

Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report
21-28 November 2022
(Weekly brief #49)

Public Health Infodemic Trends in the African Region

This weekly report provides key highlights and operational recommendations based on social media monitoring from November 21-28 in Eastern, Western and Southern Africa, as well as relevant information on current mis/disinformation.

Descriptions of online engagements and information gathering are listed in the [methodology](#).

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Top Misinformation & Rumors

[Monkeypox name change does not matter](#)

Recent comments on the renaming of the monkeypox virus to mpox suggested that the name change is insignificant.

[COVID-19 vaccinated individuals have "died suddenly"](#)

Conversations about the "Died Suddenly" documentary have brought back false claims about clots in the deceased bodies of vaccinated people.

[Ebola cases are not being reported](#)

Nationwide school closures have left citizens speculating that Ebola cases may be prevalent in regions that are not being reported.

Key resources

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

Monkeypox content

- Latest Monkeypox VFA content: Monkeypox explainer [ENG](#) [FR](#)
- WHO Monkeypox Factsheet [[LINK](#)] and MPOX renaming process [[LINK](#)]

COVID-19 VFA content

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

Ebola content

- Mythbuster: Ebola isn't real [ENG](#) [FR](#)

Monkeypox name change does not matter

CONTEXT: Reports that the [WHO](#) will begin using a new preferred term, mpox, for the monkeypox virus, led online users from Africa and around the world to engage around the importance of the name-changing process. The change is the result of consultations that were held following racist and stigmatizing language appearing after the outbreak of monkeypox expanded earlier this year.



Engagement: 5 posts, 2923 likes, 877 retweets

- News agencies from around the world including [Kenyan](#) and [South African](#) agencies posted articles this week about the new nomenclature adopted for the Monkeypox virus, “mpox”. This change comes after concerns were raised about racist and stigmatizing language online around the Monkeypox virus. All screened comments on monitored Twitter and Facebook posts have labeled the renaming insignificant and did not consider it as a controversial label. ([LINK](#), [LINK](#), [LINK](#))
- Following a tweet by the [WHO](#), 40% of users suggested that the WHO is not a trusted agency, neglectful of more significant work. Comments regarding this post were negative to the WHO and were not dismissive of the misinformation. Claims which reinforce this narrative can be found below:

I am glad to see WHO concentrating on the important stuff.
Is this what we pay you for?
What a total waste of money and time
This doesn't make any sense. It's cringe-pandering and a solution in search of a problem.
Let's just call it the WHO pox!
So WHO themselves think that monkeypox is associated with black people?
So WHO is racist?

- South African users have also voiced out their thoughts on a monitored Facebook [post](#) by SABC News. The name change is considered trivial by all users with negative references made to WHO including:

“WHO/Bill Gates is the virus/pox that should be eradicated!!”

“😂😂😂😂 as the new energy drink yhoos desperation of WHO to vaccinate people haai to much”

“Ao WHO 🙄🙄 they rebranding their business”

“WHO must leave us alone please we don't need chemicals in our bodies anymore they must send their Mpox somewhere else not in Africa”

- ❑ In addition, more standard misinformation was also prevalent regarding the perception of monkeypox as a disease that discriminates and stigmatizes African and gay communities, as there are comments and images that reveal that this narrative is still prevalent around in international online communities.



Why is it concerning?

- Since users are unmindful of the new name change, this might affect further public health engagement and interventions in Africa including prevention and vaccination measures concerning mpox.
- The disbelief expressed in the renaming process of the monkeypox virus can potentially impact WHO credibility with online users.

What can we do?

- Align with WHO public health [advice](#) and updates regarding mpox nomenclature.
- Amplify VFA [messaging](#) that debunks the risk of becoming infected with mpox is limited to sexually active people or men who have sex with men.
- Explain the renaming process that was adopted and the [rationale behind](#) the new name. Clarify that there will be a transition period of 1 year where both monkeypox and Mpox will be used concurrently.

South Africa

COVID-19 vaccinated individuals have “died suddenly”

CONTEXT: An online influencer has garnered the [attention](#) of international and African online users through a tweet on the “Died Suddenly” documentary which has been watched by 7 million people within 24 hours on November 23rd. The documentary is bringing back false claims about clots in the deceased bodies of vaccinated people.

Engagement: **2 posts, 50.2k likes, 13.7k Retweets**



- After watching the [documentary](#), online users have not shared similar opinions. **32%** were able to debunk the misleading story, the images of people suddenly collapsing, and debunk the vaccine side effects with the provision of examples.
- 42.5%** of users felt afraid, shocked, and disgusted about the alarming images of clots being pulled from human bodies to suggest that COVID-19 vaccines have alarming side effects. Users also shared their regrets about being vaccinated. The rest of the users couldn't watch the documentary because of censorship issues.
- Following the increase of COVID-19 cases in South Africa and Kenya in recent weeks, some online commentators have reacted to the [news](#) by warning others about the release of the documentary. This means that some online users in Africa have already been influenced by the documentary and potentially share it with others as well. South African users have reshared the documentary in the following snapshots, following the alert shared regarding the increase in COVID-19 cases.



Why is it concerning?

- The greatest concern for largely negative responses is grounded in the power of visual communication which spreads emotional disinformation through the documentary through in-depth discussions with embalmers, sound effects, and examples of individuals dying suddenly.
- The “real” images and discussions have proved to have an effect such as anger, fear, and shock on many users including public health professionals who voiced their opinions on Twitter.
- Anti-vaccine messages are ‘stickier’ than pro-vaccine messages. The anti-vaccine social media account (Kim DotKom) has used persuasive techniques through its posts to influence the decisions of online users. The messages warn the users and show them as emotional, resonant, and salient.

What can we do?

- Amplify clear information from the [WHO](#) about the COVID-19 vaccine's Adverse Events Following Immunization (AEFI), and the reporting and monitoring process of AEFIs.
- Amplify the message that [COVID-19 vaccines](#) are safe and effective. Raise awareness regarding the higher risks of severe disease and mortality from COVID-19 infection for unvaccinated individuals compared to vaccinated ones.

Uganda

The real number of Ebola cases is being hidden from the population

CONTEXT: Recent reports of nationwide school closures in Uganda for the remainder of the year highlight the strategy to mitigate the spread of the Sudan ebolavirus, specifically in the younger populations that are exposed to high public interaction.

Engagement: 12 posts, 3000+ likes, 400+ comments

- The recent school closures have sparked debates in traditional and social media as to why institutions have been closed nationwide when many of them have not yet registered cases of the Sudan ebolavirus. This has led to speculation that there may be a greater number of Ebola cases than reported by the Ebola response as a method to curb panic.



- Additionally, some have criticized the school closures as ineffective or potentially putting school-aged children at a greater risk for exposure to the Sudan ebolavirus by shuttling them back to their communities in public transport which may increase their chances to come into contact with an infected individual.
- This was of greater concern in regions that have cases registered within their communities.

Why is it concerning?

- Online conversations show that each move made by the Ebola responders are questioned, particularly when information gaps seem to be prevalent following the implementation of a new strategy.
- Decisions around youth tend to drive increased scrutiny, but the news of the nationwide closures reached a much wider audience, beyond the regions that are actively combating the spread of the disease.
- This is important, as public health messaging will need to keep pace with the greater level of conversations and potentially misleading narratives that can develop with the higher engagement sparked by a nationwide strategy.

What can we do?

- Continue to share and expand upon transmission vectors for the Sudan ebolavirus. This subject matter can generate positive engagement so long as it is consistent, easy to digest, and direct in its messaging.
- Individual preventative measures are routinely discussed, yet macro-level approaches are often not explained in depth to illustrate the impact of these practices. Share literature and messages explaining large-scale preventative measures and how they complement individual behaviors to limit the spread of the Sudan ebolavirus.

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

Information Gaps

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

Transmission

- Is Monkeypox transmitted through monkeys?
- Can vaccinated people donate blood to unvaccinated people?

Side effects

- Can COVID-19 vaccines generate blood clots? Can blood clots occur after death?
- Can vaccinated individuals test for the presence of blood clots? Is regenerative medicine including ozone blood and stem cell therapies a solution?

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:

