Spotlight Report: Ivermectin

“World Ivermectin Day” Drives Questions on Potential for COVID-19 Treatment

A resurgence of claims on the effectiveness of ivermectin as a treatment for COVID-19 developed following online campaigning by the World Council for Health for World Ivermectin Day on July 29, 2023.

Public Health Infodemic Trends in the African Region

This weekly report provides key highlights and operational recommendations based on social listening data from 22-26 July in Africa.

For more information, please contact the WHO AIRA team:

Rhys O'Neill oneillr@who.int, Elodie Ho hoelodie@who.int
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The World Council for Health drove a campaign to celebrate World Ivermectin Day over the last several days that intended to promote the widespread uses of the drug as a treatment for diseases across the spectrum. The World Health Organization defines ivermectin as, “...a broad spectrum anti-parasitic agent, included in WHO essential medicines list for several parasitic diseases. It is used in the treatment of onchocerciasis (river blindness), strongyloidiasis, and other diseases caused by soil-transmitted helminthiasis. It is also used to treat scabies.”

However, the World Council for Health’s recent promotion of ivermectin day included an aggressive stance on the use of the drug as a treatment for COVID-19. Moreover, members of the council sparked a negative tone that was picked up in African social media environments, particularly following this statement, "For censoring & withholding safe low-cost medicines during Covid, we trust that justice will now take its course."

In African social media during the monitored period (July 27-31) comments reviewed containing the terms ivermectin, COVID, and treatment were overwhelmingly negative.

Sentiment towards not using Ivermectin as Treatment for COVID-19

Eastern and Southern Africa

- Positive: 79%
- Neutral: 11%
- Negative: 10%

West Africa

- Positive: 73%
- Neutral: 11%
- Negative: 16%
What is the World Council for Health?

The organization has a distinct focus on health-related issues, albeit often mired in misinformation and unproven medical claims. The World Council for Health also promotes its partner membership, one that is often in direct opposition to trusted and vetted public health agencies such as the WHO, IFRC, and UNICEF. Such partners include the 5g Virus Network (focused on electromagnetic field radiation), Australia Exits the WHO, and localresistance.org (anti-UN/WHO group). The World Council for Health has recently shared other concerning claims such as the WHO conspires to mandate medical treatments, or metabolic interventions that will combat cancer.

Why is it concerning?

Ivermectin has not been approved as an effective treatment for COVID-19 by the WHO to date, whereas the United States National Institutes of Health recommends against its use as the required dosage for proper efficacy would be “up to 100-fold higher than those approved for use in humans.”

Though the World Council for Health does not present reputable sources for its claims, its social media campaign strategy and overall presentation give the illusion it is a reputable public health organization. This was evident as the World Council for Health was a significant driver for negativity in African social media narratives for the monitored period.

Public health agencies have turned away from addressing COVID-19 material in the public space through 2023. The decline in accurate information has left a void for
anti-vaccine and alternative treatment voices to fill.

What can we do?

There is adequate guidance on ivermectin as a COVID-19 from reputable sources, but it has dropped out of circulation. This type of content needs to be recirculated and/or updated at least on an annual cycle as World Ivermectin Day coverage has increased from last year.

Current material on ivermectin from Viral Facts: [LINK, LINK, LINK]

WHO guidance on ivermectin as a treatment: [LINK]

Methodology

The social media listening process relies on various social media analyses conducted for French, English, and Lusophone-speaking countries.

Engagements, or 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 (silenced engagement).

The monitoring reports are produced using Meltwater, 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.