

Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report
August 8 (Weekly Brief #33 of 2022)



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Public Health Infodemic Trends in the African Region

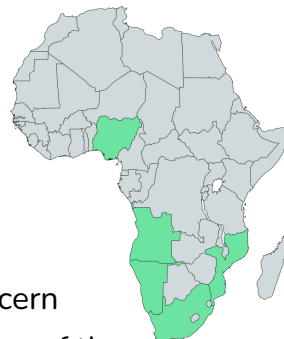
This report seeks to communicate operational recommendations based on social media monitoring from July 30 - August 5, as well as relevant information on current mis/disinformation.

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.



Tecovirimat is being hoarded in the U.S.

CONTEXT: Focus on the monkeypox treatment drug, Tecovirimat, has led to the public's awareness of the lack of access to a treatment that is primarily available from U.S. and Canadian stockpiles.



Angola, Mozambique, Nigeria, Namibia, South Africa

The recent focus on Tecovirimat, or TPOXX, underscores the level of concern that is being felt across African countries following the WHO's declaration of the Public Health Emergency of International Concern (PHEIC) for the monkeypox outbreak. Unfortunately, official messaging around TPOXX suggests it is one of the only effective treatments against monkeypox and that it is so limited in its accessibility that only the U.S. and Canada have significant stockpiles globally.

- Following the sentiment of inequitable dispensing of COVID-19 vaccines for African nations, this narrative highlighting the limited availability of TPOXX is being met with extreme criticism.
- Some online users have suggested that COVID-19 was ineffective for population control in Africa, so there is now an effort to push forward with an accelerated version of monkeypox and withhold adequate treatments to follow through with the original population control agenda.
- Most notably, Pfizer has come back into focus with netizen claims that the company will profit from TPOXX. The following is a quote found on Telegram:
 - "If you wanted a source for the claims it's [here](#), very valuable information. VACV = Vaccinia Virus, MPXV = Monkeypox Virus, VARV = Variola Virus Wouldn't you rather take a botanical treatment from a plant than whatever big pharma is cooking up with Cidofovir or Tecovirimat which In 2019, a company called SIGA Technologies announced a promotion agreement for TPOXX, its smallpox/monkeypox drug, with Meridian Medical Technologies. Guess who owns Meridian? **Pfizer.**"

Why is it concerning?

- Tensions are high as blame is being directed at the same targets of the COVID-19 pandemic. Association with any of the same parties from one PHEIC to the next may lead to higher difficulty for garnering public trust.

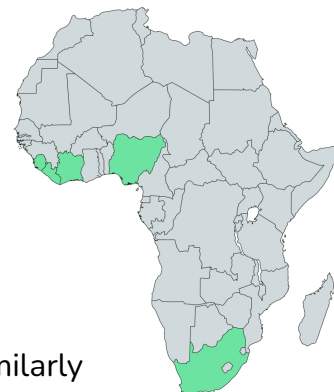
What can we do?

- Explain TPOXX and other available treatment methods for monkeypox.



Monkeypox Vaccine Components are Dangerous

CONTEXT: A recent screen grab from a U.S. CDC website explaining potential health concerns for individuals has been shared across social platforms to incite fears around the ciprofloxacin component found in one of the two common vaccinations.



Ivory Coast, Liberia, Nigeria, Sierra Leone, South Africa

- Over the last seven days African social media narratives have similarly focused on the status of monkeypox vaccinations as concerns continue to become more visible on monitored social media platforms. A key narrative has started to receive traction regarding the JYNNEOS containing ciprofloxacin. Interestingly, the vaccine is reportedly not being used in African outbreaks currently, and its use is primarily U.S. based. Regardless, there has been high traction on social messaging apps in recent days that promoted suggestions for JYNNEOS being boycotted.
- The U.S. CDC page is found [here](#), and this particular snippet was shared on social messaging apps:
 - JYNNEOS vaccine contains small amounts of gentamicin and **ciprofloxacin** and is produced using chicken embryo fibroblast cells.
 - People who have had a previous severe allergic reaction (e.g., anaphylaxis) following gentamicin or **ciprofloxacin** have a precaution for receiving JYNNEOS vaccine and should be informed about the potential for increased risk of allergic reaction if the vaccine is administered.
 - The warnings from the CDC page were taken out of context as “proof” there are active ingredients within the vaccine that will cause harm to individuals that choose to receive it. Some users also claimed the COVID-19 vaccine contains ciprofloxacin and refused to take the vaccine to not face extreme side effects.

Why is it concerning?

- The vaccine is not in high use, particularly in Africa, and African social media communities have already begun to target specific brands/types of the monkeypox vaccine. This highlights a very significant battle for any type of new vaccines or components that are to be introduced over the next several months.

What can we do?

- Clarify vaccines in use in Africa, and the purpose of publishing warnings for those that may have bad reactions to components of the disease.



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 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](#))

Information Gaps: Do COVID-19 vaccines cause death?

- Recent [reports](#) of a death that was directly attributed to a COVID-19 vaccine have raised the question, can COVID-19 vaccine side effects cause death in a patient? The question is not new, but with the narrative regaining large traction over the last week, there has not been a significant amount of accurate messaging to counteract the newly found concerns from the African social media communities.
- This has led to an information gap, albeit one that is based more on a timing scenario rather than a lack of content existing online for individuals to access. However, social media feeds for public health organizations are not currently sharing any of the previous material related to these subjects at a time when they are needed across all social media and messaging platforms.



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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](#)]

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. 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