Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report 10-16 March 2023 (Weekly brief #63)

Top Concerns

Misinformation about cholera emerges in **Mozambique**

Misinformation on alternative cholera treatments, cause of the outbreak surface amid the rising cholera cases in the country.

related to COVID-19 in Nigeria

Claims that diphtheria is The measles vaccine caused the outbreak in South Africa

Misinformation that the diphtheria disease is another form of the coronavirus disease has been spotted amid the outbreak in Nigeria.

Complaints about side effects and misinformation about the measles vaccine were raised in reviews of social media conversations in South Africa.

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Public Health Infodemic Trends in the African Region

This weekly report provides key highlights and operational recommendations based on social listening data from March 10-16 in Africa. For more information, please contact the WHO AIRA team: Elsa Maria Karam karame@who.int, Elodie Ho hoelodie@who.int

Mozambique

Misinformation about cholera emerges in Mozambique

CONTEXT: Reviews of secondary data and consultation with the health promotion WHO team in Mozambique, revealed misinformation amid the rising cholera outbreak in the country.

□ Low trust in local and health authorities.

<u>News</u> about 6 cholera deaths within the Janga community, located close to Nacala Porto, in Nampula province resulted in great confusion. Misinformation that the cholera outbreak was created by local authorities has incited local community members, especially youth, to attack, vandalize and then burn the residence of the village secretary, and his belongings. This news was shared on e-global, an online newspaper for Portuguese-speaking audiences.

The latest publication titled <u>Key considerations Socio-Behavioural Insight For</u> <u>Community-Centered Cholera Preparedness And Response In Mozambique</u>, 2023, by <u>SSHAP</u> also describes that some people blame healthcare worker for this outbreak and past ones, who intentionally brought cholera by poisoning communities through the distribution of "certeza" (water purification tablets).

□ Alternative treatment to cholera.

From the same publication, information about alternative providers and treatments has been shared by communities in Mozambique including traditional medical care ("curandeiros"). As an example, it was reported that men may attempt to treat cholera-like symptoms by drinking alcohol mixed with charcoal or soapy water.

Why is it concerning?

- Mistrust towards local authorities and healthcare workers is particularly troubling as misinformation over their role in spreading cholera has been met with violent behaviors against the authorities and healthcare workers.
- □ With the global shortage of OCV and in a context of low trust in public health authorities, some people might resort to self-medication and unproven cures to protect themselves against cholera and delay seeking appropriate medical care when sick.

What can we do?

- Create a two-way communication channel between cholera responders (authorities, healthcare workers) and community members to respond to cholera concerns about the oral cholera vaccine and the cholera origins.
- Engage with communities through trusted channels to elaborate and share key messages on the cause of cholera, how it spreads, and treatment options in local languages.

Nigeria

Claims that diphtheria disease is related to COVID-19 in

Nigeria

CONTEXT: Reviews of social media coverage in Nigeria revealed misinformation about diphtheria amid the outbreak.

Engagement: 6 posts, 1959 likes, 364 comments

- "Treatment of diphtheria" was the most searched term, with +200% new searches compared to the previous week. "Diphtheria - vaccine" comes as the second most searched term in Nigeria, with +50% searches compared to the past week.
- The number of Google searches about diphtheria in Nigeria was higher for the Northern states of Nigeria including Jigawa, Kebbi, and especially Kano where 61 <u>deaths</u> have been reported by the Kano State Case Manager, Dr. Salma Suwaid, during a webinar organized by the Nigeria Centre for Disease Control and Prevention with the theme 'Diptheria outbreak in Nigeria: Vaccination Response.'
- Online users who commented on a Facebook <u>post</u> by Channels Television, a leading 24-hour news channel broadcasting live from Lagos, have questioned whether diphtheria is another form of the coronavirus disease.
- □ The questions and statements by social media users are highlighted below:

Is this note Ebola symptoms?		
That's corona pro max		
Hope it's not another coronavirus		
Hope this one no be Corona in Kano form 🙄. God have mercy		
Coronavirus you guys should be specific		
No more covid		

□ The majority of children and adolescents between 2-14 years old are either unvaccinated against diphtheria or their vaccination status is unknown according to the figure below extracted from the <u>NCDC situation report</u> for epi week 05 2023.



Questions on Twitter about the mode of transmission include: "Is diphtheria sexually transmitted? Can diphtheria be transmitted via kissing an infected person?"

Why is it concerning?

□ Limited access to accurate information about diphtheria including its mode of transmission, and its immunization programs can lead communities to spread a lot of misinformation about the illness.

- □ The vaccination status is still low among children and adolescents in Kano which can hamper efforts in mitigating the spread of the disease.
- □ The COVID-19 pandemic has left its mark among communities that either display fear of the emergence of a new variant or attribute any disease to be related to the coronavirus. Pandemic fatigue can lead to lower compliance with healthcare measures and a lower perception of the risks that diphtheria causes.

What can we do?

- □ Collaborate with communities and health responders to design messages and lead discussions that will highlight the differences between COVID-19 and diphtheria disease including diagnosis, mode of transmission, and treatment.
- □ Engage with communities and facilitate access to accurate information about diphtheria and its causes in order to combat misinformation and promote effective prevention and treatment strategies. This could be done through awareness campaigns and door-to-door activities among families who can impact the vaccination status of the children.
- □ Collaborate with the <u>Kano State Ministry of Health</u> and trusted leaders in the region to promote vaccine effectiveness and risk factors of nil vaccination and incomplete vaccination among vulnerable populations including children and adolescents.
- Promote good hygiene practices in urban areas to prevent the spread of the disease as well as prompt reporting of any suspected cases to healthcare providers for diagnosis and treatment. The WHO diphtheria <u>fact sheet</u> can be used for reference.

South Africa

The measles vaccine caused the outbreak in South Africa

CONTEXT: The development of the measles outbreak in South Africa has led some social media users to spread misinformation about the measles vaccine saying that the vaccine caused the outbreak. Complaints were also raised about the side effects of the vaccine among children.

Engagement: 6 posts, 288 likes, 189 comments

 According to the <u>latest</u> epidemiological data provided by the National Institute for Communicable Diseases, measles outbreaks have now been declared in all provinces in South Africa except for the Eastern Cape. 721 cases have now been reported and 70% of cases were reported from primary healthcare facilities.

- □ The National Department of Health in South Africa <u>posted</u> on Facebook an update about the number of provinces affected by the measles outbreak and the number of confirmed cases.
- □ This update has garnered the interest of social media users as their comments display vaccine hesitancy, complaints about vaccine side effects, and belief that the measles vaccine caused the outbreak in South Africa.
- Below are some comments that highlight the users' beliefs:



Why is it concerning?

- Measles is a highly infectious disease and unvaccinated children can be at high risk of the disease and its complications, including death.
- Distrust in the government and global public health agencies can contribute to vaccine hesitancy and lead to low uptake of routine vaccinations.
- Measles vaccination is part of the routine childhood immunization program in South Africa. Persistent misinformation might deepen vaccine hesitancy, and then have a potential negative impact on children's health.

What can we do?

- Debunk misinformation related to vaccine causing measles to allow for accurate information to be part of the information ecosystem again including localized information on how to access routine immunization, vaccine schedules, common side effects, and effectiveness.
- Engage with trusted channels to co design messages and address questions about AEFIs and concerns around the measles vaccine to make the facts 'stickier' than any misinformation.

Debunk

Bill Gates responsible for new malaria vector in Kenya

- □ An <u>article</u> by the Nation Group, the largest independent media house in East and Central Africa with operations in print, broadcast, and digital media in Kenya, has fact-checked a disinformation narrative about the new malaria vector in Northern Kenya.
- □ The article debunked a conspiracy theory that Bill Gates is allegedly responsible for the new spread of the malaria vector shortly after his visit to Kenya in November 2022.
- □ Global conspiracy theories can affect public health interventions by reducing trust in global health agencies and public health officials making it less likely for individuals to follow health guidance and vaccination campaigns.
- □ It is also important to recognize that malaria is a serious public health issue in many African countries including Kenya, and efforts to combat the misinformation and conspiracy theories about the disease are essential for improving the health and well-being of affected people.

Information Gaps

The most common questions raised by social media users this week were about:

- Diphtheria diagnosis
- □ Cholera treatment
- $\hfill\square$ Measles vaccine and its side effects

Key resources

<u>cholera</u>

- <u>Social media toolkit</u> with all recent VIral Facts Videos on cholera: (ENG, FR).
- cholera outbreak response manual
- The cholera application on <u>iOS</u> and <u>Android</u>
- Global Task Force on cholera control <u>resources</u>
- Jingle to reduce cholera spread through WhatsApp and radio (produced by the Voice of Livingstonia in Mzuzu, Malawi, supported by <u>Developing Radio</u> <u>Partners</u>)
- Social Science in Humanitarian Action Platform

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, and 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, Crowdtangle, Google Trends, and UNICEF Talkwalker dashboards as well as the WHO EPI-WIN weekly infodemic insight reports and the 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.