Africa Infodemic Response Alliance

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AIRA Infodemic Trends Report 8-12 June 2023 (Weekly brief #75)

Top trends

Cholera outbreak in South Africa

Frustration and lack of trust in local and healthcare authorities prevail in comments of social media users amidst the ongoing cholera outbreak.

<u>COVID-19 infections in Kenya and</u> <u>Uganda</u>

Recent articles on the reemergence of COVID-19 cases in Uganda and Kenya opened the door for speculations about its existence but also to international references about the adverse side effects of COVID-19 vaccines.

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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 June 8-12 in Africa. For more information, please contact the WHO AIRA team: Elsa Maria Karam <u>karame@who.int</u>, Elodie Ho <u>hoelodie@who.int</u>

Cholera outbreak in South Africa

CONTEXT: Frustration and lack of trust in local and healthcare authorities remain prominent in comments of social media users amidst the ongoing cholera outbreak. **Engagement: 40 posts, 3.5k likes, 1.8k comments**

- □ Frustration and distrust towards local and healthcare authorities have been prevalent on Facebook, Twitter, and TikTok since June 7th.
- □ These sentiments have been amplified by the recent news coverage of South African President Cyril Ramaphosa's <u>visit</u> on June 8th to the Hammanskraal, the epicenter of the cholera outbreak. The president highlighted <u>maintenance</u> challenges of the Rooiwal wastewater plant, one of the water treatment plants part of Tshwane.
- In comments on posts by local news outlets such as <u>SABC news</u>, <u>Newzroom</u> <u>Afrika</u>, and <u>eNCA News</u>, social media users expressed their frustration regarding the way local authorities have been handling the outbreak. This theme of discontent has persisted since the initial outbreak began on <u>May 21st</u>.
- Comments on a Facebook post by eNCA (eNews Channel Africa), a 24-hour news channel based in South Africa with 3M followers, express online users' concerns and frustrations regarding the actions of local authorities. Below are some comments:

The ANC has failed SA!! Everything, municipality, metro, govt dept, SOE mismanaged by the ANC is an abject failure!!! Should there be a class suit and the plaintiff wins with a payout it's not the ANC or any ANC cadre who pays it but the taxpayer!!!

for 20 years they failed....time to vote that is the only reason he said what he said. he doesnt care nor does the anc. their soul perpose is to steal as much as they can

Failed not only in Hammanskraal, but the WHOLE COUNTRY TOO!!!

- □ The alleged lack of treatment received at healthcare facilities, particularly at Jubilee District Hospital in Hammanskraal, has become a significant concern among online users. A resident expressed his frustration through a video posted by Newzroom Afrika on Facebook on June 8th. This has also been highlighted in a previous report by AIRA.
- A TikTok video posted by CapeTalk, a prominent commercial talk radio station located in Cape Town, gained significant attention from online users. Many users expressed the belief that the President seemed disconnected from the realities on the ground in local communities. Furthermore, some users placed blame on local authorities, questioning their awareness and response to the ongoing disease outbreak. These comments reflect the continuous frustrations of online users shared across multiple platforms. Below are some comments:

He shocked because he has no cooking clue, what's going on in the community

I've heard rumors that the authorities have known for 2 years already

He's always shocked. They have not maintained anything since they were put into power

I feel our President is completely out of touch what is happening on the ground

Why is it concerning?

- □ The prevailing narrative among South African commentators revolves around assigning blame to local authorities, with no discernible signs of a shift in this sentiment thus far. This narrative is concerning as it may lead citizens to oversimplify complex health issues and solely hold local authorities accountable for any outbreak while inhibiting a comprehensive understanding of its root causes.
- The dissatisfaction and frustration visible on social media platforms can further deepen the lack of trust in health and local authorities should the cholera outbreak extend to other regions of South Africa. This is concerning because social media commentators can exacerbate feelings of helplessness among community members, and these conversations can devolve into the rapid spread of misinformation and rumors about the way authorities handle the outbreak.

Comments about the lack of trust can shift the attention of online users from asking the right questions regarding the outbreak (including information about the disease, effective steps put in place to curb its spread, etc).

What can we do?

- Addressing the lack of trust in public health interventions requires a multifaceted approach aimed at rebuilding confidence and fostering transparency. Some useful interventions include:
 - Providing clear, timely, and consistent information about the plan to mitigate cholera in South Africa.
 - Engaging in dialogues with communities in Hammanskraal to address their concerns about healthcare facilities and the source of the outbreak.
 - Disseminating credible information about the work of health care providers in cholera treatment centers and hospitals to demonstrate quality, accessibility, and equity in the delivery of healthcare services.

Kenya, Uganda

COVID-19 infections in Kenya and Uganda

CONTEXT: Recent articles on the re-emergence of COVID-19 cases in Kenya and the infection of Ugandan President Yoweri Museveni with COVID-19 opened the door for speculations about the existence of the virus. The recent focus on COVID-19 has also spurned African social media users to highlight international references regarding claims on the adverse side effects of COVID-19 vaccines.

Engagement: 26 posts, 9.7k likes, 5k comments

Uganda

- While there is limited discourse questioning the efficacy of vaccines or the existence of COVID-19 on Facebook posts discussing President Museveni's COVID-19 positive status, it is worth noting that certain comments on social media posts have touched upon this narrative.
- For instance, on a Facebook post by 933 KFM, a prominent radio station in Kampala with 506k followers, a few comments raised doubts about whether COVID-19 was still a concern or if it had subsided. Below are a few comments:

But WHO declared recently that COVID is over. 🤧 🤧 🤧

heard of a commemoration for the millions who supposedly died in 2020 and 2021?Like they do for holocaust or 9/11 victims??

Covid is not over yet?

World Health organization declared on Covid-19. Willingly bill gates declared it was fraud just business. But because we have a president of 70s he think we can succumb to that.

Play another tune Dr Diana Atwine plz spare Ugandans

If he has tested positive now, what of the public at large? Is COVID 19 still a threat anyway?

While there are diverse online comments regarding the president's COVID-19 status, a few misinformed views have emerged on Facebook posts of <u>BBC</u>
<u>Swahili</u>, <u>NTV Uganda</u>, and other prominent pages. One example speculates that the president's new anti-homosexuality <u>legislation</u> is the reason why he is infected with COVID-19. Below are relevant comments:

Because he has opposed homosexuality that is why he has been infected with Covid. That is the stupidity of the white people.

U started looking 4 da way of making pipo to start suffering again i know ur planning to bring back lockdown now

The white people want to kill him

That's a plan to steal tax payers money, very soon we shall see ministry of health requesting for funds to fight COVID 19 yet the previous funds from donations and personal individual contributions have never been accounted for. **#Labisa**

Kenya

- A recent <u>article</u> by Nation Media Group, a leading independent media house in East and Central Africa, highlighted that Kenya is witnessing a "silent surge in the number of patients requiring oxygen, coinciding with a new wave of COVID-19."
- □ However, the response from online users on its Twitter <u>post</u> challenged this claim. Some expressed skepticism, questioning the sudden resurgence of the virus shortly after its emergency phase was declared to no longer be a threat.

 Other users have also highlighted that the sole objective is to encourage more people to get vaccinated as a preventive measure against the surge in COVID-19 cases. Below are some comments:

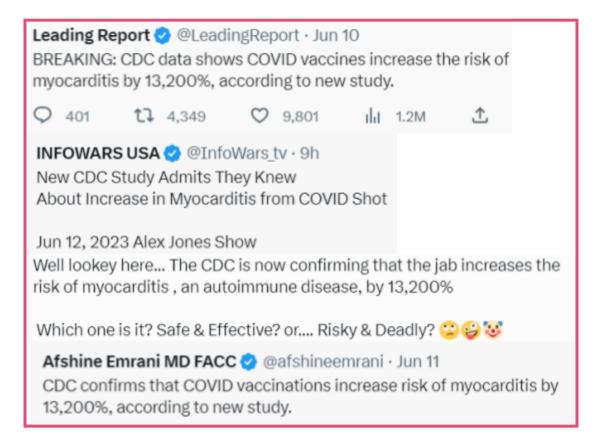
No way! Just a few weeks after covid was declared not to be a threat anymore? No, a scandal is loading!.

Another push for vaccinations is coming...beware guys

Another Covid Jab ??.

Stop lying to people there is no covid

- The article has been also shared on the twitter account of NTV Kenya, a TV station under the Nation Media Group's ownership. <u>One</u> of the online commentators referenced posts currently trending in the United States.
- □ In fact, multiple US-based private users, including a prominent conspiracy theorist <u>Alex Jones</u>, spoke out via Twitter that a new CDC <u>study</u> investigated the increased risk of myocarditis after mRNA-based COVID-19 vaccination. There is a concern that international anti-vax commentators could influence African anti-vax groups, leading to the dissemination of disinformation and misinformation that is tailored to local contexts.
- The study highlighted that the "review of vaccine safety data in the Vaccine Adverse Event Reporting System from December 2020–August 2021 found a small but increased risk of myocarditis after mRNA COVID-19 vaccines, and that this risk should be considered in the context of the benefits of COVID-19 vaccination." The publication dates back to January 2022, suggesting that some online users may not be adequately up to date with the latest scientific studies. Instead, there is a risk that they may be exploiting them for clickbait purposes during opportune times.
- □ This resurgence of the publication has prompted global online commentators and anti-vax groups to re-share the headline seen in the screenshot below, which might influence international audiences including African online users, as seen above. One of the <u>tweets</u> posted by US-based cardiologist Afshine Emrani garnered 1.6M views and 24.2 likes since the post was shared on June 11th.



Why is it concerning?

- The perception that COVID-19 is no longer a health concern is still prevalent among online users, as reflected in their comments. It suggests a potential lack of awareness or understanding regarding the ongoing challenges and risks associated with the virus.
- The proliferation of sensationalist headlines shared by international users, backed up by misrepresented or out of context scientific references from qualified health journals, poses an escalated risk that can adversely impact African social media users' knowledge base around COVID-19 and/or diseases.

What can we do?

- It is essential to continue promoting awareness and education about the ongoing risks and challenges posed by COVID-19 to ensure accurate understanding and appropriate measures are taken to safeguard public health.
- □ VFA social media toolkit on COVID-19 especially explaining COVID-19 no longer a PHEIC can be used. [ENG,FR]
- □ It is essential to approach information online critically and rely on the full content of scientific studies published by official health organizations to obtain accurate and comprehensive information about vaccine safety and efficacy.

<u>Managing Infodemics in the 21st Century</u> reviews the current discussions and skills relevant to infodemic management .

CDC clinical considerations and vaccine adverse events are found in the resource section. [LINK, LINK]

Key resources

<u>Cholera</u>

- 🗌 Cholera <u>social kit</u> VFA
- □ World Health Assembly: <u>Q&A cholera</u>
- □ <u>Call</u> for urgent and collective action to fight cholera
- □ Cholera emergency page
- □ Global Task Force on Cholera Control Cholera roadmap
- Africa Check: "Fact sheet, a disease nobody should die from"
- UMHO, Global strategic preparedness, readiness and response plan for cholera

COVID-19

- CDC, COVID-19 vaccination, adverse events
- CDC, Clinical considerations: Myocarditis after COVID-19 vaccines
- Social media toolkit with all recent Viral Facts videos on COVID-19 (ENG, FR).
- Social media toolkit with all recent Viral Facts videos on Myocarditis (ENG, FR)
- WHO, What's the difference between Public Health Emergency of International Concern (PHEIC) and pandemic?
- □ <u>WHO</u>, Preparedness and Resilience for emerging threats.
- Internews, Let's talk vaccines: A free course to help journalists translate the language of vaccines.
- □ <u>Internews</u>, Keeping the COVID-19 story on the news agenda

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.