

Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report

March 21, 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 March 12 - 18, 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.



“The 5th wave poses no threat”

CONTEXT: As COVID-19 cases have started to hit record highs in China and in some countries across Europe. Many African leaders have shared warnings of the potential 5th wave that could potentially hit in the coming weeks.



Cameroon, Mozambique, Nigeria, South Africa, Zimbabwe

Coverage: 9k+ engagements, 2k+ comments, 500+ shares

- **South Africa:** There have been multiple warnings issued by African leadership over the last several weeks and months to be prepared for a potential 5th wave of COVID-19 as early as May or June. Following the South African-based Absa Financial Group’s [announcement](#) that they believed a 5th wave was likely due in April, criticisms were quickly raised. While many attacked Absa for making statements outside of its professional field, it did incite misinformation narratives to reemerge as well:
 - “This 5th wave is utter BS and the sheeple will fall for it hook, line and sinker. Just like the 4th wave in December..... they literally got it to the hour. WAKE UP.”
 - “I think our Gov. wants another wave to fund their vaccine investment and Absa are drumming up business for them.. the waves have stopped, so let the new investment make malaria vaccines, that hasn't gone from our continent.” [\[LINK\]](#)
 - “So out of step - as usual. Allow citizens the autonomy to take care of their health the way they see fit, you know like the old days. COVID is our new flu and we have to learn to live with it. Enough with the "fourteenth wave" threats and fear mongering!!! Winter flu is coming, just like it does every year.” [\[LINK\]](#)
 - “There is NO COVID. It's flu finish and klaar. Look around the world, ALL the vaxxed are clogging up the hospitals, not the unvaxxed. And NO, the next BS wave is not deadlier than the last. Please stop spreading this crap”



- **Democratic Republic of Congo:** Multiple WhatsApp channels shared the [article](#) highlighting that 0.93% of the target population was actually vaccinated. WhatsApp users referred to the figure as proof that waves one through four were not dangerous even without the vaccine:
 - “we don’t even know if they have a 5th wave, there was never any waves before.”
- The narrative in Congolese WhatsApp is an example of the shift in language in many of the public conversations. COVID-19 warnings or alerts that were often met with anger or frustration for the length of the pandemic, are now met with humor or total dismissal.

Why is it concerning?

- There is a dwindling level of concern for left for the potential severity of COVID-19, especially as many countries have shifted into new phases of COVID-19 public health and safety measures.
- The frustration seen in response to lasting COVID-19 safety regulations was still a positive sign that people were adhering to these measures. The dismissal or humor expressed following COVID-19 updates, information, or formal warnings suggests a larger share of the population may have already moved away from having any concern for the risks of COVID-19 in the future.

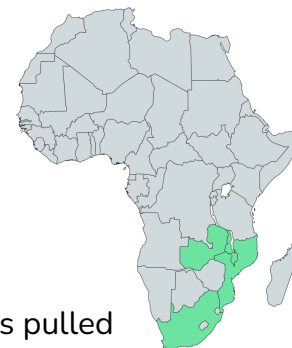
What can we do?

- Illustrate the increase in cases across China and in European countries. Highlight how patients that have not been vaccinated are more likely to be admitted to hospitals with severe COVID-19 symptoms.
- Continuing to provide accurate information as a resource for individuals that may come across misinformation is crucial for not losing momentum in vaccine uptake as the perception of the pandemic being over will increase with diminishing COVID-19 public health and safety measures implemented across Africa.



The polio vaccine led to more dangerous strains

Context: Vaccine campaigns for the poliovirus are being administered in the Southeast region of Africa following the discovery of a child positive for wild poliovirus in Malawi. [\[LINK\]](#)



Malawi, Mozambique, South Africa, Zambia

- Poliovirus campaigns stemming from the Malawian outbreak has pulled attention away from COVID-19 and produced an uptick in misinformation regarding the poliovirus vaccine. Misinformation has been circulating in Malawi, but the prominent narratives have been found in neighboring and regional countries.

INSECTICIDE-INDUCED PARALYSIS

Diagnoses of what was thought to be "polio" also followed the 1939 discovery and introduction of the insecticide dichloro-diphenyl-trichloroethane (DDT), which earned Swiss scientist Dr. Paul Muller the Nobel Prize in 1948. Because DDT was presented as a solution to rid the public of insects falsely suspected of carrying a germ that spread polio, few initially realized that it actually was poisoning both children and adults. For years, Americans hummed along to the catchy advertising jingle "DDT is good for me-e-e!" while children played behind trucks spraying plumes of DDT, not knowing the harm it caused. DDT was sprayed on beaches and playgrounds and was used in water to rinse out clothes, bedding and mattresses. Fearful parents went so far as to sprinkle it on sandwiches.⁷

There was no polio virus.

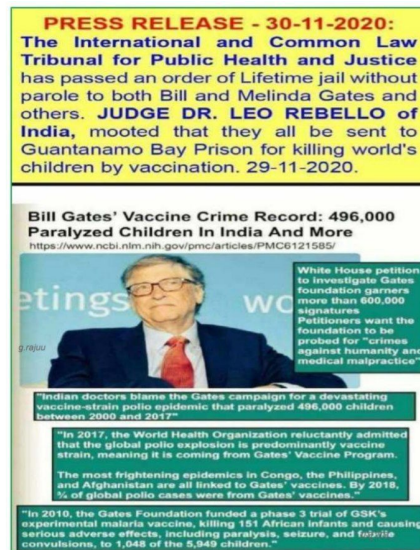
<https://www.westonaprice.org/health-topics/vaccinations/polio-vaccines-medical-triumph-or-medical-mishap/>

54.7K 6:55 AM

- South Africa has been the source of a significant share of the viral content, such as the claim in the above graphic claiming the poliovirus never existed. This post was shared on March 20, and has already garnered over 50k views. The [article](#) linked in the post is dated 2019, but it has outlined a burgeoning belief that the poliovirus was manufactured.



- Additionally, the discourse around this article highlights the belief that it is more dangerous to receive the polio vaccine than getting a “natural wild polio” case as all new polio cases of modern-day can be linked to vaccine mutations that have led to the feared variant of the 1900s.
- Other misinformation populated on WhatsApp channels in neighboring countries in the region (Democratic Republic of Congo, Mozambique) there there was concern regarding the claims of the “criminal record” of Bill Gates and his dangerous influence on the polio vaccine that led to nearly 500,000 children becoming paralyzed.



Why is it concerning?

- COVID-19 public health outreach has made several attempts to engage on private messaging apps with varying levels of success. However, there has not been the same level of effort in messaging apps (Telegram, WhatsApp) for other diseases as new outbreaks develop with so much attention still focused on COVID-19.
- This is a challenging narrative combined with a challenging vaccine history. The belief that wild poliovirus is less dangerous because it has not been impacted by vaccine strain mutations is purposely being connected to prior vaccine failures to try to validate the claims.

What can we do?

- Viral Facts content has already been produced to push back on Polio misinformation. Concise and clear messaging about the vaccine’s effectiveness and the danger of polio should be the approach to combating the difficult misinformation narratives.
- Do not engage with all of the different lines of misinformation. Stick to the successes of modern era polio vaccines and the threat polio still poses to children.



Persistent Rumors

Rumor: Vaccines don't prevent death or the virus' spread / vaccines are not effective

- 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 vaccine rollout 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](#))

Rumor: Frustration with looting and mismanagement of COVID-19 funds

- Response: Review the COVAX program and the global effort to effectively distribute vaccines via a multi-organizational campaign

Information Gaps: Are there variants of polio, is this a new one?

As vaccine campaigns kick off in southeastern Africa, confusion has surfaced regarding the reemergence of the poliovirus in Malawi. Most specifically, the fast-paced COVID-19 variant development has served as an educational device for the potential of viral mutations in a way that has not been witnessed by so many firsthand. COVID-19's impact on how people perceive other diseases has become evident, as concerns of the poliovirus case may be a new more potent variant and not react to vaccines as well as previous strains of the virus. This will likely overlap with other disease campaigns as well, specifically for diseases that have been announced as *eradicated* in the past.



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COVID-19 VFA content

The importance of getting vaccinated

As many countries are starting to ease COVID-19 restrictions, some believe the pandemic is over. COVID-19 isn't over and vaccination still serves as the best chance against severe illness, hospitalization, and death from COVID-19 infection. [\[LINK\]](#)

The pandemic is not over!

People are still becoming sick, hospitalized and dying of #COVID19.

👉 Declining attention to the pandemic doesn't mean the pandemic is over. [\[LINK\]](#)

COVID-19 effects on sexual performance

FACT: There's no evidence that the COVID-19 #vaccine affects fertility or sexual performance in men or women ✅ [\[LINK\]](#)

Polio VFA Content

Polio outbreak in Malawi

Last week, the Polio Eradication Program Coordinator for the WHO Regional Office, Dr. Modjirom Ndoutabe, explained the new outbreak of Polio. [\[LINK\]](#)

What do we need to do to control polio in Malawi?

Dr. Modjirom Ndoutabe explains the need for vaccination for children under 5 years of age to best combat the polio virus. [\[LINK\]](#)

Is there any link between the Polio and COVID-19 vaccine?

Dr. Modjirom Ndoutabe clears up the confusion by stating there is no link between the polio and COVID-19 vaccines. [\[LINK\]](#)



Methodology

The social media listening process 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 (siloes 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

WHO social listening tools:



Early AI-supported Response
with Social Listening