

Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report
July 12 (Weekly Brief #29 of 2022)



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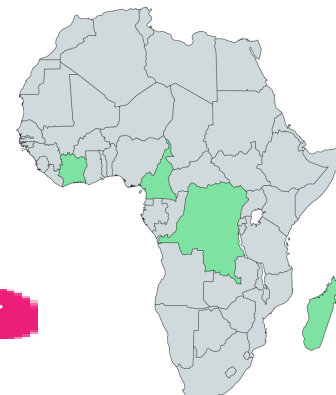
Public Health Infodemic Trends in the African Region

This report seeks to communicate operational recommendations based on social media monitoring from July 2 - 8, 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.



COVID-19 Vaccines Cause Infertility

CONTEXT: A recent [publication](#) found that COVID-19 vaccines can lead to temporarily impaired semen concentration and total motile count following a study with participants from sperm donation banks.



Cameroon, Ivory Coast, Democratic Republic of Congo, Madagascar

- Though the publication does state that the COVID-19 vaccination temporarily impairs semen concentration and total motile count, it also states that, the **“long-term prognosis is good”** for patients to return to their original status level of production. In all the misinformation claims citing this report found in monitored channels, this has been omitted from the shared posts and subsequent discussions.
- This narrative has been shared on Twitter and Facebook, but it was predominately found in French conversations within social messaging apps (WhatsApp ~80%, Telegram ~20%) over the last two weeks.

Why is it concerning?

- Infertility caused by COVID-19 vaccination has been a persistent rumor in African online communities for over a year and it is compounded with a general concern that can be found across Africa of infertility caused by any sort of even routine vaccinations.
- This narrative built on scientific findings taken out of context will likely register a significant audience and will bolster previous beliefs of permanent infertility caused by the vaccine.

What can we do?

- Address this quickly, as this narrative will likely resonate quickly and root itself in the information environment without adequate debunking in place.

Wiley
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Library



Andrology / Accepted Articles

ORIGINAL ARTICLE | [Free Access](#)

Covid-19 vaccination BNT162b2 temporarily impairs semen concentration and total motile count among semen donors

Itai Gat [✉](#), Alon Kedem, Michal Dviri, Ana Umanski, Matan Levi, Ariel Hourvitz, Micha Baum

First published: 17 June 2022

<https://doi.org/10.1111/andr.13209>

[Dr. Simon / 19/06/2022 / EN]

NOUVELLE ÉTUDE : La vaccination augmente l'infertilité chez les hommes.

Cette étude israélienne montre une réduction significative de la mobilité des spermatozoïdes (~20%) chez les jeunes hommes plusieurs mois (!!!) après avoir reçu leur vaccin BioNTech.

Même si les chercheurs ont déclaré que le "pronostic à long terme reste bon", la prétendue "guérison" ne résulte pas clairement des données disponibles.

<https://onlinelibrary.wiley.com/doi/10.1111/andr.13209>



Vaccinated are More Contagious than Un-Vaccinated

CONTEXT: A claim stemming from data allegedly released from a study conducted in Iceland and the *New England Journal of Medicine* has taken the findings out of context to conclude that vaccinated individuals are more contagious for a longer period of time as compared to un-vaccinated.



Nigeria, South Africa

- This claim references data sources that were allegedly derived from a [New England Journal of Medicine](#) article, though the findings are misrepresented and also taken out of context of the results of the documented experiment. The article states, “Although vaccination has been shown to reduce the incidence of infection and the severity of disease, we did not find large differences in the median duration of viral shedding among participants who were unvaccinated, those who were vaccinated but not boosted, and those who were vaccinated and boosted.” However, the claim that vaccinated individuals are more contagious than un-vaccinated is not representative of the study. The misinformation narrative includes these claims:
 - “The amount of infections increased with the administration of the booster shot.”
 - “People who are boosted recover significantly more slowly from Covid and remain contagious for longer than people who are not vaccinated at all.”
 - “At five days post-infection, less than 25 percent of unvaccinated people were still contagious, whereas around 70 percent of boosted people were still carrying viable virus particles. At ten days post-infection, 31% boosted people were still contagious vs. 6% of the unvaccinated. “

Why is it concerning?

- Another cycle of vaccine-shedding narratives has emerged, highlighting the persistence of the rumor and evidence of a receptive audience to the narrative.

What can we do?

- Repost and republish previous debunking content related to vaccine shedding and look for additional channels of sharing accurate information in social messaging apps.



Marburg Virus in Ghana is a Scam

CONTEXT: The Marburg virus was detected in two individuals in Ghana last week, which has resulted in their death. Preliminary testing confirms the presence of the disease, though the WHO has stated further testing will be conducted on the two patients in the Institut Pasteur of Senegal.



Ghana

- Initial reactions to the reports of the Marburg disease in Ghana have been mixed, as many are claiming that the cases are being fabricated in order for the Ghanaian government to receive more donations to combat the spread that will go “unaccounted for” upon receipt. This was compounded following a BBC Hausa report that stated there is an “Ebola Marburg” outbreak in Ghana. Some online users claimed that this showed this was a fabricated outbreak:
 - “They don’t even know whci [sic] lie to use...COVID Ebola Marburg strain!”
 - “How do they know it is Marburg if they do not know what it is?”
- However, more recently Ghanaian users have shifted to a more serious tone, showing that there is growing acceptance of the presence of the Marburg disease within the country, with many users offering prayers to rid the country of the disease and others sharing warnings regarding the severity of the symptoms and ease of transmission.

Why is it concerning?

- COVID-19 and general public health concerns dominating the public media over the last two years have ramped up exhaustion and over-exposure to warnings and potential health risk information. Continuing to drive appropriate adherence to preventative measures and driving home the severity of the Marburg disease may present significant challenges that were not as prevalent pre-COVID.

What can we do?

- Provide clarity on Marburg as it relates to Ebola to mitigate confusion or skepticism about the new outbreak.
- Promote factual information on the severity of the disease and how it spreads from the original host to humans and subsequently from human to human.



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 vaccines 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: Will monkeypox vaccines be made readily available to African countries?

- Reports of North American and European countries promoting monkeypox vaccinations in their respective regions have led to speculation that African countries will receive fewer resources even though the disease has been endemic in multiple countries for years.
- WHO case numbers have been contradicted by some African public health officials who are stating that cases in the continent are often underreported and this can have a damaging effect on resource and vaccine allocation should Africa begin to face a significant uptick in cases in the coming months.



Help grow Viral Facts viewership! Follow and share Viral Facts on these social media forums:



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COVID-19 VFA content

- Routine childhood immunization [[LINK](#)]
- Flu & COVID vaccines [[LINK](#)]
- The XE variant [[LINK](#)]

Viral Facts Africa campaign to counter vaccine hesitancy

WHO in Africa has worked with the UK Government and Viral Facts Africa to create a new campaign to support Covid-19 vaccine demand across Africa. Building on the experience WHO and Viral Facts Africa have in countering the spread of health misinformation and disinformation in the African region, the UK Government has developed messaging based on insights and behavioral science expertise gained during the pandemic. These digital assets will help to build vaccine confidence by tackling the most prominent drivers of vaccine hesitancy and support Africa's recovery from the pandemic.

[Link](#) to have an overview of the produced assets / Links to download ([EN](#)/[FR](#))

Gavi resource pack to help build vaccine confidence

After a year of severe constraints, we are now in a situation where global COVID-19 vaccine supply is high enough to support equitable, full vaccination of all adult and adolescent populations globally. However, challenges remain – including that low-income countries (LICs) remain the furthest behind. To help build confidence among priority audiences in LICs, Gavi, the Vaccine Alliance has compiled a resource pack with articles, video content, and social media suggestions. You can view it [here](#). We encourage you to reference these materials in your external communications, including advocacy campaigns, newsletters, media talking points, social media outreach, and external events. Gavi will update the resource pack regularly, so you may wish to add it to your browser bookmarks.



Methodology

The social media listening process relies on a split of social media analyses 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 (siloes 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:



NEWSWHIP



TweetDeck



Talkwalker

WHO social listening tools:



Early AI-supported Response
with Social Listening