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## Perceptions and practices on coronavirus disease 2019 (COVID-19) in a Bouaké prayer camp in Côte d'Ivoire

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### ABSTRACT

*The barrier measures of coronavirus disease 2019 (COVID-19), particularly involving the total containment of Greater Abidjan and the closure of borders, have caused social dysfunction in places of worship. In Bouaké, a town in central Côte d'Ivoire, spirituality in the clinical practice of the mentally ill has gained renewed interest at the Rehoboth prayer camp in Sessénoua. The study aims to analyze perceptions relating to COVID-19 and the impact of religious prescriptions and conceptions on attitudes and preventive practices among actors in the prayer camp. For it, interviews were administered to 70 actors of the prayer camp including managers, patients, their parents and visitors. It emerged from this analysis that the lack of resourceful and reliable information associated with the proliferation of rumors explains the ignorance of the modes of transmission of COVID-19 by the actors of the prayer camp. In terms of preventive measures for COVID-19, the results also revealed that they are perceived as factors distorting and altering religious rituals during worship and prayers. It is important that state authorities become aware of these social and psychological impacts and above all, integrate the knowledge, attitudes and practices of faith-based and local communities into preventive measures in the face of COVID-19.*

**KEY TERMS:** Côte d'Ivoire, COVID-19, prayer camp, attitude, practice, religion, rumors

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## INTRODUCTION

Since March 2020, Côte d'Ivoire has recorded its first cases of contamination and death from coronavirus disease 2019 (COVID-19). Government measures relating to the response to the COVID-19 pandemic adopted mainly by the Ministry of Health and Public Hygiene and by the National Security Council to curb the spread of the disease, have benefited from the support from international technical and financial partners, such as United Nations Children's Fund (UNICEF), WHO, United States Agency for International Development (USAID) and Breakthrough Action. But the major difficulties in the implementation of these measures lie in the level of free basic social services of social protection, whose impact on employment and effectiveness are not recognized by vulnerable households in this context of COVID-19. This article reports a study on perceptions and practices on COVID-19 in a Bouaké prayer camp in Côte d'Ivoire.

## BACKGROUND

The evolution of COVID-19 on a global scale has raised awareness of the inevitability of social sciences and human knowledge (World Health Organization [WHO], 2020; United Nations Educational, Scientific and Cultural Organization [UNESCO], 2020), given the complexity of the disease itself and the barrier measures to stop its spread and mitigate its effects. Despite the strategies put in place by the WHO to reduce the rate of contamination (Organisation Mondiale de la Santé [OMS], 2020), the coronavirus disease has spread throughout the world. WHO has identified the rapid spread in Africa as a worrying threat given the relative weakness of the health system. Added to this is the fact that some African countries such as the Democratic Republic of Congo, Sierra Leone and Liberia had just recovered from the Ebola pandemic. In addition, African regions already weakened by conflicts were pointed out as areas at high risk for the COVID-19 pandemic.

In Côte d'Ivoire, the barrier measures taken, particularly involving screening, total containment of Greater Abidjan (the economic capital), distancing measures, social subsidies and the closing of borders, combined with the international context have resulted in the reduction of economic growth to 1.8% in 2020 (The World Bank, 2020; Le Monde, 2020). The advent of COVID-19 has therefore generated a gradual transformation and a complex development challenge to overcome. Indeed, it has become a multidimensional problem (educational, health, socio-economic, psychosocial and religious), which has a real negative impact on the progress of several sectors of activity and the achievement of the sustainable development program (The Casablanca Club, 2020, p. 105; INS & PNUD, 2020; Institut National de la Statistique [INS] & Programme des Nations Unies pour le Développement [PNUD], 2020, p. 50; UNICEF, 2020, p. 39). Like all countries, the coronavirus disease has impacted all industries. At the level of informal and independent sectors, such as religion, it emerged that this pandemic had a negative influence on the life of religious, insofar as the fight against the spread of the virus imposed the limitation and prohibition of gatherings. In places of prayer, warnings from the authorities are seen as a brake on religious beliefs. Indeed, the implementation of these preventive measures to fight against COVID-19 has affected unconventional structures. In order to properly manage the health situation, authorities and faith-based organizations have been invited to adapt preventive measures to their religious practices and educate members of their communities in order to protect them from the disease.

During the first wave when the city of Bouaké recorded its first cases, the observation that was made is that many mentally ill people frequented prayer camps. As everywhere and elsewhere, spirituality in clinical practice has seen a resurgence of interest. Indeed, populations have become aware of the fragility of human existence, in the face of feelings of helplessness and fear, which manifested themselves during the emergence of the COVID-19 pandemic (Mishra *et al.*, 2017; Ukah, 2020; Kowalczyk *et al.*, 2020; Wildman *et al.*, 2020). However, the fight against COVID-19 has not yet intensified in places of prayer and deliverance for vulnerable and marginalized people. Thus, awareness campaigns have been initiated by Doctors Without Borders (called, MSF) and Community Mental Health (or, SAMANTACOM) in order to lay the foundations for the fight against COVID-19 in prayer camps. Indeed, the measures generated in the fight against this pandemic are leading to a weakening of social ties and changes in religious rhythms. According to the actors of these camps, the preventive measures require attitudes and practices causing the distortion of religious rituals during worship and prayers.

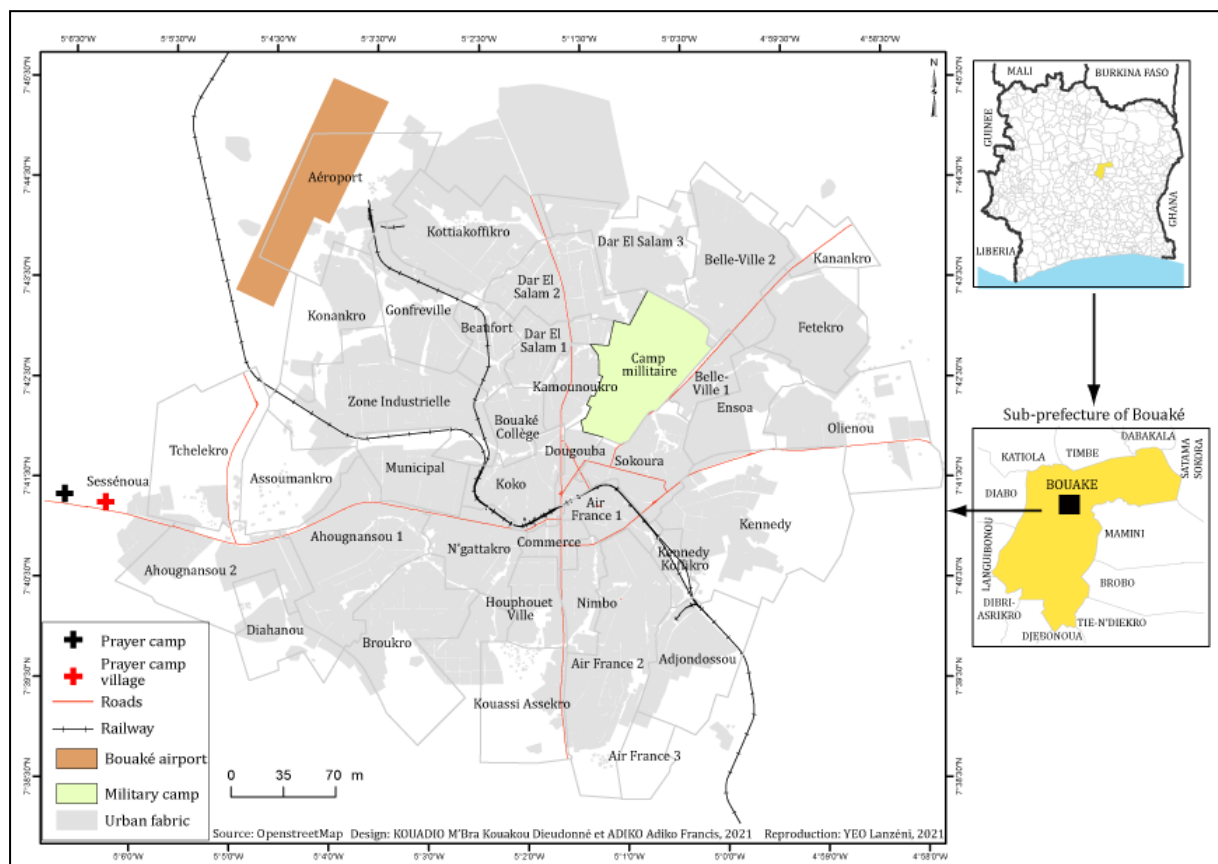
However, previous studies have paid little attention to the influence of epidemics in prayer camps in order to better understand the knowledge, attitudes and practices of religious communities linked to COVID-19 in prayer camps. It is in this perspective that a socio-anthropological reflection takes place on the case of the actors of the Rehoboth prayer camp in Séssenoua during the first wave of the coronavirus pandemic. The following questions then arise: How is COVID-19 perceived by the actors of the Rehoboth prayer camp in Séssenoua? What is the impact of religious prescriptions and conceptions on the preventive attitudes and practices of these actors? The study aims to analyze perceptions relating to COVID-19 and the impact of religious prescriptions and conceptions on attitudes and preventive practices of COVID-19 among actors in the Séssenoua prayer camp.

RESEARCH METHODS

Study area

The study area is located in the commune of Bouaké, which is the second largest city in Côte d'Ivoire after Abidjan. The city of Bouaké is the capital of the department and the region of Gbêkê. It is located in the center of the country, in the Bandama valley and is about 350 km from Abidjan and 100 km northeast of Yamoussoukro, respectively the economic and political capitals of the country. Bouaké has an area of 4,803 km<sup>2</sup> and has 536,189 inhabitants for the city and 1.5 million for the agglomeration. It is the second most populous city in the country after Abidjan. It brings together 143 villages within a radius of 20 km around which Séssenoua is part. This village is located 15 km west of the commune of Bouaké. There is the “Camp Rehobot in Jesus Christ the true God”, on the outskirts of the village. The village of Séssenoua is mainly inhabited by indigenous people of the Baoulé ethnic group. The main activity of the inhabitants is agriculture. The Rehoboth prayer camp in Séssenoua mainly welcomes the mentally ill. The figure 1 shows the map of the city of Bouaké with a highlighting of the village of Séssenoua, and the geographical location of the Rehoboth prayer camp.

Figure 1: Map of the location of the study area in Bouaké



Sampling

This research was undertaken from October to December 2020 in Séssenoua (Municipality of Bouaké). As part of this study, we were interested in all the resource persons of the Rehoboth prayer camp in this village who have activities or a social position in relation to the life of the Rehoboth prayer camp and who were able to provide us with relevant and necessary information for this study. They are the officials, the sick, the relatives of the sick and visitors to the Rehoboth prayer camp in Séssenoua. The survey unit is made up of people aged 15 and over, residing at the Rehoboth camp in Séssenoua during the study period and having agreed to participate in the interviews. The sampling technique chosen is the reasoned choice sample. It consisted in choosing the respondents according to their spiritual interest and their level of social involvement in the life of the prayer camp. As a result, the primary actors at the hierarchical level have been distinguished, secondary actors in the posture of executors. The table 1 gives the distribution of the number of respondents (70 people) according to the categories of actors of the prayer camp.

Table 1: Distribution of respondents by status

|                  | <i>Status of actors</i>      | <i>Number of actors</i> |
|------------------|------------------------------|-------------------------|
| Primary actors   | Responsible (Camp manager)   | 1                       |
|                  | Advisors (Assistant manager) | 2                       |
|                  | Secretaries                  | 2                       |
|                  | Treasurers                   | 3                       |
| Secondary actors | Sick people                  | 16                      |
|                  | Parents of sick              | 20                      |
|                  | Visitors                     | 26                      |
|                  | Total                        | 70                      |

### Data collection and analysis techniques

In the context of this study, the collection tools include the semi-structured interview guide and the observation grid. Regarding the interview guides, they were structured around information on knowledge, attitudes and practices relating to COVID-19. The collection of information was carried out using note-taking techniques and digital dictation recording of responses from around twenty resource actors from the camp. As for the observation grids, they were used to list the indicators of facts to be observed in the Rehoboth prayer camp. For example, certain indicators such as the non-respect of the barrier gestures of the COVID-19, could be observed during the services, but also of the visits to the actors of the Rehoboth camp. The data were entered in Microsoft Word software (2007 version) and transported to the Maxqda software for processing. They were then subjected to content analysis to reduce this data and result in a manageable volume. The use of information and the transversal synthesis of the interviews was obtained through the identification of key messages by item, the prioritization of messages according to the frequency of occurrence, the comparison of information sources and the illustration of the messages by a verbatim. This approach made it possible to better understand the meaning that the interviewees would have wanted to convey from the narrations.

### Ethical considerations

For the administrative part of the study, a letter from the academic authority was sent to the Mayor of the Municipality of Bouaké. The city authority, in turn, issued us a letter of introduction. This letter was first presented to the customary authority of the village of Sessénoua, as it is this village that houses the Rehoboth prayer camp. After the agreement of the chiefdom of Sessénoua, we met the head of the Rehoboth prayer camp to whom we presented the letter from the municipal authority. The head of the prayer camp thus gave us his agreement to carry out the study in his structure. After the agreement of the head of the prayer camp, a consent form was sent to the respondents, all of whom are adults. Specifically for the sick, an assent form has been submitted to their parents.

### STUDY FINDINGS

Perceptions of the COVID-19 pandemic under the influence of the lack of reliable information resources

The study of the perceptions of respondents on COVID-19 provides resource information on this disease. On analysis, the actors have only crippled information on the symptoms and modes of transmission of COVID-19. Thus, the respondents have an approximate knowledge which explains their perception of COVID-19 from a religious perspective. But in this sense, the majority of the actors in the camp consider the COVID-19 as a divine punishment. They believe that only prayer and conversion can liberate the whole world. Moreover, the latter have conspiratorial ideas. These seem to blame the West as responsible for the emergence and spread of this pandemic. According to the actors of the prayer camp, the West would substitute for God and would believe only in science.

Respondents also believe that the rapid spread of COVID-19 in Western societies is the obvious consequence of the sins of pedophilia, of homosexuality which they qualify as unnatural.

This can be seen by the words of an actor:

*It was God who punished them for the sexual immorality they do all the time. If they recognize that God is almighty by converting, they will all be cured of coronavirus forever, (P1, Head of prayer camp).*

Thus, the respondents reject any idea of possible contamination of members of their religious community by other members or other non-members. Therefore, they find that the Coronavirus disease does not concern them. The indifference thus manifested in the face of COVID-19 can be explained by their roots in spiritual values.

However, on closer inspection, these perceptions of the actors seem to be portrayed by such erroneous interpretations given the precarious living conditions in the Séssenoua prayer camp. In fact, the respondents claim to know this pandemic only by the name of the disease; and that they get their information mostly through rumors. In fact, during this COVID-19 pandemic, these rumors are ringing out from everywhere via the internet, social media and mobile phones. The information conveyed takes hold and thus reinforces the populations. But as regards the actors of the Rehoboth camp in Séssenoua, these rumors about COVID-19 reach them through the game of interpersonal exchanges. This is reflected in the words of the interviewees:

*I haven't seen anyone with the disease yet, so I don't think I know the signs, (P3, Prayer camp counselor).*

*Since the disease does not exist, therefore the signs do not exist and these are the signs of other diseases that they attributed to their COVID-19 (P63, Visitor).*

*There is no electricity here. Where will we get the information, if people haven't told us? (P7, Prayer camp treasurer)*

The precarious situation of the actors interviewed linked to the lack of modern infrastructure such as the electrical installation network remains an obstacle for the reception of awareness-raising messages from the government media in the prayer camp. However, the communication network deficit seems to be binding in order to have resource information on the pandemic. As evidenced by the appearance of the entrance to the Rehoboth prayer camp in Séssenoua, the buildings are built with precarious materials and concern both those dedicated to worship and those intended for hegemony. These building materials are not durable and pose a problem of insecurity in the face of bad weather. To this precariousness constraint, we should add the problems of the influence of fake news on the knowledge, attitudes and practices associated with COVID-19, which are generally amplified due to the low level of education of working-class circles in the Séssenoua district in Bouaké. The religious requirements and conceptions more or less favorable to the preventive attitudes and practices of COVID-19.

The preventive attitudes and practices adopted by respondents in the face of COVID-19 are a function of their faith. In fact, in the Séssenoua prayer camp, analyzes have revealed religious prescriptions and concepts that are more or less favorable to preventive measures for COVID-19. Among the respondents interviewed for this study, some adopt unfavorable attitudes towards COVID-19 with regard to their belief in God. According to them, it is not conceivable that a believer in God should fear this disease. As a result, they attest that God would not allow the faithful to be infected with COVID-19. And for the pastor (P1) to support this thought in his terms that "no one in this camp can contract COVID-19 because we have the presence of God in our life and in the camp here". Conceiving that faith spares the contamination of disease, the actors of the prayer camp do not perceive the usefulness of respecting the barrier measures. These measures indeed constitute a factor of estrangement from their neighbor, as illustrated by these respondents:

*God loves and protects his children and I believe in his word. So, nothing will happen to me if I don't take my time respecting these measures, because I have a lot to do (P4, Prayer camp secretary).*

*God himself has said in his word to love one another and help one another too. So, I can't pass my brother because of corona. On the contrary, it is there I will greet him because in God we fear nothing (P35, Parent of sick person).*

*Preventive measures are not normal. We say love for neighbor, but suddenly these measures separate us during prayers and prohibit us from laying on of hands during deliveries (P2, Prayer camp counselor).*

On the ground, these words, reflecting the Christian prescriptions of love of neighbor, justify the conservation of the arrangements for the benches and places of the actors of the prayer camp. These arrangements do not promote practices corresponding to the standards of physical distancing recommended in places of worship by the health

authorities. Indeed, the faithful of the prayer camp are not placed more than a meter from each other during worship. However, the Coronavirus pandemic crisis has led church worshipers to more or less adapt to the barrier measures. Indeed, certain provisions adopted by the actors are favorable to the practices and attitudes of prevention of the COVID-19. Based on the prescriptions of love and charity in Christianity, the majority of those interviewed said they were willing to maintain a courteous relationship with those who may be infected. The proof of their willingness to show more fraternity in the face of a case of COVID-19, is given in the words of some faithful.

*Anyway, if it's me I'm walking with him, I don't stand aside from him. Because he's my brother and we're in the camp together. God himself has said to love his neighbor in the bible. So, I can't run away from him because he's sick (P50, Visitor).*

*In Jesus, we assist our neighbor, so I always remain in the same relationship as usual with the infected person. If God hasn't rejected us, why would I? (P59, Visitor).*

Obviously, religious prescriptions and designs aim to make life in the prayer camp more sociable. By considering the infected person as a vulnerable person, they integrate the mobilization of social values of assistance and solidarity in the event of contamination by the coronavirus disease.

## DISCUSSION

### *Impact of the lack of information on knowledge, attitudes and practices relating to COVID-19 in the prayer camp*

In this study, the hypothesis was put forward that the knowledge, attitudes and practices of the actors of the Rehoboth prayer camp of Séssenoua in Bouaké, tend to guide their perceptions of the modes of contamination and preventive behaviors linked to COVID-19. The results of the study show that these perceptions are determined by the socio-relational conceptions and prescriptions constructed in a context of the spread of rumors and the lack of reliable information on COVID-19 in the community of Séssenoua. In fact, during a global pandemic, the information disseminated by mass media and social networks on public health has a considerable impact on populations. A number of studies on the epidemiological model reveal that the quality of the information received has a positive effect on the interpretation of disease parameters and the prediction of future outbreaks (Goffman & Newill, 1964, p. 227; Funk et al., 2009, p. 6873). However, during the COVID-19 pandemic, individuals were overwhelmed by floods of information, which did not facilitate their better understanding and therefore the proliferation of fake news on social networks such as WhatsApp (Tagliabue et al., 2020, pp. 1-2; United Nations [UN], 2020). Other studies on disinformation in times of COVID-19 rather highlight the responsibility of the actors of the health system in the construction of rumors, which did not facilitate the acquisition of good indications likely to positively influence the perception of risk by the public. The results show that rumors taking the form of false news conveyed in the media by certain medical specialists and national and community leaders who hope to obtain positioning in the field of the pandemic (Winiger, 2020, pp. 250,251; Premph, 2021, p. 6).

### *Disinformation and the emergence of negative emotions during COVID-19*

Moreover, in the present study, the actors affirmed that the Rehoboth prayer camp in Bouaké in Côte d'Ivoire was not until now connected to the electricity grid, which implies that the broadcasting and reception of the he information through the traditional channels used by public authorities, such as radio and television, is very limited. This is why the rumor, as an expression of the dysfunction of the communication channels, is cited as the main source of information on COVID-19 by the actors of the prayer camp. Thus, rumor seems to play a relatively useful role for these actors increasingly exposed to vulnerability due to the COVID-19 crisis in Côte d'Ivoire (Ministère du Plan et du Développement [MPD], 2020, pp. 44-52; République de Côte d'Ivoire [RCI], USAID, & UNICEF, 2020, pp. 44-82). In fact, a study on the spread of public emotions during the COVID-19 epidemic in China has shown the existence of a positive correlation between happiness and rumors (Dong et al., 2020). But, this weakness in communication can generate a deficit of reliable and quality information. The obvious consequence revealed in the results of our study is the low level of knowledge of the actors of the Rehoboth camp of Séssenoua on the COVID-19. Faced with a disease whose number of cases continues to grow, research work on knowledge, attitudes and practices concerning COVID-19, shows that this state of affairs can explain the emergence of fear, stress and anxiety given the flip side of societal concerns and uncertainties of rumors (Afolabi, 2020, pp. 54-57; Gebu, 2020, p. 45; Rias et al., 2020, pp. 6-9).

As observed in the United Kingdom, Poland and Italy by (Sorokowski et al., 2020, pp. 6-7), the social and psychological consequences of this epidemiological situation among those actors of the prayer camp struggling with the COVID-19 epidemic, have similarly resulted in increased anxiety following information about the

coronavirus and prejudices against Westerners. COVID-19 is rightly called the "disease of the West and of the West who do not believe in God." We understand here expressions relating to the perception of COVID-19 as having supernatural causes and violations of socio-spiritual prescriptions (Ayele, 2021, p. 992). This explanatory model of the cause of disease based on the supernatural; that is, the belief in "Almighty God", has always been the focus of work on the socio-cultural factors of disease and has revealed the importance of gods in the quest for health in people. African populations (Kahissay *et al.*, 2017, p. 5; Whembolua & Tshiswaka, 2020). Moreover, it is by considering their quality of believers that the actors of the prayer camp find that COVID-19 does not concern them and that they take no interest in preventive measures. Indeed, studies have shown that the level of spirituality, as well as knowledge, attitudes and practices, is inversely correlated with anxiety related to COVID-19 (Rias *et al.*, 2020, pp. 6-9; Sharma *et al.*, 2020; Yehualashet *et al.*, 2021). In this sense, religion and socio-cultural perceptions can be considered as factors for improving stress and anxiety levels and therefore strengthening preventive behavior in the face of the COVID-19 pandemic (Roman *et al.*, 2020, p. 2). In fact, in the West African context, the existence of a conception of diseases "caused" by witchcraft or geniuses continues to influence the choices of populations towards traditional and spiritual treatments (Cantrelle & Locoh, 1990, pp. 16,17).

## IMPLICATIONS FOR SOCIAL POLICY

In the specific context of Covid-19, there are writings on the social policy of the phenomenon of disinformation linked to rumors. For example, the contributions of sciences such as medical anthropology are important and essential to document and analyze how and why rumors, conspiracy theories and propaganda emerge and circulate in the context of COVID-19 (Ali, 2020). Based on this work which sheds light on the social impacts of disinformation linked to rumors on the management of COVID-19 in faith-based communities, we can offer sociological solutions, namely:

- Develop Information, Education and Communication (IEC) tools on prevention measures related to COVID-19 in order to reduce the impact of rumors on the management of the pandemic in religious communities.
- Strengthen the deployment of electricity and communication networks in neighborhoods located on the outskirts of major cities in Côte d'Ivoire, with a view to facilitating access to information on COVID-19 among vulnerable actors in prayer and deliverance camps.
- Promote and enhance solidarity and social cohesion with a view to reducing the forms of politicization of public aid granted to religious organizations.

Thus, the contributions presented show that much remains to be done for sufficient coverage of the efforts relating to the response to the Covid-19 pandemic, aimed at community and religious organizations in Côte d'Ivoire (Zina, 2020).

## CONCLUSION

Based on the qualitative approach, the results of the study showed that the actors of the Rehoboth camp in Séssenoua only get information from rumors about COVID-19 and its signs, given their socio-economic conditions. This situation of lack of reliable and resourceful information explains the ignorance of the modes of transmission of COVID-19 by the actors of this prayer camp. Thus, the COVID-19 is considered a divine punishment of which only prayer and conversion will help to heal. The results also revealed that socio-religious prescriptions are determining elements in the designs of preventive measures for COVID-19, which are perceived as factors distorting and altering religious rituals during cults and prayers. At the end of analyzes, we note that the actors of the Rehoboth prayer camp in Séssenoua remain indifferent in the face of COVID-19, and do not comply with the recommended preventive measures. Ultimately, the study found that certain religious beliefs influence the perception and prevention of COVID-19. But the actors of places of prayer are affected by disinformation due to the proliferation of rumors on the modes of contamination and prevention of this disease. As a result, the awareness-raising measures on the COVID-19 pandemic established by the government authorities, and in particular the Ministry of Health and Public Hygiene, should be strengthened in religious communities. In reality, these are dominated by thoughts conceiving of the suffering inflicted by COVID-19 as a spiritual education in the face of the behavioral and social deviations of humanity. Barrier measures and vaccination campaigns implemented to contain and eradicate the pandemic remain limited, as long as they do not go beyond human solutions. In this perspective, where awareness of the impact of COVID-19 on the modes of organization of faith-based and local communities is essential, social science research is being sought with a view to making their expected contributions in terms of 'insights and recommendations.

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