

# Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report  
**August 22** (Weekly Brief #35 of 2022)



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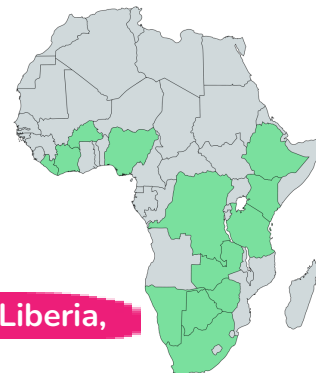
## Public Health Infodemic Trends in the African Region

This report seeks to communicate operational recommendations based on social media monitoring from August 13 - 19, as well as relevant information on current mis/disinformation. Target countries include Angola (PT), Kenya, Nigeria, South Africa (EN), Burkina Faso, Cameroon, Democratic Republic of Congo (DRC), Guinea, Ivory Coast, Niger, Mali, Mauritania, Mauritius, and Senegal (FR). Descriptions of “engagements” and information gathering are listed in the methodology section at the end of this report.



## Monkeypox is not a threat because it is not lethal

*CONTEXT: Reports of monkeypox cases in Africa have continued to drive conversations regarding the disease, but a significant share of the social media community has responded with little to no concern about the severity of the disease or showed any interest in supporting the efforts to mitigate the spread.*



**Burkina Faso, Botswana, DRC, Ethiopia, Kenya, Ivory Coast, Guinea, Liberia, Namibia, South Africa, Tanzania, Zambia, Zimbabwe**

- Reports from public health organizations and national governments about the developing cases in Africa have often been met with ridicule and chided for trying to instill fear over a disease “that is not dangerous.”
- Though early conversations (May-July) revealed a more concerned audience that spoke out on social media in regard to monkeypox, there is a growing community of individuals that have expressed frustration with the level of severity given to a disease that many state is not lethal.
  - “Only 5 people with MonkeyPox after such a long time since it's outbreak 😂😂😂😂 We're not scared of it.It doesn't kill 🙄🙄🙄”
  - “5 cases mxm, corona went from 1 case to 333 990 in 3 weeks, we want more cases”
  - “Not an issue im trained to suffice the epidemic”
  - “dat one been come and we still alive.no be this one go kill person”
- The messaging around monkeypox from public health organizations and health ministries of African countries have shared minimal content regarding cases about the threat to women, likely inadvertently encouraging these narratives.

### Why is it concerning?

- Many government and public health officials started the conversations around monkeypox with statements that no one should be worried about the outbreaks that have accumulated globally and are still emerging in Africa. Therefore, when the PHEIC was declared and now that governments are increasing efforts for awareness and safety, online users are rebuking their efforts and are making statements that are not in support of mitigation efforts.

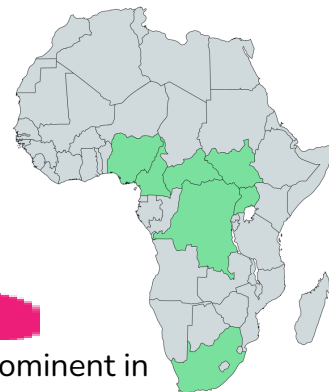
### What can we do?

- Explain how the outbreak is evolving and why there should be increased awareness and adherence to simple preventative measures against monkeypox.



## Clade IIb only infects men

*CONTEXT: Conversations in social messaging apps have revealed that there have been misinterpretations of Clade IIb having a high infection rate among MSM and new rumors have populated based on the assumptions.*



### Cameroon, CAR, DRC, Nigeria, South Africa, South Sudan, Uganda

- The belief that monkeypox is only impacting MSM has been prominent in social media discussions over the last several months. However, following the renaming of the monkeypox strains to Clade I and Clade II, online users have claimed that the new strains, in particular Clade IIb, are strictly impacting homosexual men and all other populations are safe from the disease.
- This focus on Clade IIb was driven by misinterpretations of the WHO's [statement](#) that there will be further investigation into the significance of the genetic mutations of these strains. There is confusion raised in African online communities as to the timing of the discovery of these mutations and why they are only being discussed following the COVID-19 pandemic after the disease has been endemic in African countries for decades.
- Some users believe that these strains were purposely altered in a lab with Clade IIb being specifically designed to only be transmitted through MSM, while others claim it is the second phase of population control measures following the COVID-19 vaccine that weakened African men's immune systems allowing them to more easily become infected with a more lethal strain of monkeypox, Clade IIb.

### Why is it concerning?

- The WHO is being targeted on many occasions in regards to any new epidemiological developments or information discovery. The audience for public health messaging seems to be growing more disillusioned with public health agencies as monkeypox slowly becomes more prominent of a focus across the globe, which has continued to drive passionate and often negative responses to public health messaging in general.

### What can we do?

- Highlight what is known about Clade IIb, when these mutations developed, why they happen, and if it poses a greater risk than the previous monkeypox strains.



## COVID-19 vaccines harm pregnant women/infants

*CONTEXT: A recent surge in the misinformation narrative around pregnancies and infant mortalities populated over the last seven days on social messaging apps that suggests there are links between pregnancy, birth, and infant health complications and the COVID-19 vaccine.*



### Namibia, Nigeria, South Africa, Zimbabwe

- Prominent misinformation channels on social messaging apps have reengaged with the misinformation narratives that the COVID-19 vaccine is dangerous to pregnant women and infants. The claims are made by a U.S. medical doctor and an Israeli health science journalist, which are being shared widely on Telegram and WhatsApp. The videos are tagged with the following captions:
  - “The CDC recommended all pregnant women get injected when they knew there was an **85% chance of a miscarriage** within the first trimester?  
How many babies have actually died?  
**How many women don’t even know they’ve had a miscarriage?”**
  - “Yaffa Shiraz, Ph.D. reveals new VAERS data on infant deaths, including injuries reported of nursing babies whose mothers had received the Pfizer injection. “
- This subject matter is of high sensitivity, as there has been a prominent level of concern in African social media communities regarding the impact of vaccines on pregnant women and infants.

### Why is it concerning?

- The misinformation is targeting a very vulnerable audience as the topic of the COVID-19 vaccine has been highly questioned in regard to pregnancy and infants. Though this has been addressed by fact-checkers, the high figure of 85% seems to have had an impact on social media audiences.

### What can we do?

- Share simplified statistical evidence of efficacy (80-90% vaccine effectiveness against severe disease with booster doses).
- Address fears of negative side effects of vaccination during pregnancy and on fertility by sharing evidence on the significantly increased risk of COVID-19 for adverse pregnancy outcomes, including 15% increased risk of stillbirth.



## Persistent Rumors

### **Rumor: Vaccines contain mRNA which is leading to an increase in monkeypox**

- Response: Vaccines provide protection against serious complications from COVID-19 and the new variants. (Viral Facts response [here](#))

### **Rumor: Foreign companies or governments profit from the vaccines in Africa**

- Response: Highlight successes in vaccine distribution, as well as new manufacturing campaigns beginning in Africa.

### **Rumor: Inaccurate assumptions of vaccine side effects/ long-term effects**

- Response: Fear of vaccine side effects/ long-term effects continue to be misinterpreted or overstated (Viral Facts response [here](#))

### **Rumor: COVID-19 no longer exists / never existed**

- Response: COVID-19 cases have declined but health authorities are warning of a potential 5th wave (Viral Facts response [here](#))

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## **Information Gaps: Why has COVID-19 declined if masks are no longer mandatory?**

- New reports of a sharp decline in COVID-19 cases in Africa have sparked confusion after many online users referred to the recent removal of mask mandates in many African countries that were established before the reported 24% decline in new COVID-19 infections in the region. This has led to questions on whether the masks were a factor in mitigation during the pandemic, as many online users claim to not have worn a mask or have been vaccinated, yet cases are still declining.
- This may have a significant impact on new COVID-19 surges in the future as some may believe that there is no need to mask even if there is an uptick in regional cases. Similarly, calls for masking to avoid the spread of monkeypox may go largely ignored if this information gap is satisfied with misinformation that takes root over the next several weeks.



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### COVID-19 VFA content

- Flu & COVID vaccines [[LINK](#)],
- Ivermectin to treat COVID-19 [[LINK](#)]
- Childhood vaccination safety [[LINK](#)]
- Fertility and Covid19 vaccine [[LINK](#)]

### Monkeypox content

- Latest Monkeypox VFA content: Monkeypox explainer [[LINK](#)]
- WHO Monkeypox FAQ and Factsheet [[LINK](#)]

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## Methodology

The social media listening process relies on a split 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, 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 (siloe 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:**



**NEWSWHIP**



**TweetDeck**



**Talkwalker**