## CouCOVID-19 Infodemic Trends in the African Region

This report seeks to communicate **operational recommendations** based on social media monitoring from October 9-15, as well as relevant information on current mis/disinformation.

Target countries include **Angola**, **Kenya**, **Nigeria**, **South Africa** (ENG), **Ivory Coast**, **Burkina Faso**, **Senegal**, **Democratic Republic of Congo** (DRC), **Mauritania**, **Mali**, **Mauritius** and **Niger** (FR). We have outlined what we mean by “engagements” and how we gather information in the methodology section at the end of this report.

**CONCERNING TRENDS**

* [Ongoing concerns around vaccine safety, vaccine confidence and side effects](#2ooduj83c0as)
* [Mandatory vaccination is generating debates](#avm5ny7i3qbs)
* [Privacy issues related to vaccine certificates](#o99th5esexzz)
* [SinoPharm second and third doses](#nzgtujl9029a)
* [Persistent headlines/misinformation/rumours on immunity boosters and/or COVID-19 cures](#923oe41ndkm9)

**TOPICS OF INTEREST**

* The upcoming seasonal flu campaigns at global level ([LINK](https://twitter.com/BernieSpofforth/status/1448567678281596928)), that may develop into potential discussions to be anticipated ([LINK](https://www.nytimes.com/2021/10/09/science/mrna-flu-vaccines.html))
* Concerning trends as children aged 12-17 are set to get coronavirus vaccinations in South Africa - vaccine hesitancy among parents increases [(LINK)](https://www.facebook.com/372037594410411/posts/390148582599312)
* Concerns regarding vaccine equity (WHO Infodemic Management Team - COVID-19 Infodemic Insight Report, Report #80, 06 - 12 October 2021): trending content that highlighted the comparatively low vaccination rates in resource-constrained countries and called for action generated engagement in [South Africa](https://twitter.com/News24/status/1447808007224627205). One [article](https://www.facebook.com/67334499441/posts/10158978071689442) from the French media outlet Radio France International received responses from users based across Africa arguing that the continent “does not want or need” the vaccine doses.
* POSITIVE TOPIC: Senegal has seen an increase in narratives related to domestic movement, with many posts about the Grand Magal de Touba event, and reports post-event showing a downturn in cases [here](https://twitter.com/LeMouridePost/status/1447629814790242317) and [here](https://twitter.com/kalimoulah221/status/1447606354613579776). In 2020, [WHO trained](https://www.who.int/about/accountability/results/who-results-report-2020-mtr/country-story/2020/safe-practices-during-the-pilgrimage-to-the-grand-magal-of-touba-in-senegal-during-the-covid-19-pandemic) religious leaders on preventative practices for COVID-19 to manage this event safety.

**POTENTIAL INFORMATION VOIDS (KEY QUESTIONS)**

* South Africa has seen a rise in narratives relating to personal measures and measures in public settings this week. Questions about vaccine safety for pregnant women, and for children in school, as well as questions about why COVID-19 measures are needed at public venues if only vaccinated people are allowed. Multiple posts including [here in relation to](https://twitter.com/Zaahelite1/status/1447620164313358356) new stadium rules, as well as people asking if the need for prolonged measures means there is no point in being vaccinated.

**TRENDS TO WATCH**

* COVID-19 Vaccine sentiment
  + Positive narrative sentiment towards COVID-19 vaccines has fallen slightly across the 6 EARS AFRO countries, from 31.4% the week prior, to 28% this week. While slight rises were seen in Senegal and Angola, Nigeria experienced a reduction on positive sentiment narratives from 43.7% to 28.9%.

**Ongoing concerns around vaccine safety, vaccine confidence and side effects**

**Where have we observed this trend?**

* **South Africa**:
  + This week’s South Africa Social Listening Collated Report notes vaccine effectiveness/vaccine hesitancy in conversations as follows:
    - “You should not take the flu and COVID-19 vaccines at the same time” ([LINK](https://www.facebook.com/122121361542/posts/10159764631986543))
    - “Are you already vaccinated (COVID)? Or still thinking?” - negative sentiment towards vaccination observed in the comments section ([LINK](https://www.facebook.com/238746020140194/posts/867783450569778))
    - “My dad got COVID again. He is fully vaxxed (Pfizer) & only experienced moderate symptoms”. negative sentiment towards vaccination observed in the comments section ([LINK](https://twitter.com/NalediSekoto/status/1447465447616663555))
* **Kenya**:
  + This week’s Kenya’s Social Listening Collated Report notes vaccine effectiveness/vaccine hesitancy in conversations as follows:
    - “Finland pauses use of Moderna COVID-19 vaccine in young men” ([LINK](https://www.facebook.com/261061365404/posts/10166067524165405))
    - “Woman Denied Kidney Transplant after Refusing to Take COVID-19 Vaccine” ([LINK](https://www.facebook.com/438216603021915/posts/2186433264866898))
* **Nigeria**:
  + This week’s Nigeria’s Social Listening Collated Report highlights the following article by Africa Check, including debunked misinformation and myths around COVID-19 taking the President’s statements as the conducting thread:
    - “Nigeria’s president's annual independence day speech on 1 October 2021, marking 61 years since the end of colonialism. We checked 10 of his claims, ranging from Covid-19 vaccines, water access, insecurity and infrastructure”. ([LINK)](https://www.facebook.com/484978191533810/posts/4706920692672851)
* **Ivory Coast**:
  + Despite the controversy over the side effects, Côte d'Ivoire continues to build up its stock of vaccines against COVID-19 and is multiplying communication campaigns to try to reverse the trend of reluctance to vaccinate against COVID-19 with solutions that are considered too recent and, above all, do not prevent the disease. ([LINK](https://www.koaci.com/article/2021/10/05/cote-divoire/sante/cote-divoire-malgre-les-controverses-129000-nouvelles-doses-de-vaccins-johnson-and-johnson-atterrissent-a-abidjan_154438.html))
* **Mali**:
* A video posted by an activist where a man who presents himself as a Malian living abroad and who attributed defamatory remarks to Malian politicians and health officials. He claims that these people all agree with him that vaccines are killing people therefore nobody should get vaccinated. The video has generated a lot of reactions on the web ([LINK](https://www.facebook.com/watch/?v=1046977126126498&ref=sharing)).

**Outside of target countries**:

* + Moderna vaccination pause in Finland (reported [here](https://www.facebook.com/261061365404/posts/10166067524165405))
  + The upcoming seasonal flu campaigns at global level ([LINK](https://twitter.com/BernieSpofforth/status/1448567678281596928)), that may develop into potential discussions to be anticipated ([LINK](https://www.nytimes.com/2021/10/09/science/mrna-flu-vaccines.html))
  + China’s coronavirus patients subject to abuse and bullying as new outbreaks emerge [(LINK)](https://www.thestar.com.my/aseanplus/aseanplus-news/2021/10/08/chinas-coronavirus-patients-subject-to-abuse-and-bullying-as-new-outbreaks-emerge)

**What can we do?**

* Enhance factual information sharing by encouraging people to **pause before sharing** social media content

↪ UN [Pledge to Pause](https://pledgetopause.org/) campaign, Viral Facts example [here](https://assets.fathm.co/s/PdwFmEgEXH1kGvoj/fi)

* Create clear, consistent messaging about vaccine developments and communicate often about what is known and unknown (from US-CDC J&J Rapid Report)
* Emphasize [**hopeful messages**](https://theconversation.com/covid-19-public-health-messages-have-been-all-over-the-place-but-researchers-know-how-to-do-better-150584) highlighting vaccines are crucial ending the pandemic
* Share solidarity messages around protective measure and safe behaviours, such as the ones circulated by the [UN’s Zwakala “I do it for you” campaign](https://www.dropbox.com/sh/wb35cr1df5oihtg/AABW2exDPExGngRxemaY66aca?dl=0)
* Expand content related to cases of myocarditis/ pericarditis after vaccination. Include information about the conditions, their seriousness, signs and symptoms, when to seek medical care, and what is known about who might be at increased risk (US-CDC SoVC Special Report Recommendation)
* Produce content explaining **why vaccines are considered safe and effective**

↪ Viral Facts example [here](https://twitter.com/WHOAFRO/status/1380085301641682945)

* Consider emphasizing that **rollout pauses are precautionary measures**. The fact that health institutions are transparent and implement them show that they are thorough. This could help reinforce rather than undermine trust

↪ Viral Facts example [here](https://twitter.com/viralfacts/status/1393079891533484033)

* Consider providing **country-specific vaccine safety information** based on the vaccine being disseminated nationally, particularly in relation to the AZ vaccine
* Produce video content **outlining ongoing monitoring and risk management processes** (*WHO EPI-WIN report recommendation)*

↪ Viral Facts example [here](https://twitter.com/viralfacts/status/1393178071876911105)

* Clarify **indicators of potential side effects** for people to watch out for and **how to respond**(*WHO EPI-WIN report recommendation)*

↪ Viral facts example [here](https://twitter.com/viralfacts/status/1369297394605654018)

* Produce content for journalists on Adverse Events Following Immunization (AEFI) reporting and best practices, including using non-scientific language that is clear and understandable
* Communicate clearly around the relationship between vaccines and changes in the menstrual cycle - include answers that address this misinformation in FAQ documents, call center scripts, and help chat-bots made available to the public

↪ Viral Facts example [here](https://twitter.com/viralfacts/status/1399266913142857731)

* **Continue to manage expectations around possible side effects**, underlining the safety profile of different vaccines and providing information on the systems public health practitioners use to investigate AEFIs (*UNICEF ESARO Feb recommendation)*
* Continue to advocate for trusted public figures and politicians to take the vaccine and provide correct information on vaccines safety, efficacy and rollouts
* Continue to encourage community engagement to address concerns as they arise, and continue to mobilize the healthcare worker community
* Ensure any of the above content is widely circulated and shared on **Facebook** and/or on any trusted communication channels. **Choose accepted and trusted organizations and messengers** to share the content, including **local** sources and unofficial channels

**WHO talking points and Q&A**

*Disclaimer: Kindly note that the following talking points and extracts are available on WHO platforms at the moment of the publication of this report. As the COVID-19 situation evolves some of the points listed below may be subject to updates or reviews. We recommend always check the WHO website for the latest updates.*

#### [***Are COVID-19 vaccines effective?***](https://www.afro.who.int/health-topics/coronavirus-covid-19/vaccines/qa#collapse4)

#### *Yes. Data from clinical trials and real life settings is showing that COVID-19 vaccines authorised for use are highly effective in protecting against severe illness and death from COVID-19. Ensuring the safety and quality of all vaccines is one of WHO’s highest priorities and WHO works closely with national authorities to ensure that global norms and standards are developed and implemented to assess the quality, safety and efficacy of vaccines.*

#### [***Which groups should be prioritized for vaccination?***](https://www.afro.who.int/health-topics/coronavirus-covid-19/vaccines/qa#collapse5)

*WHO recommends that those most at risk of severe illness, death and exposure to COVID-19 get vaccinated first. These include frontline health workers (especially those providing COVID-19 patient care), older people and those living with other diseases, or existing conditions including hypertension, diabetes, cardiovascular disease, HIV or cancer.*

#### [***Are some vaccines better than others?***](https://www.afro.who.int/health-topics/coronavirus-covid-19/vaccines/qa#collapse26)

*All the vaccines that have achieved WHO Emergency Use Listing are highly effective in preventing severe disease and death due to COVID-19. It is not possible to compare the efficacy estimates of different vaccines due to the different approaches taken in designing their respective studies, and the prevalent variants of the virus circulating at the time of the study. Take whichever WHO-approved vaccine that is made available to you. It is important to be vaccinated as soon as possible.*

*Given the urgent need for COVID-19 vaccines, unprecedented investment and scientific collaboration is changing how vaccines are developed. Some steps in the research and development process for COVID-19 vaccines have taken place in parallel, while still maintaining strict clinical and safety standards. For example, some clinical trials are evaluating multiple vaccines at the same time, but this does not make the studies any less rigorous than normal”.*

**Mandatory vaccination is generating debates**

* **Kenya**:
  + This week’s Kenya’s Social Listening Collated notes concerns over “forced vaccinations” and the imposure of preventive measures against COVID-19, such as:
    - Tactics employers are using to force workers to take COVID jab ([LINK](https://www.the-star.co.ke/news/2021-10-08-tactics-employers-are-using-to-force-workers-take-covid-jab/?utm_term=Autofeed&utm_medium=Social&utm_source=Facebook&fbclid=IwAR0MclvGi94ND0NjehjDX7QSQ7rbuGiIohNrhl-9tPtafJCeMi-fsGTVDBQ#Echobox=1633716287))
    - “Kenyan government’s use of surveillance technologies to tackle COVID-19 raises human rights concerns” ([LINK](https://globalvoices.org/2021/10/07/kenyan-governments-use-of-surveillance-technologies-to-tackle-covid-19-raises-human-rights-concerns/))
    - “The bus is overloaded and no COVID-19 protocols are being followed” “She doesn't feel safe travelling with this bus” ([LINK](https://www.facebook.com/265615323578878/posts/2313664832107240))
* **South Africa**:
  + This week’s South Africa’s Social Listening Collated notes concerns over “forced vaccinations” and preventive measures against COVID-19, such as:
    - “Reprieve for the Covid vaccine-hesitant: Capitec won’t impose mandate on staff” ([LINK](https://www.facebook.com/372037594410411/posts/380869683527202)). Note the concerning positive sentiment towards companies not “imposing” vaccination among their staff members. This sentiment could lead to increased complaints when it comes to countries requiring vaccination certificates to prove whether or not someone has been vaccinated.f
    - *\*Old content resurfaced*: “On 28 May 2021 the Minister of Employment and Labour, Mr. Nxesi, allegedly published a Directive in the Government Gazette which might give the incorrect impression that an employer is allowed to make COVID-19 vaccination mandatory in the workplace”. ([LINK](https://www.facebook.com/372037594410411/posts/387652386182265))
    - "Protesters arrested in Cape Town for refusing to wear masks” ([LINK](https://www.facebook.com/10227041841/posts/10160019244441842))
    - “Applicants of the special COVID-19 SRD grant should please ensure that the cellphone number they use has gone through the RICA process if they choose to be paid through cardless banking at an ATM”. ([LINK](https://www.facebook.com/675576849237328/posts/4155192194609092))
    - “Spectators will finally be allowed back into sports stadiums” ([LINK](https://bit.ly/3iOeRN6))
    - The Wits SRC has rejected the proposal of mandatory COVID-19 vaccinations to all staff and students. ([LINK](https://www.facebook.com/160836574053016/posts/2465922353544415))
* **Nigeria**:
  + - COVID-19 Vaccination Now Mandatory for Civil Servants in Nigeria ([LINK](https://twitter.com/GbetuBlog/status/1448898564898410506) and [LINK](https://twitter.com/NigeriaNewsdesk/status/1448423186995896320))
    - A sharp narrative rise in the Faith seen in Nigeria towards the end of the week, in relation to a [video](https://www.instagram.com/p/CVDFhhrAhQD/) shared on instagram of a Pastor comparing compulsory vaccination to the pit of hell. Widely shared including [here](https://twitter.com/Naija_PR/status/1448970460788629515), and [here](https://twitter.com/DailyPostNGR/status/1448966265033277446).
* **Mali**:
  + The Ministry of Health and Social Development announcement regarding the receipt of 40,000 doses of "Solidarity Trial" vaccines has raised suspicion ([LINK](https://www.facebook.com/msdsmali1/posts/3062700860626078))
* **Mauritius**:
  + 7 activists ask that the Quarantine Act 2020 and Government Notice 245 be declared unconstitutional ([LINK](https://defimedia.info/cour-supreme-7-activistes-demandent-ce-que-la-quarantine-act-2020-et-le-government-notice-245-soient-decretes))

**What can we do?**

* Clearly and transparently communicate that the vaccines administered in Africa and in Europe contain the same ingredients, and are produced according to the same safety and efficacy standards as in the West.
* Advocate for greater vaccine equity, and outline how uneven travel documentation requirements can contribute to greater vaccine hesitancy.
* Produce content in local languages explaining why vaccines are considered safe and considered safe and effective.

**WHO talking points and Q&A**

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#### ***Should COVID-19 vaccination be mandatory in Africa?***

#### *Refer to the COVID-19 and mandatory vaccination: ethical considerations and caveats: policy brief, 13 April 2021 (*[*LINK*](https://apps.who.int/iris/handle/10665/340841)*)*

**Privacy issues related to vaccine certificates**

* **South Africa**:
  + “The Minister of Health, Dr Joe Phaahla, has just launched the [#COVID](https://www.facebook.com/hashtag/covid?__eep__=6&__cft__%5b0%5d=AZXjsxm9qYOVDF8XLz8kG5I99R2lRWDj364eU69xgbV-0EW8GJ9JIT1ikvwfnEsE_twhlQeXJKPi9l-TqAqNNKgj15_d-cW6ZlCQ1rXpbOZI3baG9KgvP_N0K8ZdUXMFevJVeBGT8kwxLa3LuLcWFWKH&__tn__=*NK-R)-19 vaccination certificates” [(LINK](https://www.facebook.com/147721238610751/posts/4762219137160915))
  + “Warning over vaccine certificate personal information - The QR code on South Africa’s Covid–19 vaccine certificate contains personal information that is easily decoded, and should be treated like any medical record.” ([LINK](https://www.facebook.com/372037594410411/posts/388887682725402))
  + “COVID vaccine certificates a tool to enable vaccinated people to access opportunities, says minister” ([LINK](https://www.facebook.com/10227041841/posts/10160017623061842))
  + “True since they don't want to open stadium's, they were supposed to use this strategy [#novaccinenovote](https://www.facebook.com/hashtag/novaccinenovote?__eep__=6&__cft__%5B0%5D=AZW6LGRpzeFF6-BorT4xGJSz2E8NkSuv9eVfU2U-6xjaUo4g0BPR5hMQ4jmvxARqzksce__z3MpCYbhxkY2xX0VFLxJGhgCeM9ucT1HHgMLLtkUEaMGotQiA4_-G8kos2AY3FdGXUYjomjjzKQsocqjdrhoWz9l6F0L891uT_kOlBA&__tn__=*NK-R)” ([LINK](https://www.facebook.com/216481985196125/posts/2029685567209082))
  + UK took South Africa off the red list and the S.A vaccine passport will be accepted as of this coming Monday, October 11th,, 2021. (LINK) and ([LINK](https://www.facebook.com/587420018087472/posts/1976343062528487)) - This is in relation to UNICEF ESARO South Africa’s Report ​concerns around vaccine equity emerging after reports that the UK will continue to consider individuals who have received the jab in Africa as “unvaccinated” for the purposes of entering the country and quarantine policies.
* **Kenya**:
  + Those fully vaccinated in Kenya can travel to the UK without having to quarantine, or take a COVID test before departure. Positive sentiment towards vaccination in the comments ([LINK](https://twitter.com/ukinkenya/status/1446152222820208642?lang=bg))

**What can we do?**

* Push governments and health authorities to make reassuring statements about privacy policies protecting vaccinated people confidentiality.

**WHO talking points and Q&A**

#### [***Moving towards the digital documentation of COVID-19 status***](https://www.who.int/news/item/27-08-2021-moving-towards-digital-documentation-of-covid-19-status)

#### *Vaccination certificates are nothing new. They are health documents that record a vaccination event - traditionally as a paper card - with key details including the date, product and batch number of the vaccine administered.*

#### *The Digital Documentation of COVID-19 Certificates is proposed as a mechanism by which a person’s COVID-19-related health data can be digitally documented via an electronic certificate. The certificate can be used in the same way as a paper-based vaccination record/card. That is to provide information to health care providers about the vaccination status of individuals, providing a basis for health workers to offer a subsequent dose and/or appropriate health services as appropriate.*

**SInoPharm second and third doses**

* **Nigeria**:
  + *\*Old content resurfaced*: “Nigeria prioritising four COVID-19 vaccines, not including Sinopharm” ([LINK](https://twitter.com/PeninsulaQatar/status/1432757577419427840))
* **Maurice**:
  + Covid-19 and vaccination - Dr Musango: "WHO advocates Do it All” ([LINK](https://www.lemauricien.com/actualites/covid-19-et-vaccination-dr-musango-loms-preconise-le-do-it-all/450526/))
* **Seychelles**:
  + Post inviting take a look at the cautionary tale coming from Seychelles (reported [here](https://twitter.com/marija_backovic/status/1448697657187254272))
* **AFRO Region**:
  + “WHO backs extra jab for Chinese-made vaccines, despite resistance to coronavirus boosters oversupply strain” ([LINK](https://www.washingtonpost.com/world/2021/10/12/sinovac-sinopharm-third-dose/))

**What can we do?**

* Clearly and transparently communicate that the vaccines administered in Africa and in Europe contain the same ingredients, and are produced according to the same safety and efficacy standards as in the West.
* Share Viral Facts pieces on comparing vaccines ([EN](https://www.facebook.com/viralfacts/posts/440917357752358?__cft__%5B0%5D=AZW8w-34cH5hSWR5AK4fblOJI3F4CaFq6ilpAeKCn9NOaE7BZ4xk1oFRwv4rFQ91JaQMcnhpz5mCL8C4OkTA-clBd03XS-hlqKLoCwf7L5PkHB6d_3K5uB3CciOrOrHK8FiCw25KgnXtQGe9jEFu_YKioNsG8ObApu1PpziwhtK9b4nxr7J30IwtQWw85-Yjvg0&__tn__=%2CO%2CP-R) + [FR](https://www.facebook.com/viralfacts/posts/443618057482288?__cft__%5B0%5D=AZWAMZJsGFCwXvhD-ErRNCGa27V1lSqOLybalmKcdcvnSNAoC4j4_RafT2V7zUW5fsbX9bTXg-2e801fRcCxiRZeF3pFnddDj9WL9yc72Mk0eBB7QN7HS9YWoA3LDI_6dH1JTyJFF-nvWgqbqLmr7HX3-UHPTI5FVu7TdXltCxSDmCjqVg6qxAGNdVNNReSbt0k&__tn__=%2CO%2CP-R)).

**WHO talking points and Q&A**

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* *WHO advisory group recommends extra COVID-19 vaccine dose for immunocompromised - The recommendation follows a four-day meeting of the Strategic Advisory Group of Experts (*[*SAGE*](https://www.who.int/groups/strategic-advisory-group-of-experts-on-immunization/about)*) on Immunization. A final report will be issued in December.*
* *SAGE said moderately and severely immunocompromised persons should be offered an additional dose of all* [*WHO*](http://www.who.int/en/) *approved vaccines “since these individuals are less likely to respond adequately to vaccination following a standard primary vaccine series and are at high risk of severe* [*COVID-19*](https://www.un.org/coronavirus) *disease.”*
* *People aged 60 and older who received the Sinovac and Sinopharm vaccines should get a third dose too, the experts added, though use of other vaccines may also be considered depending on supply and access.*

**Persistent misleading posts/misinformation/rumours on immunity boosters and/or COVID-19 cures**

* Kenya has seen narrative rises in unproven treatment, and modes of transmission categories. This [article](https://nation.africa/kenya/news/-prof-mohamed-abdille-discovers-herbal-medicine-to-fight-covid-19--3577696) about a new herbal treatment (dubbed Cr7) for COVID-19 has been widely shared on both [Facebook](https://www.facebook.com/105983259496/posts/10160050046194497) and Twitter [here](https://twitter.com/bonifacemwangi/status/1447406396895633409), [here](https://twitter.com/NationAfrica/status/1446779572889006082) and [here](https://twitter.com/johnnjenga/status/1447447036501053441).
* Boiling Apple with Garlic Increases Immunity [**LINK**](https://www.facebook.com/watch/?v=960614917821239)
  + ***WHO orientation*** [***HERE***](https://mobile.twitter.com/whoafro/status/1270709187866234880)*(Garlic is a healthy food that may have some antimicrobial properties. However, there is no evidence from the current outbreak that eating garlic has protected people from COVID-19.)*
* Anti-Virus foods [**LINK**](https://www.facebook.com/1197858493560421/posts/5005394692806763)
  + ***WHO orientation*** [***HERE***](https://www.who.int/news-room/q-a-detail/coronavirus-disease-covid-19-food-safety-and-nutrition)*(The immune system requires the support of many nutrients. It is recommended to consume a variety of foods for a healthy and balanced diet, including whole grains, legumes, vegetables, fruits, nuts and animal source foods. There is no single food that will prevent you from catching COVID-19).*
* Who is best to consult when you’re unsure about the difference between allergy symptoms and COVID-19 symptoms? Tell us the correct answer in the comments section using the #GetAllergySavvy hashtag to stand a chance to win a TakeAlot voucher to the value of R100**0 (**[**LINK**](https://www.facebook.com/415589131936393/posts/1915701515258473)**)**
  + ***WHO Orientation*** [***HERE***](https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/coronavirus-disease-covid-19)*(If you have any symptoms suggestive of COVID-19, call your healthcare provider or COVID-19 hotline for instructions and find out when and where to get a test, stay at home for 14 days away from others and monitor your health).*

**PERSISTING ONLINE TRENDS**

\* bolded trends appear to circulate more this week

* **Debates on plurality of vaccines**
* **Concern/ frustration that vaccines administered in Africa are not recognized for Western travel passes**
* **Persistent racism on Chinese citizens**
* **Frustration with double standards around health and safety measures (e.g. politicians not wearing masks)**
* **Frustration with slowness or mismanagement of vaccine rollout**
* **Vaccine deaths will be logged as COVID deaths**
* **Vaccines don’t prevent death or the virus’ spread / vaccines are not effective**
* COVID palliatives are being hidden/ denied to citizens
* Lockdowns are not an effective way of controlling COVID
* Politicians have taken fake vaccines
* **Clinical trials were rushed**
* **Africans are lab rats or being used to test vaccines (Viral Facts response** [**here**](https://twitter.com/viralfacts/status/1384779123302752257)**)**
* New pandemic waves/ COVID are caused by vaccines
* Other issues and/or diseases are more important than vaccination
* **Vaccines won’t stop the need for protective measures, why bother (Viral Facts response** [**here**](https://twitter.com/viralfacts/status/1377241510039683073)**)**
* COVID case numbers/ mortality rates are exaggerated
* **Foreign companies or governments profit from the vaccine rollout in Africa**
* **Fear of vaccine side effects/ long-term effects**
* **COVID does not exist (Viral Facts response** [**here**](https://www.facebook.com/WHOAFRO/videos/1059407544571240/)**)**
* Effectiveness of herbal remedies (Viral Facts response [here](https://twitter.com/viralfacts/status/1389878262743060483))
* **Effectiveness of ivermectin and alternative remedies (particularly in South Africa) (Viral Facts response** [**here)**](https://twitter.com/WHOAFRO/status/1394643247272706051)
* Frustration with looting and mismanagement of COVID funds
* Moderna vaccination pause in Finland ( [**here**](https://www.facebook.com/261061365404/posts/10166067524165405))
* The upcoming seasonal flu campaigns at global level ([**LINK**](https://twitter.com/BernieSpofforth/status/1448567678281596928)), that may develop into potential discussions to be anticipated ([LINK](https://www.nytimes.com/2021/10/09/science/mrna-flu-vaccines.html))
* China’s coronavirus patients subject to abuse and bullying as new outbreaks emerge [(**LINK**)](https://www.thestar.com.my/aseanplus/aseanplus-news/2021/10/08/chinas-coronavirus-patients-subject-to-abuse-and-bullying-as-new-outbreaks-emerge)
* A [map of Africa’s vaccine progress to date](https://ewn.co.za/2021/09/21/africa-s-covid-19-vaccination-progress-to-date) illustrates alarmingly low vaccination rates on the continent
* Concerns emerge as COVID mutates in HIV positive people [here](https://www.facebook.com/100059283082154/posts/281296797189754) and [here](https://www.moneyweb.co.za/news/south-africa/worlds-worst-hiv-epidemic-stymies-south-africas-covid-fight/), complicating the fight against the COVID pandemic (articles from this week’s WHO EARS report)
* Hospital data in South Africa demonstrates that [COVID deaths primarily occur in unvaccinated individuals](https://www.iol.co.za/capeargus/news/health-officials-say-hospital-data-proves-vaccines-are-safe-396a59f7-b9d4-403f-8760-b0a6230df0c3)
* Claim that the NCDC Vaccination Department director stated [AstraZeneca could be administered as a second dose](https://www.libyaobserver.ly/inbrief/permission-granted-astrazeneca-be-administered-second-dose-sputnik-v-vaccine) for those who received the Sputnik V vaccine
* Claim that [India plans to begin exporting vaccines again](https://www.citizen.co.za/news/covid-19/2629057/india-says-covid-vaccine-exports-to-restart-in-october/) in October
* Amnesty International states that [COVID vaccine firms are fuelling a human rights crisis](https://www.citizen.co.za/news/covid-19/2630544/vaccine-fuelling-human-rights-crisis/) by refusing to waive intellectual property rights for COVID vaccine technology

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*Methodology*

AIRA has implemented a temporary new social media listening set-up to fill the gap left by the departure of the AIRA Social Data Analyst until a new full-time person is recruited.

The new temporary social media listening set-up relies on a split of social media analysis 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, 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, TweetDeck, Crowdtangle, Google Trends, UNICEF Talkwalker dashboards as well as the WHO EPI-WIN weekly infodemic insight reports and 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.

Our commercial social listening tools include:







WHO social listening tools:

