Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report 7-14 November 2023 (Weekly brief #96)

Top concerns

<u>Multiple challenges related to cholera</u> <u>outbreaks in Mozambique, Kenya and</u> <u>Malawi</u>

Anthrax outbreak in Zambia

Misinformation, disinformation and information gaps continue to hamper efforts to curb the cholera transmission in Malawi, Mozambique and Kenya. During the outbreak of anthrax, there are prevailing misconceptions, growing public concerns about the safety and quality of meat consumption and a lack of understanding of the disease.

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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 November 7-14 in Africa.

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Mozambique, Kenya, Malawi

Multiple challenges related to cholera outbreaks in

Mozambique, Kenya and Malawi

Engagement: 27 posts, 600K likes, 1098 comments

Social media commentary and situation at a glance

Mozambique

- Radio Mozambique [296K followers], the state-owned radio broadcaster in Mozambique, reported <u>misinformation and disinformation about the origin of</u> <u>cholera</u>. Gurue district members killed <u>a police officer, and injured four</u> <u>community leaders</u> for allegedly contributing to <u>the spread of cholera</u>. The secretary of state in Zambézia province, Cristina Mafumo, "repudiated" the waves of misinformation.
- □ Jornal Diario da Zambézia [57K followers], the daily newspaper of Zambézia province, shared a video in which community members <u>levelled accusations</u> against the <u>rapid intervention unit</u>. The residents claimed that their homes were set ablaze, and their belongings were looted due to a tumult of misinformation surrounding cholera.

Kenya

- Multiple Kenyan online news outlets including <u>Citizen TV Kenya</u>, <u>The Standard</u>
 <u>Digital</u>, and <u>the Star Kenya</u> covered the aftermath of flooding in several counties.
- As per a <u>situation report from the International Federation of Red Cross and Red</u> <u>Crescent Societies (IFRC</u>), a minimum of 70% of families in affected areas are displaced, with their homes either flooded, destroyed, or partially affected. The health hazards are escalating due to a shortage of clean water and widespread displacement, leading to the heightened risk of waterborne diseases like cholera. "There is an ongoing cholera outbreak response that overlaps with some of these areas. The infrastructure damage has led to reduced access to safe drinking water."

Malawi

Times 360 Malawi [651K followers] shared two Facebook posts emphasising the significance of cholera prevention measures. These included an appeal from the consumers association of Malawi to address <u>the unhygienic conditions in</u> <u>cities, town market and rivers</u>. Additionally, an appeal by the health office in Zomba district that <u>urges people against cooking food</u> in gatherings. This is due to unhygienic conditions when preparing public food.

Why is it concerning?

- As highlighted in an earlier <u>AIRA report</u>, misinformation about cholera in Zambezia province resulted in the death of a community supervisor. Violent encounters between authorities and community members may further escalate during the cholera outbreak. Communities affected by violence may experience heightened fear and anxiety. Individuals may become reluctant to engage with public services, and divert the attention of addressing the main concern: cholera.
- With heavy rainfalls due to the El Nino phenomenon, the health risks are increasing in <u>some parts of Kenya</u>. This includes the limited access to safe drinking water, increased breeding and exposure to vectors that transmit vector borne diseases.
- As per the Social Science in Humanitarian Action Platform (SSHAP), <u>adherence</u> to handwashing practices at crucial moments—such as before food preparation, <u>eating, feeding children —varies across geographical locations and</u> <u>socioeconomic levels in Malawi</u>. Handwashing rates range from 8% to 49% in the country. Approximately 10% of households in Malawi possess handwashing facilities at home. The utilisation of soaps and sanitizers depends on their availability; alternatively, collected water, both clean and unclean, is used, or no hand washing is done at all.

What can we do?

- Quickly addressing misinformation, especially when misinformation targets specific groups or individuals, could prevent an escalation of distrust and violence in communities. This can be done through identifying trusted community actors and reinforcing the engagement of trusted community members to identify, report and quickly address misinformation with fact-based messages could be one example of intervention.
- Adapt and involve communities in the design and sharing of health promotion and safe food practices messages in affected areas about water borne diseases prevention.

Anthrax outbreak in Zambia

Engagement: 25 posts, 9K likes, 1661 comments

Social media commentary and situation at a glance

- Social listening in Zambia revealed a predominant theme among online news agencies covering the anthrax outbreak. All outlets emphasised the <u>banning</u> and <u>destruction</u> of meat products, along with the <u>active discouragement of meat</u> <u>consumption</u> and the <u>killing of animals</u>.
- In an interview with Diamond TV Zambia [741k followers], a reporter highlighted a prevailing misconception, stating that there is a <u>belief that drying</u> <u>contaminated meat would eliminate the anthrax bacteria</u>. Furthermore, the reporter added that there are many information gaps about anthrax in communities.
- □ Growing public concerns about the safety and quality of meat consumption has had a considerable impact on livestock farmers, hampering livestock productivity. According to the Food and Agriculture Organization of the United Nations (FAO), "livestock contributes 42 percent of the agricultural sector's gross domestic product (GDP) and accounts for 50 percent of rural employment in Zambia".
- In an interview with Diamond TV Zambia, Dr. Mazyanga Mazaba Liwewe, the director of public health policy at the Zambia National Public Health Institute (ZNPHI), highlighted that anthrax is traditionally prevalent in the western province. However, anthrax in southern and eastern provinces is a shift in the geographic distribution of anthrax cases specifically affecting humans.

Why is it concerning?

- Anthrax is <u>endemic in western and north-western provinces of Zambia</u>. The zoonotic illness persists year-round and has adverse effects on both the livestock industry's economy and public health in Zambia.
- Disease control is a significant hurdle in livestock production, and one specific challenge is the prompt dissemination of public awareness about anthrax, particularly in areas where the risk is heightened. People in these regions might still be processing a substantial amount of information about anthrax and general updates from health authorities.

Misinformation around meat consumption may impact livelihoods of communities involved in livestock farming and may result in a lack of awareness about preventive measures, including vaccination programs for livestock or appropriate hygiene practices.

What can we do?

- Simplify and explain the benefits of <u>control protocols announced by the</u> <u>ministry of livestock and fisheries</u> including vaccination of livestock, decontamination of grave sites, sensitisation and awareness campaigns and heightened surveillance in all affected areas. Regular updates to both livestock farmers and the general public are essential to prevent the spread of misinformation at this stage of the disease.
- □ Collect and monitor misinformation about anthrax that might be circulating the most among the meat consumers, farmers, butchers, street vendors. This can be done through establishing hotlines or helplines, social listening and other community feedback mechanisms. The analysis of the data can inform the risk communication strategy and interventions. A <u>One Health approach</u> is critical and has proven to be successful against anthrax. Distributing printed educational materials in marketplaces and areas frequented by meat consumers can also be beneficial.

Trend to watch

Tanzania, Burkina Faso, Kenya, Gabon, Zambia, Mauritius, Madagascar

African online news agencies react to FDA-approved

Chikungunya vaccine

Engagement: 18 posts, 3K likes, 343 comments

- Several African online news agencies amplified the news regarding the approval of Ixchiq, <u>the first chikungunya vaccine</u>, approved by the U.S. Food and Drug Administration.
- Pwani FM, a prominent radio station with 130K followers situated in Kenya's coastal region, attracted the engagement of 12 commentators who subscribe to disinformation regarding the news suggesting that Bill Gates aims to decrease the global population.

Kenyans get prepared for it. The Americans lab.

Hemu leave us you whites, what is left is to kill us now.

That is the medicine that Bill Gate wants to reduce Africans with MRNA, so Kenyans let's be careful because it can be brought to schools and children will be forced to be injected.

After that, the second stage is Kenya because here there is nothing we refuse from the whites, drink light.

- Online users in Burkina Faso have <u>echoed similar disinformation</u> and expressed their scepticism.
- Online users in <u>Madagascar</u> fear COVID-19 side effects including stroke and cardiac arrest along with general vaccine hesitancy mentioning polio and COVID-19 vaccines. Below are some examples translated from Malagasy:

And the majority will do it again.... after 10 years the result will be clearly visible... even if it's seen now in the trial.... Stroke , in cardiac arrest . , etc....

When it comes to vaccine I don't put salt, it's just politics..., polio COVID 19, etc. but the same who did & didn't do the killing of chicken after vaccination is the best

! All kinds of vaccines are done now puff I wonder in which region of the body will this be affected? 🙄

Tanzanian users have resonated with the notion that the primary objective of Westerners is to "<u>make money in African countries</u>."

Key resources

<u>Cholera</u>

- □ <u>WHO</u>, cholera outbreaks, Q&A
- □ <u>VFA</u>, cholera social media toolkit
- Global Task Force on Cholera Control, clarifying rumours and community concerns.
- SSHAP, key considerations: socio behavioural insight for community- centred cholera preparedness and response in Mozambique, 2023
- SSHAP, social, behavioural and community dynamics related to the cholera outbreak in Malawi, 2022

<u>Anthrax</u>

- □ <u>WHO</u>, anthrax, Q&A
- □ <u>CDC</u>, anthrax in Zambia
- □ <u>WHO</u>, Guidelines for the surveillance and control of anthrax in humans and animals

<u>Chikungunya</u>

- □ <u>WHO</u>, chikungunya, fact sheet
- \Box <u>WHO</u>, guidelines for prevention and control of chikungunya fever

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.