Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK

AIRA Infodemic Trends Report
20-27 April 2023
(Weekly brief #69)
# Top trends

**COVID-19 misinformation and vaccine hesitancy circulating**
COVID-19 conversations in South Africa and Botswana revealed misinformation narratives about the WHO and comments from online users about vaccine hesitancy.

**Persistent trends**
Lack of access to safe water and sanitary conditions prevail amid cholera outbreaks.

Suspected cholera cases in Kakamega in Kenya.

---

# Quick Reference Guide

**COVID-19 misinformation and vaccine hesitancy circulating**..............................Pg. 3

**Persistent trends**
- Lack of access to safe water and sanitary conditions prevail amid cholera outbreaks........................................Pg. 7
- Suspected cholera cases in Kakamega in Kenya.................................................................Pg. 8

**Trends to watch**
- Misinformation about new virus “OBEA 022” in the DRC........................................Pg .9
- Rumors about cases of meningitis at a Malian hospital................................................Pg .9

**Key resources**.................................................................................................................Pg. 9
**Methodology**....................................................................................................................Pg. 10

---

# Public Health Infodemic Trends in the African Region

This weekly report provides key highlights and operational recommendations based on social listening data from April 20-27 in Africa.

For more information, please contact the WHO AIRA team:
Elsa Maria Karam karame@who.int, Elodie Ho hoelodie@who.int
COVID-19 misinformation and vaccine hesitancy circulating

**CONTEXT:** Following news about the inauguration of the mRNA technology hub facility at Afrigen, South Africa, local digital news agencies have shared the announcement on social media platforms. Misinformation about the WHO and comments about vaccine hesitancy have been monitored on Facebook posts in South Africa and Botswana.

**Engagement:** 17 posts, 577 likes, 300 comments

**South Africa**

- South African Broadcasting Corporation, a 24-hour local broadcasting network, shared two Facebook posts [LINK, LINK] about the official launch. Claims that the WHO gains profit from the COVID-19 pandemic was shared alongside claims that promote COVID-19 vaccine hesitancy and inefficacy.

- Below is a snapshot of some of the users’ comments:

  - The evil and corrupt tentacles of WHO and its profit-seeking death slurry have officially arrived!
  - This organisation is ran by the devils
  - Vaccines are killing and is wack
  - Eish... since vaccine does one no longer function properly as use too.
  - Another virus pandemic is coming to South Africa.
  - For who? Who's gonna be given that poison? Useless Medicine 🕷️ ><
  - Who needs those vaccines?? Why force them on people?? Unless its poison

- The rejection of COVID-19 vaccines has also been monitored in another Facebook post shared by eNCA, South Africa’s most-watched 24-hour news service. The post called online users’ attention to a South African anti-vaxxer group called Freedom Alliance of South Africa (FASA). The post explained how FASA filed court papers on March 23rd to the high court of Pretoria in South Africa and called for an urgent judicial review of “Pfizer’s mRNA COVID vaccine products” arguing these are “unsafe and ineffective” and that “the authorisation was irrational and unlawful”.

---

**South Africa, Botswana**
An expert in constitutional law has pointed out in the video that there are several significant inconsistencies in the application, which greatly reduces its chances of making it to court.

Doctor Aseem Malhotra, a leading anti-vax UK cardiologist, drove significant engagement on his twitter page (5.7M views) about FASA’s appeal to the High Court of South Africa on Twitter [LINK, LINK]. He also called for a “complete suspension of Pfizer’s vaccine products because evidence suggests harms are considerable and the benefits are close to negligible”.

While he has a significant following in the UK and internationally, he has started to gain a strong presence in South Africa in 2023 especially for health-related policies and practices [LINK].

Below is a snapshot of users’ comments on Dr. Aseem’s tweets:

- Maybe courts in other countries outside the US will bring justice.
- Push on Dr Assem, South Africa has had so much stolen from it, been used and abused by the west, it’s a source of hope and inspiration and always has been, it deserves a way forward with this, these deeply troublesome companies need to be held to account, can’t under estimate the potential of sought Africa on this challenge!!❤️🔥
- corona was scam made by capitalists
- One more small step towards the end of these pseudo-vaccines that have never had the slightest efficacy

The most prevalent comments on eNCA’s Facebook post displayed misinformed views about the limited effectiveness of the vaccine. Online users are opposed to the rollout of vaccines because of claims of “increase in heart conditions” following COVID-19 mRNA vaccines, and claims that vaccines are poisonous. The comments below show some of the users’ reactions:
Botswana

Following a press release by the government of Botswana about the invitation to participate in Africa vaccination week (AVW) from the 24th to the 28th of April, 22% of online users displayed a sentiment of frustration with regards to getting vaccinated.

While a low share of online users commented on a post by the Ministry of Health in Botswana about AVW, users have expressed their mistrust of local health authorities and the World Health Organisation with mentions of conspiracy theories about vaccination leading to the depopulation of Africa. The comments below show some of the users’ reactions:
Some users highlighted vaccine shortage in public health facilities and questioned the credibility of the Ministry of Health in providing adequate vaccines.

Why is it concerning?

- While conspiracy theories are prevalent among South African online users, it is concerning that international audiences and anti-vax groups have a significant impact on the effectiveness and adoption of vaccines particularly in narratives about vaccines in Africa.
- If the appeal by South Africa’s anti vax group, FASA, is reviewed by South Africa’s judicial court in the upcoming months, this could have international implications for pharmaceutical companies, the local health authorities and international and African audiences regarding the credibility of vaccine efficacy across Africa.
- If misinformation and vaccine hesitancy narratives begin to spread before Africa vaccination week, it could impact scheduled vaccinations during the campaign.

What can we do?

- Acutely monitor vaccine narratives ahead of Africa Vaccination Week to address potential concerns, questions from individuals around types of vaccines administered, their side effects, availability in health facilities and efficacy in protecting from disease. It is also important to work closely with local media agencies (including broadcast media) to respond to any information gaps that might arise.
- Use VFA and specific WHO AFRO social media toolkits about vaccine preventable diseases including polio, measles, cholera, COVID-19 during Africa vaccination week. [WHO]
- Work with influential leaders and healthcare authorities to counter misinformation about COVID-19 vaccines while continuing to monitor any developments about FASA’s appeal to the high court of South Africa.
Persistent trends

Lack of access to safe water and sanitary conditions continue amid cholera outbreaks

**Cameroon**

- The Ministry of Health in Cameroon posted on Facebook on April 19th that the central region of Cameroon has been experiencing an uptick in cholera cases for four weeks.

- Cameroon Radio Television, the national television channel in Cameroon, shared a press release by Camwater, the Cameroon Water Utilities Corporation, on Facebook, detailing the measures taken by the company to safeguard the quality of water distributed to communities.

- Online users who commented on the Facebook post revealed concerns over the unavailability of safe water and poor sanitation measures.

- Below are some comments from social media users. Two comments were translated from French into English.

  - A Facebook post about the spread of cholera in Cameroon shared by BBC News Afrique asks two questions to the general audience: “What can explain the almost permanent presence of [cholera] in Africa, including in the capitals? What measures should the authorities take to eradicate it?” According to online users, the key barriers that further spread cholera are listed below:
- The negligence of the populations to follow the hygienic rules (6 responses)
- The lack of disease awareness by local health authorities (3 responses)
- Overcrowding (2 responses)
- Lack of access to safe water (2 responses)
- Household waste management (1 response)

**Tanzania**

- Azam Media Ltd, a Tanzanian media company that offers both local and international channels with more than 2M followers on its Facebook page, shared a post on April 25th about the situation of cholera in Dar es Salaam, the capital of Tanzania.

- Online users commented that unsanitary conditions in the city demand attention and that individuals should ensure the cleanliness of food by implementing proper hygiene measures. Below are some comments from social media users.

```
Dar es Salaam is very dirty. Let us not hide the truth. Dar es Salaam is so dirty to an extent that the trenches of dirty water are just sitting idle. Only God is protecting us.

In the shade because there is like in the valley, they are planting vegetables and people are not washing well.

With this rain in Dar es Salaam, many diseases will arise because it is very dirty.

The environment in Dsm is very dirty.

Due to the dirtiness of that city, this whirlwind and rains are a must.

I am surprised in Buguruni. When it rains, the diseases must come out. The dirt of the chambers mixed with those of drinking water. Rainwater mixes dawasco and sewage piping structures at the same time. And they often burst
```

**Suspected cholera cases in Kakamega in Kenya**

- Kenya Television Network news, a 24/7 breaking news channel operated by the Standard Group, shared a Facebook post about a “mysterious disease with cholera-like symptoms” in Shinyalu, Kakamega in Western Kenya. Three people have died and ten were hospitalized in different health facilities.

- The video shows locals have been avoiding seeking medical support from healthcare workers.

- The video gives additional context about residents in neighboring Eregi girls high school, a boarding school in Kakamega county, who expressed their fear over the spread of cholera to students and to the neighboring community. The
effluent flows outside the school into neighboring farms and risks mixing with water sources that serve locals.

Trends to watch

Misinformation about new virus “OBEA 022” in the DRC

- A press release is being circulated on WhatsApp groups in the Democratic Republic of Congo about a new disease caused by the “OBEA 022” virus.
- The press release shares misinformation about the existence of the virus, and falsely claims WHO France conducted a survey on the prevalence of a disease between April and May of 2022.
- The press release does not state any symptoms or preventive measures to follow but invites readers to maintain vigilance and remain calm.

Rumors about cases of meningitis at a Malian hospital

- A journalist recently conducted an interview with the director of Gabriel Toure University Hospital in Bamako, Mali regarding rumors circulating on social media about multiple cases of meningitis at the hospital's pediatric department. In response, the director refuted the claims and denied any outbreak.
- This information was subsequently shared by the Minister of Health, Diéminatou Sangaré, who applauded the Ministry of Health and Social Development for their dedicated service to the people of Mali.

Key resources

Cholera

- Social media toolkit with all recent Viral Facts videos on cholera: (ENG, FR).
- Global Task Force on cholera control resources
- Social, behavioral and community dynamics related to the cholera outbreak in Malawi / RCCE Collective Service in the East and Southern Africa Region.
- Cholera outbreaks Q&A (WHO)
- Cholera question bank, the collective service/Social science in humanitarian action platform
COVID-19

- Social media toolkit with all recent Viral Facts videos on COVID-19 (ENG, FR).
- Behavioral considerations for acceptance and uptake of COVID-19 vaccines
- COVID-19 Behavioral Needs Assessment on Vaccine Uptake, Routine Immunization, and Maternal Newborn Child Health Services, UNICEF ESARO

Methodology

The social media listening process relies on a combination 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.