

Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report
May 9 (Weekly Brief #19 of 2022)



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Quick Reference Guide

Key COVID-19 Trends

- [The lethality of the J&J COVID-19 vaccine](#).....Pg. 3

[Persistent Rumors](#).....Pg. 5

[Information Gaps](#)

- Will I need an annual COVID jab?.....Pg. 5

Viral Facts Africa recent productions

- [COVID-19 VFA Content](#).....Pg. 7

- [Malaria VFA Content](#).....Pg. 7

- [Viral Facts Africa campaign](#) to counter vaccine hesitancy.....Pg. 7

[Methodology](#).....Pg. 8

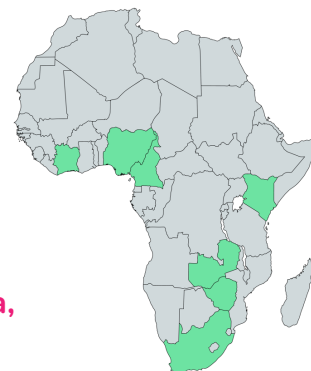
Public Health Infodemic Trends in the African Region

This report seeks to communicate operational recommendations based on social media monitoring from May 2-6, 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 lethality of the J&J COVID-19 vaccine

CONTEXT: Reports have emerged regarding the restrictions on the Johnson & Johnson (J&J) vaccine by the United States Food and Drug Administration (FDA) due to links to blood clots being caused by the vaccine.



Angola, Cameroon, Ivory Coast, Kenya, Liberia, Mozambique, Nigeria, South Africa, Zambia, Zimbabwe

Impact on vaccine uptake:

- These reports have been shared globally and the ripple effect caused by this announcement has spread across platforms (public pages and private messaging apps) and impacted other public health information environments. Backlash toward the J&J vaccine was expected following these reports, and there has been a vast uptick in anti-J&J rhetoric in the last few days. Many have pointed to the claims from 2021 that blood clots are a side effect of vaccines and that these issues were not taken seriously. This has emboldened many individuals to recycle other theories and misinformation around vaccinations believing that these “truths” will be released as well.
 - **“The latest report from the World Health Organization (WHO) shows that the number of excess deaths as of the end of 2021 was three times higher than previously reported. And the obvious culprit are [sic] those injections they are calling “vaccines.”**
 - **“COVID-19 vaccines have made us all weaker and we are seeing more deaths from other diseases”**
 - **“We were told the vaccines would help us, but now we are dependent on them every year and they kill us. It is safer to get COVID.”**
- This restriction on J&J vaccines has also brought other brands of COVID-19 into the light, as **rumors have resurfaced regarding complications for Moderna, Pfizer, and Aztra Zeneca as well.** A [blog](#) from July of 2021 has been shared widely and viewed over 200k times in the last several days. The blog specifically targets the Moderna vaccine but highlights that the **mRNA component that is used in all of the COVID-19 vaccines is what is**



causing blood clots. Some comments on posts sharing this blog are calling for the **recall of all vaccines**, while many others are expressing concern for their own health and are posting questions about **where to get screened for blood clots.**

- Rumors regarding **protein spikes** that were prominent 5-6 months ago are also resurfacing as many believe protein spikes and blood clots are directly related and were both **purposely quieted and denied by public health organizations, national governments, and pharmaceutical companies.**

Why is it concerning?

- This is a large setback for trust in public health organizations as the blood clot evidence was primarily overlooked and cited as extremely rare. However, the long period between initial blood clot concerns and the restriction on vaccines months later has set the stage for misinformation narratives to perform well over the next few months. This report will likely have negative short and long-term consequences and impacts on vaccine uptake in the future.
- There have been several claims that blood clots were a big concern for individuals receiving the vaccines, but these reports are the a victory for those that were suggesting the risk of the COVID-19's dangerous side effects outweighed the risk of contracting the disease itself. With this development many will feel validated, and misinformation about other side effects will likely receive a much more favorable audience in the coming months. With cases on the rise in some African countries and trust in vaccines declining, the scenario at hand could give way to a significant 6th wave.

What can we do?

- Provide context and clarity to side effects regarding Pfizer, Astra Zeneca, and Moderna vaccinations. A repository with clear language around known side effects for each vaccine with consistent updates to mirror news developments can serve as a foundation for rebuilding trust.
- Continue to promote the efficacy and positive impacts the COVID-19 vaccines have made during the pandemic. There has been minimal content promoting the successes of vaccine acceptance in battling COVID-19.
- Clarify if African countries are going to follow the same guidelines or if the WHO backs the findings of the U.S. FDA to give clarity to concerned citizens.



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 COVID vaccines going to be annual?

Following the reports of the COVID-19 vaccines being limited due to potential blood clotting concerns, social media users also brought up concerns around a dependency on COVID-19 vaccinations. The belief that the COVID-19 vaccines are potentially more dangerous than originally realized compounded with a concern that citizens will become dependent on the COVID-19 vaccine as there have been multiple jabs and boosters have led to the question:

Will I need an annual COVID-19 vaccine in the future?



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[Facebook](#) [Twitter](#) [Instagram](#)

COVID-19 VFA content

- Routine childhood immunization [[LINK](#)]
- Flu & COVID vaccines [[LINK](#)]
- The XE variant [[LINK](#)]

Malaria VFA content

- The malaria vaccine development [[LINK](#)]

Viral Facts Africa campaign to counter vaccine hesitancy

WHO in Africa has worked with the UK Government and Viral Facts Africa to create a new campaign to support Covid-19 vaccine demand across Africa. Building on the experience WHO and Viral Facts Africa have in countering the spread of health misinformation and disinformation in the African region, the UK Government has developed messaging based on insights and behavioral science expertise gained during the pandemic. These digital assets will help to build vaccine confidence by tackling the most prominent drivers of vaccine hesitancy and support Africa's recovery from the pandemic.

[Link](#) to have an overview of the produced assets / Links to download ([EN](#)/[FR](#))

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 (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.



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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