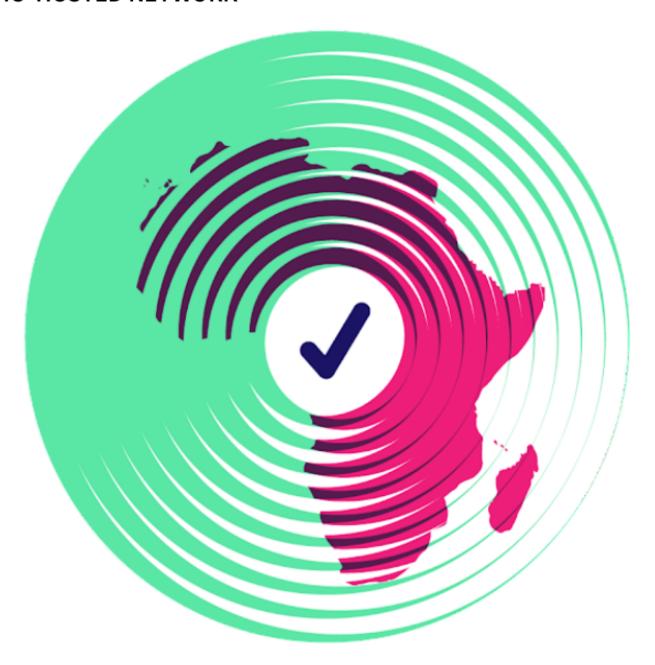
# Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report

24-31 October 2022 (Weekly brief #45)

# Public Health Infodemic Trends in the African Region

This weekly report provides key highlights and operational recommendations based on social media monitoring from October 24-31 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:

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# **Key Updates**

#Say No to Lockdown, No Ebola in Uganda

Ebola targets pupils at school

Nigerian Refugees brought cholera into Cameroon

Citizens continue to claim Ebola does not exist in Uganda, while others are speaking out against government enforced lockdown in Kampala. Citizens continue to claim that Ebola has penetrated schools on purpose to target Ugandan pupils. Citizens continue to blame the different governments for their management of the cholera outbreaks.

# **Operational Recommendations**

Increase the understanding of the length of lockdowns and how adhering to public health and safety measures will lead to the removal of lockdowns more quickly.

Provide clear messaging that debunks the claim around Ebola forcefully targeting children. Increased sharing can counteract rumors around the targeted cases.

Inform the public of weekly updates regarding the cholera situation in all counties to provide transparency and gain their trust through their trusted communication channels.

Viral Facts Africa helps you get fact-based Health information in Africa.

Facebook Twitter Instagram

# Uganda

# Anti-lockdown discussions in Kampala

**CONTEXT**: At least six children have been confirmed <u>positive for Ebola</u> in Rubaga district of Kampala, amidst a fear of lockdown measures in the capital. The "weak health system"- as cited by the Minister of Health- in Kassanda <u>has urged</u> the latter to increase the number of Ebola treatment units.



- Anti-Lockdown discussions were significantly higher over the last week in social messaging apps. 30% of screened comments in a monitored Ugandan Facebook post don't believe that a lockdown in Kampala is the solution to respond to the Ebola outbreak. These discussions referenced the lack of lockdowns in previous Ebola outbreaks in the region.
- ☐ The possibility of a lockdown in Kampala can potentially cause more <u>frustrations</u> and anxiety for Ugandans who are still facing challenging financial situations that worsened during the COVID-19 lockdown. ✓

Replying to @JaneRuth\_Aceng and @MinofHealthUG

THERE IS NO EBOLA. How it is not found in the refuges camps? How come there is no vaccination in Congo or Sudan as you claim to be the origin and how come Congo and Sudan have never had lockdown due to Ebola #stopkillingugandans #STOPKILLINGOURPEOPLE #STOPKILLINGOURCHILDREN #STOPKILLINGOURCHIL

- ☐ While the Uganda Medical Association(UMA) President, Dr. Samuel Oledo, had recommended a <u>lockdown</u> for Kampala on the 25th of October, the Minister of Information, Chris Baryomunsi, has <u>negated</u> the claim. The contradiction between the public officials underscores an inconsistent narrative for an audience that is readily interacting with Ebola-related news.
- Facebook users have garnered attention by suggesting that leaders should also lock themselves up. They shouldn't use lockdown measures as their first solutions to mitigate the spread of Ebola. Citizens are against the implementation of lockdown measures while claiming that lockdown in other districts did not lead to fewer cases.

The government claims that Ebola is "not getting out of hand in Uganda."
However, this statement has collected negative reactions on social media as
many have claimed otherwise. <u>People</u> still don't believe in the existence of the
Ebola virus and are unwilling to participate in precautionary measures <u>seriously</u>
such as the sensitization program created by KACITA (Kampala City Traders
Association).
Online users on social media apps have also stated "the <u>health system's</u>
struggles" in Kassanda based on ineffective government personnel and
response measures. They <u>blame</u> the Minister of Health for not adequately
supporting the Ebola response despite ongoing efforts by the Ugandan
government.

#### Why is it concerning?

- The pushback against governmental Ebola-related measures has been recurring
  in the past two weeks and based on the reaction to the claims, this narrative will
  continue to garner an audience for the next several weeks until lockdown
  measures are addressed.
- This can have a significant impact on overall public trust towards public health authorities throughout the Ebola outbreak. Citizens may be prone to ignore public health and safety measures leading to a significantly more challenging outbreak response in the coming weeks.
- Well-intentioned lockdown promotion in Kampala can remain ineffective, and could probably backfire because of the mistrust of the citizens towards the Ugandan government. This can lead to decreased intentions to conform to lockdown measures, particularly in people who are already hesitant.

#### What can we do?

• Increase the understanding of the length of lockdowns and how adhering to public health and safety measures will lead to the removal of lockdowns more quickly.

# Uganda

# Ebola targets pupils at schools

**CONTEXT**: Authorities are "following up" 170 contacts from different schools where the six infected children attend.

□ Through a monitored Facebook <u>post</u>, a claim that kids are being <u>targeted at</u>
 <u>schools</u> by Ebola virus has been circulating after the government's alleged plan
 to forcefully impose Ebola vaccination on children without the parent's approval.

 □ 70% of screened comments have mentioned that Ebola was put in schools

☐ 70% of screened comments have mentioned that Ebola was put in schools purposely to target and kill Ugandan children.

#### Why is it concerning?

- Contagion of the disease grows exponentially among children, which could lead to an increase in the negative rhetoric and overall buy-in around purposeful targeting the younger generation.
- Children getting Ebola may also drive up frustration towards the government and the Ebola response mechanism and lead to a more hostile environment for operational teams.
- While the government is still evaluating the efficacy of three vaccine candidates to treat Ebola, the students' anxiety is high as there can be perceived that there is no definite adequate preventative measure.

#### What can we do?

• Continue to share material that debunks the claim that children are being targeted with the disease.

# Cameroon, Kenya, DRC, Nigeria, Malawi, Ethiopia

# Nigerian Refugees brought Cholera into Cameroon

**CONTEXT:** Authorities in Cameroon say they are <u>struggling</u> to contain a cholera outbreak in an overcrowded refugee camp on its northern border with Nigeria.

<u>Coverage</u> of the five confirmed cholera cases in Kenya is being discussed on social media pages after the patients were hospitalized in Murang'a.

There are multiple <u>comments</u> that show the stigmatization of Nigerian refugees
in Cameroon, blaming them for bringing cholera.
Over the last week, coverage has declined in regard to the Nigerian
government's response to cholera. Rather, Online users on social messaging
apps, have expressed sentiments of $\underline{\text{empathy}}$ towards those who were affected
by the floods, and cholera in parts of Nigeria.
<u>Discussions</u> regarding cholera's outbreak in Kenya have resurfaced on social
media as many believe the cholera outbreak has been mismanaged by the
government, especially the management of water resources during the dry
season. Other comments were purposefully linked to the new president William
Ruto suggesting he is not efficient amidst the economic crisis leading to hunger
and use of polluted water.
A post on <u>Twitter</u> about the cholera outbreak in Malawi has garnered over 450
likes, and at least 100 retweets. Online users have expressed sadness regarding
the situation of cholera patients. The tweet cites how the power of social media
was able to help residents access donor visibility who in return provided a
cholera treatment camp in Nkhatabay.

#### Why is it concerning?

 Marginalized populations already face disproportionate social and economic exclusion. In some instances, the spread of misinformation targeting these groups, may lead to violence against them.

#### What can we do?

- Share communication materials about cholera adaptable to refugee settings with reference to local language.
- Explain current strategies of mitigation of cholera in the refugee settings.

#### **Persistent Rumors**

### Rumor: Vaccines contain mRNA which is leading to an increase in monkeypox

 Response: Vaccines provide protection against serious complications from COVID-19 and the new variants. (Viral Facts response <a href="here">here</a>)

## 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)

# **Information Gaps**

Ш	People are concerned about a foreseeable lockdown in Kampala. What
	happens if Kampala went on a lockdown? What does it mean for a
	business holder? And students enrolled at school presenting their exams?
	Will the school year be affected?
	After contracting Ebola, what happens when a patient is in isolation?
	What happens at the isolation center exactly? What's the process from
	entering the isolation unit?
	Is Ebola linked to western funds? Is Ebola now different from Ebola during
	the last outbreak in Uganda and different from the outbreak of DRC?
	Who benefits from Ebola? Is Ebola linked to colonization? Is Ebola linked
	to the oil business? What are the steps taken by contact tracers to trace
	Ebola contacts? Do the latter know what to expect?
	Is the Ebola disease related to COVID? Is Ebola sexually transmitted?
	What is the ultimate purpose of all of this? Is it to use Ugandans as lab
	rats for an experimental vaccine? Or Generate profit out of ebola?