Weekly Brief - February 21, 2022

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Polio Discovered in Malawi

On February 17 health authorities in Malawi declared an outbreak of wild poliovirus type 1. The case was detected in a child and is the first case of wild poliovirus in Africa in more than 5 years. [LINK]

Top Criticism in Messaging

- The top specific criticism in social media of messaging around the polio case in Malawi is that the specific district where the polio victim was found was not mentioned.
- This was mentioned by at least a dozen Facebook users just among “Most Relevant” Facebook comments. Examples: [LINK] [LINK]
- Open-source research (Science.org) did suggest the victim was in the capital, Lilongwe, but this fact did not appear to resonate among Malawi audiences.

Times 360 Malawi coverage got the most Facebook reactions

Top themes in comments:
God will protect us, Criticism of Malawi government, Criticism of Pakistan

Zodiac Online also got strong Facebook reaction

Top themes in comments:
Expressions of the seriousness of the disease, No location of the patient mentioned

Malawi24 was 3rd in Facebook reaction. It had the same themes as above (criticism of Malawi government, no location of the patient mentioned).
COVID-19 Infodemic Trends in the African Region

This report seeks to communicate operational recommendations based on social media monitoring from February 12-18, as well as relevant information on current mis/disinformation. Target countries include Angola (PT), Kenya, Nigeria, South Africa (EN), Burkina Faso, Cameroon, Democratic Republic of Congo (DRC), Guinea, Ivory Coast, Niger, Mali, Mauritania, Mauritius, and Senegal (FR). Descriptions of “engagements” and information gathering are listed in the methodology section at the end of this report.

Factual COVID-19 information is being regulated

CONTEXT: In a now-viral video on Facebook, former Chief Justice of South Africa, Mogoeng Mogoeng was interviewed on eNCA News regarding the perceived regulation of COVID-19 vaccine information.

South Africa

- **Coverage: 400k+ views, 8k+ comments**
  - Former Chief Justice of South Africa Mogoeng Mogoeng reignited the debate on COVID-19 vaccines with claims that the information flow is all “one-sided” and the public is not receiving the full picture regarding side effects and complications from getting inoculated. He stated that any information opposing the status quo is removed from public view and causes suspicion and drives mistrust. [LINK] [LINK]
  - Response was mixed, with many opposed to statements made by the former Chief Justice but a significant share of responses supported Mogoeng and reaffirmed claims that vaccine side effects are much more severe than what is being reported. [LINK]
  - This content was widely shared in Telegram channels (100k+ views) that are specifically set up to push back against vaccinations and COVID-19 scientific research in general. In four prominent South African anti-vaccine telegram channels, a government-branded post was shared highlighting a new campaign for vaccinating children. This post was met with strong negative rhetoric:
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- “Indeed absolutely no one should be accepting these experimental toxic drugs being disguised as ‘vaccines’! And most do not need them, certainly not young people.”

Why is it concerning?
- This was an alarmingly rapid uptick in negativity following the former Chief Justice’s statements. It suggests that there is an understated frustration in the public that has become significantly more vocal.
- While Telegram channels have been specifically focused on anti-COVID vaccine misinformation, this has generally declined in the last month. Mogoeng Mogoeng’s public statements may have emboldened individuals to voice negativity that had been in decline.

What can we do?
- Though negativity spiked, it may not be a lasting trend. Misinformation sharing was also shifting to other topics, specifically in Telegram channels. Addressing the interview has not been largely successful, as eNCA news tried to do a review the following day and commentary on the video was predominately negative. However, there are reports that COVID-19 information is being deliberately withheld to stop anti-vaxxers from using it out of context. This is being highlighted in South African channels to validate claims made by Mogoeng Mogoeng.
- Invite opposing views to have conversations with medical professionals in video interviews. Let the misinformation be addressed head-on to allow dissenting voices to feel heard rather than purposely ignored which may be deepening their beliefs.

Narrative to note: Claims of a coverup labeled “PfizerGate” have circulated in some South African social media channels claiming COVID-19 vaccines cause VAIDS. Debunking article found here.
European countries have transitioned out of the pandemic

CONTEXT: Consistent beliefs that there has been an official declaration of the end of the pandemic/preventative measures and restrictions by European countries and the United States has driven speculation that COVID-19 is being used to restrict and harm Africans.

Democratic Republic of Congo
- Coverage: 2k+ engagements, 30+ shares, 100+ comments
  - The EU recently reiterated its stance on the refusal to lift patents on vaccines, which was met by claims that the EU shouldn’t have control over African countries [LINK]
  - Following reports of a decline in COVID-19 cases, the Council of Ministers warned of a potential fifth wave of COVID-19 between April and July [LINK]
    - “Vous faites que du tâtonné détournés nos millions nous devons apprendre a vivre avec la maladie, mais les Français ont eu a déclaré même que il y aura des millions des morts en Afrique Dieu les a confondues tous !”
    - “Lokutaa 😤😪 en Europe désormais, plus de covid,,, le virus est maintenant considéré comme une simple grippe,,, 😃, vos faux tests là pour voyager doit cesser !!!😊😊”
    - “Il doit être moins sérieux ce papa, il n'y a pas un mois qu'il a dit que tout les hôpitaux sont vides il a vaincu Omicro mais aujourd'hui il se contredit ? D'autres pays en Europe acceptent déjà de vivre avec COVID 19 comme toutes autres maladies mais lui préconise une nouvelle vague ?” [LINK]

Burkina Faso
- Daily case reporting by the government has served as a platform for some to highlight a lack of belief in COVID-19 still being present and the belief that European countries have already transitioned to classifying COVID-19 as the flu. [LINK] [LINK]
Why is it concerning?

- The trend is underscoring a wave of frustration that has been growing throughout the year of 2022. Vaccine narratives seem to have minimal change in recent weeks as civil exchanges have declined and sharp disapproval and negative rhetoric towards vaccines has remained steady.
- The most concerning shift in the last week can be found in the claims that African nations are the last countries to move on from COVID-19. Case counts are declining globally and this is being perceived as reasoning to not get vaccinated and to move on from preventative measures.
- Additionally, there is a strong belief that European countries have already established COVID-19 as endemic and that most nations are already treating the pandemic as the flu instead of looking at the disease as a real threat.
- Warnings of the possibility for a 5th wave in the coming months have not been well received, highlighting a lack of concern for COVID-19, an unlikely rapid increase in vaccine uptake, and a potential struggle for large-scale adherence to preventative measures should a threatening variant emerge.

What can we do?

- Media outlets continue to look for ways to drive viewership and increase their overall audience, but the media exhaustion around COVID-19 has diminished returns on fear-based clickbait titles. Moving up in popularity are claims that the pandemic is nearing its end or is already over, playing into the desire of the global population.
- Highlighting the global trends over simply domestic cases or cases in Africa alone may show that the United States and European countries are not through the pandemic completely. Additionally, highlighting vaccine uptake beyond just domestic figures, but across Africa may also encourage additional acceptance in low to moderate uptake regions as well.

Over the last week, officials in the Democratic Republic of Congo lifted some restrictions for COVID-19 travel, but many felt the changes were inconsistent and did not line up with previous guidelines. It will be important to establish that preventative measures may be lifted and reinstated over the next few months based on epidemiologic trends. [LINK]
Portuguese Rumors: Case counts vary for political reasons

CONTEXT: Reporting from the Angolan government on February 14 revealed that there were no COVID-19 cases recorded in a 24-hour period

Coverage: 300+ engagements, 300+ comments

- Following the government announcement of a 24-hour period with no registered COVID-19 cases, some social media users expressed distrust in the report. Most notably, many focused on the potential for using “false reports” to drive political support. [LINK]
- There are also several claims that the cases will continue to be present until the general elections in August. [LINK]
- The report also sparked claims that COVID-19 has never been in Angola and the pandemic is a part of an international political strategy [LINK]
- Some claimed that individuals were simply just not tested during this period and the zero case count is not accurate. [LINK] [LINK]
- While some praised the mandatory vaccination campaign in Angola to be the cause of declining cases, others stated the lack of vaccine uptake proves that they were ineffective. [LINK]

Why is it concerning?

- The positivity expected from the revelation of a zero case period instead also underscored the distrust in the government, disbelief in the effectiveness of COVID-19 vaccines, and lack of concern for COVID-19 spread in the future. There is a risk of low adherence to preventative measures should a new wave of COVID-19 present in the coming months.

What can we do?

- Highlight the importance of progress but continue to be clear that the pandemic is not over. Slowing down on messaging or engagement with the public may serve as a signal to relax adherence to safety measures as well. (Viral Facts “Is the pandemic over?” video [here](#))

Narrative to note: Concern of the impact of COVID-19 on appropriate malaria diagnosis and treatment based on similar symptoms and a perceived lack of training for regional healthcare workers to identify the difference. [LINK]
Persistent Rumors

Rumor: Vaccines don’t prevent death or the virus’ spread / vaccines are not effective
  ● Response: Vaccines provide protection against serious complications from COVID-19 and the new variants. (Viral Facts response here)

Rumor: Foreign companies or governments profit from the vaccine rollout in Africa
  ● Response: Highlight successes in vaccine distribution, as well as new manufacturing campaigns beginning in Africa.

Rumor: Inaccurate assumptions of vaccine side effects/long-term effects
  ● Response: Fear of vaccine side effects/long-term effects continue to be misinterpreted or overstated (Viral Facts response here)

Rumor: COVID-19 no longer exists / never existed
  ● Response: COVID-19 cases have declined but health authorities are warning of a potential 5th wave (Viral Facts response here)

Rumor: Frustration with looting and mismanagement of COVID-19 funds
  ● Response: Review the COVAX program and the global effort to effectively distribute vaccines via a multi-organizational campaign

Information Gaps

Claims have resurfaced regarding the need to detox from the COVID spike protein, whether it was received via the virus itself or the vaccine. An opinion editorial from a U.S. media outlet dated December 23, 2021 has been picked up traction in African social media over the last week stating that the dangerous spike proteins in your body from COVID-19 can “circulate in your body after infection or injection, causing damage to cells, tissues, and organs.” This has been shared alongside potential herbal remedies to adequately “detox” the body of the spike proteins. While there is some literature debunking this claim, it is primarily U.S. based with little content in African media addressing the need to detoxify.
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A new subvariant “stealth Omicron”
Last week, Viral Facts addressed the new subvariant of Omicron “stealth Omicron” to provide accurate details and fill the information gap. The content was met with more negativity than previous Viral Facts production but that still highlights engagement. There is media exhaustion and news of additional variants or subvariants can drive frustration in terms of knowing when the pandemic ends, but responses and comments were highlighting actual statements from the content. There were 8k+ views, 150+ comments, and 200+ showing the impact of timely and topical content.

Is it unusual to get a booster vaccination?
Additionally, Viral Facts addressed the confusion around needing a booster vaccine, particularly in relation to other vaccines. The video received 3k+ likes, 350+ comments, and 300+ shares. This video has also received more negativity than most Viral Facts posts shared on WHO AFRO’s pages, however there were multiple questions regarding where individuals can find a booster or what impact different branded boosters may have if mixed with the first rounds of the vaccines.
Methodology

The social media listening process relies on a split of social media analysis conducted for French, English and Lusophone speaking countries. The social media analysis for French-speaking countries is conducted by the AIRA Infodemic Manager Consultant based in Guinea, the one for Lusophone speaking countries by the AIRA Infodemic Manager Consultant based in Angola, and the one for English speaking countries by a WHO AFRO social media officer.

The final report is a combination of the three analyses and recommendations. The shift from a social media listening monitoring conducted by only one person for the whole African region into a combined one based on the analysis conducted by three different people may result in a less detailed and exhaustive report.

Engagements, otherwise known as interactions, refer to the number of likes, comments, reactions, and re-shares on a post. This is not a perfect measure of engagement:

- Some may have seen the post and chosen not to interact with it;
- Commenting on or re-sharing a post may constitute a more meaningful form of engagement than simply reacting to it;
- We are not systematically distinguishing between the types of responses that each engagement generates (e.g. while a post may contain misinformation, people may be countering/ debunking it in the comments).

We seek to mitigate these limitations by:

- Scanning comments and monitoring reactions to qualitatively evaluate responses to each post;
- Assessing the velocity of a post (i.e. how fast is it obtaining reactions, likes, shares) and the re-emergence of specific themes;
- Identifying whether the post is shared across a variety of platforms and sources (broad engagement), or simply soliciting a high level of attention within a given community/ platform (siloed engagement).
The monitoring reports are produced using NewsWhip Analytics, TweetDeck, Crowdtangle, Google Trends, UNICEF Talkwalker dashboards as well as the WHO EPI-WIN weekly infodemic insight reports and WHO EARS platform. As a result, data may be biased towards data emerging from formal news outlets/official social media pages and does not incorporate content circulating on closed platforms (e.g. Whatsapp) or groups (e.g. private Facebook groups). We also rely on our fact-checking partners, who provide invaluable insights into relevant national and regional trends or content, as well as country-level reports, including the South Africa Social Listening Weekly Report and the Mali Social Listening Weekly Report.

In producing these summaries and recommendations, we have consulted community feedback survey reports, as well as monitoring and recommendations from AIRA partners. We also draw from WHO EPI-WIN weekly reports and UNICEF monthly reports to formulate recommendations. As we produce more content, we seek to triangulate and corroborate information across these groups to strengthen our infodemic response.

Our commercial social listening tools include:

![Crowdtangle](https://example.com/crowdtangle.png) ![NewsWhip](https://example.com/newswhip.png) ![TweetDeck](https://example.com/tweetdeck.png) ![Talkwalker](https://example.com/talkwalker.png)

WHO social listening tools:

![COVID-19 Infodemic Insight Report](https://example.com/covid-19-infodemic-insight-report.png) ![EARS Early AI-supported Response with Social Listening](https://example.com/ears-social-listening.png)