

Africa Infodemic Response Alliance

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AIRA Infodemic Trends Report
12-19 December 2022
(Weekly brief #52)

Public Health Infodemic Trends in the African Region

This weekly report provides key highlights and operational recommendations based on social media monitoring from December 12-19 in Eastern, Western and Southern Africa, as well as relevant information on current mis/disinformation.

For more information, please contact the WHO AIRA team:

Rhys O'Neill oneillr@who.int, Elsa Maria Karam karame@who.int,

Elodie Ho hoelodie@who.int

Top trends

Information gaps around Measles-rubella

Significant information gaps around a Measles-Rubella vaccination campaign revealed on social media platforms.

Questions revolve around access, eligibility, side effects of the vaccine.

Refusal of COVID-19 Vaccines in Ghana

Low uptake of COVID-19 vaccines in Volta region of Ghana has received significant coverage in regional media. Many social media users from Ghana and neighboring countries expressed support for those that refused vaccination.

Key resources

Viral Facts Africa social media content: [Facebook](#) [Twitter](#) [Instagram](#)

Measles content

- WHO literature on the risk of measles for children ([LINK](#))
- UNICEF campaign for mitigating measles risk ([LINK](#))
- Safety of child vaccination ([LINK](#))

Covid19 content

- Declining cases does not mean diminished need for vaccination ([LINK](#), [LINK](#))
- COVID preventative measures during the holidays ([LINK](#), [LINK](#))

Information gaps around the measles-rubella vaccination campaign

CONTEXT: The [Ministry of Health](#) in Kenya, in partnership with UNICEF and Gavi are conducting a 10-day Measles-Rubella vaccination campaign in seven high-risk [counties](#), targeting 1.2 million children aged between 9-59 months. Comments on social media platforms show that there are significant information gaps about the disease, and access, side effects and efficacy of the MR vaccine.



Engagement: 6 posts, 635 likes, 67 comments

- Low measles vaccination rate for children has been recorded globally (nearly [40 million children](#) according to WHO and US CDC) partially due to some parents refraining from bringing their children in for immunization during the COVID-19 pandemic.
- The ongoing efforts by the Ministry of Health and UNICEF in Kenya have garnered engagement that has highlighted potential ongoing [information](#) gaps. Of 62 monitored comments, **27%** of the comments displayed information gaps about the vaccination's accessibility and usage.

Why is it concerning?

- A [measles outbreak](#) has been recently reported by the MoH across six counties, and [concerns are high](#) to stop the transmission of this highly contagious disease.
- Despite the fact that the measles-rubella vaccine is part of the routine childhood immunization programme in Kenya, there are still major information gaps. Questions revolved around access, eligibility, side effects and efficacy of the vaccine.

What can we do?

- Communication resources such as the WHO [Measles](#) and [Rubella](#) Fact Sheets can be referred to and adapted to support community mobilisers and health care workers in communication with the parents and community.
- Specific messages to fill the gaps around eligibility, access, side effects could also be drafted to answer online users and community members about the MR vaccine.
- Use different channels, including two-way communication channels, to listen to people's concerns and address them in a timely manner.



Refusal of COVID-19 Vaccines in Ghana

CONTEXT: Recent [reports](#) of a high hesitancy for COVID-19 vaccination in the Volta region of Ghana stated that roughly 42% of the 2.1 million doses of the vaccines sent supplied have “gone to waste.” The Ghana Health Service also [reported](#) that only 28.1% of the region’s population have been fully vaccinated.

Engagement: **34 articles, 1000+ likes, 500+ comments**

- Reactions to the reports on social media are high in comparison to recent news regarding COVID-19 issues over the last several months in the region. Notably, the majority of [responses](#) on social media platforms are expressing support for citizens of Volta for not accepting the vaccines, and few private citizen responses encourage a greater vaccine uptake.
- Reports on the low vaccine uptake highlighted the Ghana Health Service’s [reasoning](#) for the vaccine refusal:
 - “...misunderstanding of the President’s directive on mask wearing, staff fatigue, open threats by some community members, low risk perception, misinformation, misconception, and disinformation, among others.”

Why is it concerning?

- Many social media users in the three-country region of Ghana, Burkina Faso, and Ivory Coast find the lack of vaccine uptake as something [positive](#). This underscores that there is still a prominent disapproval of the COVID-19 vaccines.
- The suggestion by the Ghana Health Service that misinformation, misconceptions, and disinformation are still playing a large role in the low uptake, coupled with the positive reactions in response to the low vaccine rate, indicates a need for increased clarity and accurate messaging to be established in the Volta region.

What can we do?

- The Ghana Health Service is actively working on combatting the misinformation and misconceptions around vaccination, but the regional reactions suggest that a more widespread focus and a reinvigorated COVID-19 messaging campaign can be helpful.
- Reengage audiences on social media and in communities regarding the usefulness of being fully vaccinated as the holiday season quickly approaches and with it increased travel and potential for higher exposure to COVID-19.

Persistent Rumors

Rumor: Ebola doesn't exist

- Response: Address the severity of the disease and explain the origins, symptoms, and ways of transmission (Viral Facts Response [here](#)).

Rumor: Ebola benefits the Ugandan government

- Response: Greater cooperation in public-facing messaging can help limit the overall confusion.

Rumor: COVID-19 no longer exists / never existed

- Response: COVID-19 cases have declined but health authorities are warning of the potential emergence of a new Omicron subvariant (Viral Facts response [here](#))

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](#))

Information Gaps

The most common questions raised by social media users this week are:

COVID-19

- Ongoing need for COVID-19 vaccinations and boosters even during low case periods
- Explanation of how vaccines expire as opposed to “bad batches”
- Do I need to be vaccinated to travel for the holidays?

Measles and Rubella

- Accessibility of the vaccine in Kenya
- Eligibility (age, geographical area, health pre-conditions) for the vaccine
- Efficacy and side-effects

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, and 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, and 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:

