Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report 7-14 November 2022 (Weekly brief #47)

Public Health Infodemic Trends in the African Region

This weekly report provides key highlights and operational recommendations based on social media monitoring from November 7-14 in Eastern, Western and Southern Africa, as well as relevant information on current mis/disinformation.

Descriptions of online engagements and information gathering are listed in the <u>methodology</u>. For more information, please contact WHO AIRA team:

Rhys O'Neill oneillr@who.int Elodie Ho hoelodie@who.int Elsa Maria Karam karame@who.int

Key Misinformation Trends

Cholera vaccines are trivial for Malawians

Malawian citizens claim that the government's support to mitigate the Cholera outbreak shouldn't be a priority. But instead, the economic crisis including the fuel shortage and inflation, is paramount. <u>COVID-19 new</u> wave is no longer a threat

Claims about the increase of COVID-19 cases in Kenya and the DRC have garnered the attention of users who have believed the pandemic is now over. Donor Money can not save the Ebola response

Recent concerns over development partners' coordination with the Ugandan government over the Ebola response has garnered attention on social media. If you have Ebola, run away!

A confirmed Ebola patient who passed away in Jinja district, Eastern Uganda, has run away from another Ebola patient, his brother without seeking early treatment.

WHO criticism from online readers **Operational Recommendations**

Highlight the Cholera outbreak as a priority for all citizens and how adhering to public health and safety measures including vaccination will lead to a quick recovery and mitigation of the disease. Respond to information gaps by the public by clarifying that the pandemic is not over with the resurgence of cases and how adhering to public health safety measures is paramount.

Share updated messaging regarding the donor's contributions to the Ebola outbreak. Provide clear messaging around the importance of seeking early treatment at isolation centers and of self reporting Ebola-like symptoms to healthcare facilities.



helps you get fact-based Health information in Africa.

Facebook Twitter Instagram

Malawi, Uganda, Ghana, Kenya, DRC, Nigeria, South Sudan, Ethiopia, Rwanda

Cholera vaccines are trivial for Malawians

CONTEXT: Malawi received 2.9 Million doses of oral Cholera vaccines to support the Cholera outbreak response. Despite the fact that 214 people have already succumbed to Cholera in Malawi, online users on monitored Facebook pages consider it to be trivial.



Coverage: 3 posts, 471 likes, 190 comments

- 30% of screened comments on monitored <u>Facebook posts</u> have referred to a misinformation narrative around the donation of Cholera vaccines in Malawi. These comments have alluded to the triviality of the current donations and are likely considered secondary compared to Malawians' day-to-day struggles.
- Concerns were shared that efforts to manage the economic crisis including the fuel shortage in Malawi, have been overlooked based on the Cholera outbreak and the desire to inoculate people who are rather considered by the other impactful and pressing issues.
- □ Claims which reinforce this practice have also been shared on Facebook:

"Just waiting for <u>Maluzi</u> vaccine. This will be the best vaccine ever. Malawi must be a pilot country for Maluzi vaccination".

"The first thing that came into my mind after seeing the figure 2.9 million was fuel 😎, but I don't have a car 😂, cholera yomweyo 🤣" "Our <u>bodies</u> will be just like a drugstore 🤣 🤣 makatemela achuluka"

The user questions the government why spend money on vaccination while there are other pressing issues.

In a Facebook <u>post</u> from Spark TV, a Ugandan channel, online users have responded to the Malawian news update with a similar approach to the Ebola outbreak. In fact, users have displayed a belief that government officials will try to find a way to increase profit by bringing Cholera into Uganda. □ In a <u>Facebook</u> post from Adom TV, a Ghanaian Channel, the presenter talks about an alarming behavior. In fact, Dambai residents in Ghana continue to adopt harmful behaviors (open defecation and urination in the river) without knowing the immediate health repercussions on their lives.

Why is it concerning?

- Even when Cholera vaccines are provided, there is little concern visible in the public narrative around the disease. It is concerning that such a large share of individuals believe that Cholera doesn't pose a threat to the lives of Malawians.
- This can lead to decreased intentions to comply with health measures, particularly with people who believe that there are other pressing issues that might harm their lives.
- It's important to understand and unpack the existing behaviors of communities that exacerbate the spread of Cholera. Addressing the complex nature of these practices is essential to decrease the spread of Cholera.

What can we do?

- Revisit the way Cholera continues to infect individuals, and how harmful behaviors continue to increase the number of patients admitted to the hospital.
- Highlight how vaccination can help slow and eliminate new waves or surges of the disease.

DRC, Kenya

COVID-19 is no longer a threat

CONTEXT: Over the last week, conversations around the spread of COVID-19 in Kenya and DRC have reemerged. The recent shift in media attention to cover the new increase in cases has awakened online users to the persistence of the pandemic.

Coverage: 2117 likes, 727 comments, 27 shares

 Multiple narratives from Kenyan online users have been screened on a monitored Facebook <u>post</u> around the increase of COVID-19 cases this past week. The re-emergence of COVID-19 cases has been met with surprise and criticism at the same time, mostly, comments about the government requesting more international funds, and other comments displaying the users' surprise about the persistence of the virus, thinking it is now long gone.

- Kenyan users have focused on multiple narratives including the triviality of the seventh wave of COVID-19, the importance of daily struggles, and the African strength to combat the disease vs the world.
- Similarly, an online newspaper in Kinshasa called Pepele News, has also pointed out the increase in COVID-19 cases. 80% of online commentators claim the Congolese government has raised concerns over COVID-19 cases to distract citizens from the latest incidents in the North Kivu region.



 While Dr. Muyembe had already <u>declared</u> a month ago the end of COVID-19 in DRC, this information feeds the mistrust between people and science, but also with governmental authorities. The cornerstone of the COVID-19 fight and vaccine acceptance is a public trust.

Why is it concerning?

• Even when COVID-19 is mentioned, there is little concern visible in the public narrative. While it is promising that there is no longer panic around the disease, it is concerning that such a large share of individuals believe that COVID-19 no longer poses a threat.

What can we do?

- Address the conversation around COVID-19 to highlight that diminished conversations and interest do not equal a diminished threat or disinterest in safety measures.
- Reshare guidance and effective preventative measures previously adopted.

Uganda

Donor money can not save the Ebola response

CONTEXT: There is concern that the uncoordinated interventions between the donors and government may result in further spread of the Ebola virus.

Coverage: 773 likes, 117 comments, 38 Retweets

As reports of the Ebola outbreak are updated and shared via social media platforms, there is a serious concern, particularly from users and the Ugandan government about the Ebola response money.



□ Based on a sampling of 117 responses to the recent updates shared on Facebook, more than 35% of social media users (regarding posts shared in the last 48 hours from primarily based in Uganda) claim that the donor's money is chaotic and won't be channeled adequately to support the response. Around 50% of the commentators have linked this topic to a continuous misinformation narrative, that is the corruption of the government and the poor government response including failure of delivery and fake promises by the government to support Ugandans. Apart from being a political ploy, the Ebola outbreak is fueling the mistrust between all actors engaged to help Ugandan citizens.

□ Below are claims that support the above-mentioned narrative:

- "It is those donors who make these people keep us in lockdown because the always send money to these thugs whenever they lie to them"
-"Unfortunately even the opposition can't save this country anymore."
-"Please donors don't dare. Those people deserve to be in prison."

Why is it concerning?

• The coordination between donors and the Ugandan government is essential to implement the Ebola response in a timely manner and ensure the continuity of the response in all parts of the country.

What can we do?

• Accountability from donors and swift coordination with the government is needed at every stage of the response to gain credibility and trust with Ugandans who are readily interactive with Ebola news.

If you have Ebola, run away!

CONTEXT: A 45-year-old resident of Jinja District, Eastern Uganda, has been in contact with an Ebola case, his brother, who traveled from Kampala to Jinja in October before passing away on the 3rd of November. The spread of Ebola from Kampala to Jinja has sparked panic among online users.

Coverage: 1620 likes, 425 Retweets

□ Following the recent <u>identification</u> of an Ebola case in Jinja, Eastern Uganda, there were multiple citizens who displayed their panic due to the spread of cases to Eastern Uganda.



- Other online users have shared their recommendations to control the outbreak such as the implementation of a lockdown, initially disliked, the provision of free testing to healthcare workers, and the equipment of labs in different parts of the country with adequate materials for faster testing.
- More importantly, the most important concern spotted in the monitored tweet post by the Minister of Health is around the needed time to obtain diagnostic results following the tests administered to a patient with possible Ebola-like symptoms.
- □ The belief that there is no intentional effort from individuals to self-report themselves with Ebola symptoms and travel within different parts of Uganda, increases the likelihood of spreading the disease and shows that there is a high concern in stigma and a lower trust in medical treatment facilities.
- □ The inability to self-report is a concern that affects the individual, the obtainment of fast diagnostic results, and the wider community members.



Why is it concerning?

- There is a dwindling level of concern for the potential self-referral to Ebola Treatment Units as a method of treatment, especially as many citizens still believe that Ebola doesn't exist and there are no effective cures proven by healthcare and government professionals.
- While there have been Ebola explainers penetrating many online communities through the Ministry of Health's social media apps in Uganda, there are still information gaps surrounding the existence and spread of Ebola, and the stigmatization of Ebola patients among communities that need to be addressed.

What can we do?

- Revisit the way Ebola continues to infect individuals, and how self-reporting Ebola symptoms to healthcare professionals can help faster diagnosis, and treatment and decrease new waves or surges of the disease.
- Provide clarity on the healthcare procedures at Ebola Treatment Centers and the nature of the medications given during the outbreak.

WHO criticism from online readers:



Why is it concerning?

Following an article published by a Kenyan outlet called <u>Citizen TV</u>, WHO has been heavily criticized for its link of the Ebola outbreaks in Africa to climate change. The WHO is still a target of critics over its work in health emergencies. The call for corruption is suggested by many online readers to be attributed to WHO's work. The mistrust by online readers can lead the wider community to stay away from WHO guidelines and recommendations, most importantly distrust its purpose and values.

What can we do?

Debunk the fact through resharing the work between WHO, and developing partners on the ground to respond to the Ebola outbreak.

Persistent Rumors

Rumor: Ebola doesn't exist

• Response: Address the severity of the disease and explain the origins, symptoms, and ways of transmission (Viral Facts Response <u>here</u>)

Rumor: Ebola benefits the Ugandan government

• Response: Greater cooperation in public-facing messaging can help limit overall confusion

Information Gaps

Treatment

□ Is it better to self-medicate or report a suspected case of Ebola?

Symptoms

- □ How long does it take to diagnose a patient with Ebola?
- □ Is Ebola airborne?
- \Box How long does it take to have the results out?

General

- \Box Is the pandemic over?
- \Box Why is Ebola-related to climate change?
- □ Why is COVID-19 related to climate change?
- \Box Is the Ebola virus found in bats?