities are avoiding as much as possible the gatherings and limiting the visits to neighbors and relatives.
- All communities are following the washing hands protocols after touching individuals and animals.
- Most of the members of the communities have increase hand washing before and after eating.
- Most of the women breastfeed as usual, but there are cases of women that experience a reduction of milk hormone secretion due to stress.
- Regarding the cooking habits, few communities are starting to ration the number of meals due to the fear running out of food. At the same time, most of them are changing the daily alimentation to strengthen the immune system, such as drinking hot fluids and herbal compositions.
- They are welcoming anyone who comes to the community as usual, also because they are feeling isolated.

- The religious practices continue to be held regularly as there is a common belief that with the help of Allah and through the prayer the community will be more protected from the virus and help them to be healthy.

***Recommendations:***

1. Provision of awareness documents that underlines that, despite the changes of cooking habits to bust immune system, the social distancing and the avoidance of physical contacts should be kept as main risk mitigation practice.
2. Provide specific documents of the risks related to breastfeeding during the pandemic.
3. Suggest to not invite people in the community unless they wear protective gears.