

Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report

22-26 July 2023

(Weekly Brief #81)

Top concerns

[Traditional medicine, treatments, and cures for HIV](#)

A steady increase in HIV-related narratives has developed over the last several weeks in the Eastern and Southern regions of Africa, pinnacled by a prominent Kenyan public figure claiming faith-based cures for HIV in Kenya last week.

[Diphtheria in Nigeria](#)

With Diphtheria vaccine coverage at suboptimal levels amidst an ongoing outbreak, online users highlight a lack of awareness regarding symptoms and transmission modes regarding the disease.

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Public Health Infodemic Trends in the African Region

This weekly report provides key highlights and operational recommendations based on social listening data from 22-26 July in Africa.

For more information, please contact the WHO AIRA team:

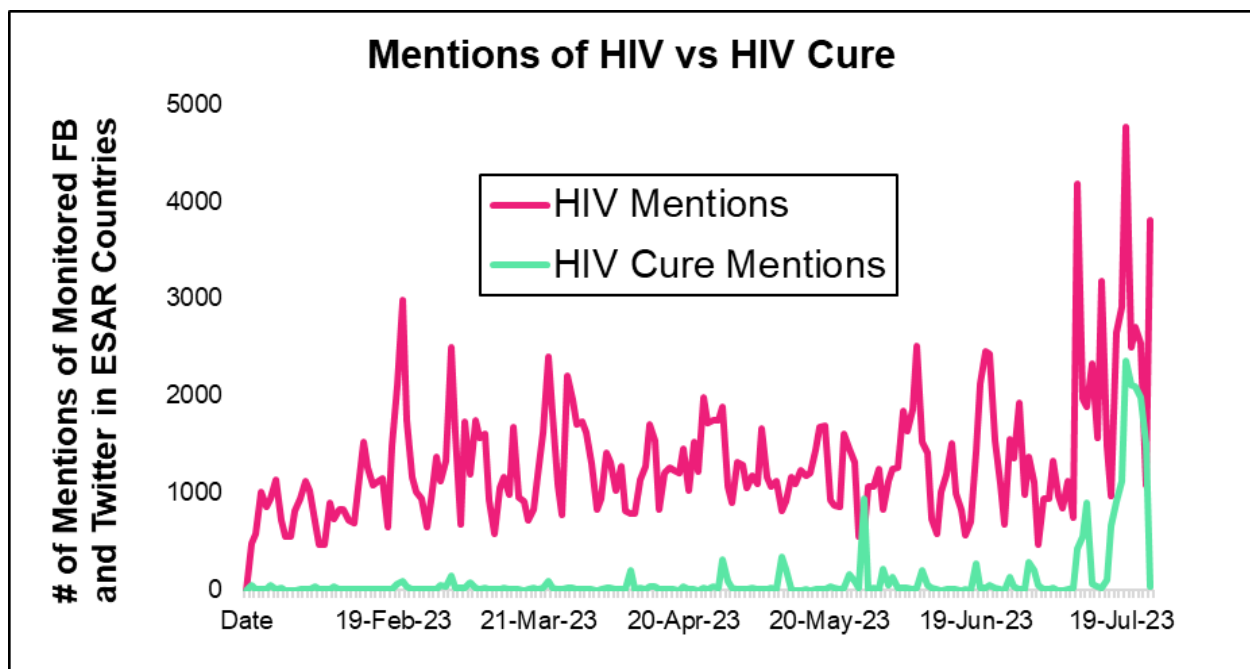
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Eastern and Southern Regions of Africa

Traditional medicine, treatments, and cures for HIV

The last six months have shown a consistent level of engagement regarding HIV on monitored channels of Facebook and Twitter, yet since early July over a 2000% increase of “HIV cures” mentions compared to the same period in January was established. Common HIV narratives from public health agencies such as the WHO, UNICEF, and IFRC have generally included awareness campaigns on safe practices against transmission, treatment success stories, and anti-stigmatization efforts throughout this period. However, in the last several weeks, a spike of inaccurate claims regarding home remedies, religious practices, and lack of concern for the risks posed by HIV has become pronounced.

For the first time in 2023, mentions of HIV cures briefly surpassed HIV mentions on social media pages. The following time series reflects roughly 41% Facebook comments to 59% tweets through the last six months.



“Mentions” refers to whether a post or comment contains the word/s “HIV”/“HIV Cure”

What is driving the recent spike?

Recent claims by Dr. Toromo Kochei, the Rift Valley provincial coordinator of the Kenya National Aids and Sexually Transmitted Infections Control Programme, suggested that multiple individuals that were [HIV positive had been cured](#) via the prophet Owuor’s faith healing program. Dr. Toromo is “part of televangelist Prophet Owuor’s defense team, brought by the church before the Senate to prove that miracles are legitimate and scientifically verifiable.”

His claim, however, was met with immediate [skepticism](#) and [ridicule](#) by large online audiences in Kenya, as Dr. Toromo has made radical revelations of religious miracles in the past ([LINK](#), [LINK](#)). Yet, over the following days, the article was shared and has seen a surge of religious backing from African social media accounts and offline conversations in Kenya as well as neighboring countries. ([LINK](#), [LINK](#), [LINK](#)) It is also notable that Dr. Toromo also acknowledged that there currently is no “conventional cure” for HIV.

Patients were cured of HIV/AIDS at Prophet Owuor's church - Dr Toromo Kochei tells Senate



citizen.digital

Patients were cured of HIV/AIDS at Prophet Owuor's church - Dr Toromo Koc...
Dr Toromo, the Rift Valley provincial coordinator of NASCOP, is part of televangelist Prophet Owuor's defence team, brought by the church before th...

Why is it concerning?

The high engagement with the claims of religious cures suggests a receptive audience to this practice that is likely not seen on social media platforms without some sort of provocation such as Dr. Toromo’s statements. Therefore, these beliefs may be more prominent than what is tracked in public social conversations.

Additionally, there have been attempts to use this wave of coverage for HIV cures to draw in engagement on dummy accounts such as [HIV Cure Permanently](#) that were established as the interest for HIV cures grew online.

What can we do?

Challenging religious beliefs deepens derision, and should not be approached with denials from public health agencies. However, consistent online messaging in these same channels regarding the ongoing risks of HIV and the lack of a cure exposes online users to appropriate content over time.

Sharing information such as the WHO guidance on prevention and treatment ([LINK](#)) and other easy-to-digest materials from vetted health authorities can be leveraged for high-velocity exposure during periods of HIV interest.

Nigeria

Diphtheria in Nigeria

Engagement: 29 posts, 3.9k interactions, 733 comments

Context: On July 21st, Senator Uba Sani, the Governor of Kaduna State, issued a [press release](#) on his Facebook page, informing the general public about a diphtheria outbreak in the state. In his post, he shared preventive measures to raise awareness among the public. According to the Nigeria Center for Disease Control's latest [situation report](#) on diphtheria, a total of 24 states have reported suspected diphtheria cases.

While diphtheria is a preventable disease, the [WHO stated in April of 2023](#) that, “the overall risk of diphtheria in Nigeria was assessed as high at the national level” and that, “the diphtheria toxoid-containing vaccine third dose coverage in Nigeria is suboptimal.”

Why is it concerning?

Diphtheria is a highly contagious disease, and Nigeria is currently facing suboptimal vaccination levels. A key factor in this lack of vaccine uptake can be attributed to low awareness of diphtheria's severity and transmission modes.

Diphtheria information is prevalent in some channels of online commentary regarding the disease. However, the top social media accounts sharing information on diphtheria (online profiles with the most followers) are highlighting the prevalence of the disease without covering transmission or symptomatic details.

This is evident as comments on these top pages are highlighting information gaps pertaining to the transmission and possible symptoms of the disease. This could be readily resolved if accurate disease information was shared in the appropriate channels while the attention of social media users is drawn to the issue.

What can we do?

Strategical placement of information is paramount for addressing information gaps in specific scenarios. As diphtheria cases at this level have not driven extensive media coverage, inserting informational material at the optimal inflection point defines two specific needs:

- Consistent monitoring of high-engagement social media accounts to capture narratives focused on public health issues to interject accurate information in the relevant timeframe.
- Rapid production and/or fully accessible repositories of easy-to-digest information be available for dissemination in the most trusted and used communication channels by the target population.

Trends to watch

Dengue fever in Ivory Coast

- On July 14th, Ivory Coast's Ministry of Health declared a dengue fever epidemic in the country, reporting 73 confirmed cases and 2 fatalities.
- The Ministry shared a [Facebook post](#) outlining the symptoms and preventive measures for public awareness.
- The news was amplified by various media outlets, including L'Ivoirien, [NCI info](#), [Pulse Côte d'Ivoire](#), and the Facebook page of a medical doctor called “[Allô Docteur](#)”.

Viral Facts informational material for Dengue fever: [English](#), [French](#)

Key resources

Dengue fever

- [WHO](#), Dengue fever fact sheet, [WHO](#), poster about Dengue type of exposure and prevention
- Viral Facts informational media for Dengue fever

Diphtheria

- Nigeria Centre for Disease Control [diphtheria fact sheet](#)
- Nigeria Centre for Disease Control Facebook [infographic on diphtheria](#)
- [WHO](#), Diphtheria fact sheet

HIV

- [WHO](#), HIV fact sheet

Methodology

The social media listening process relies on various social media analyses conducted for French, English, and Lusophone-speaking countries.

Engagements, or 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 (siloeed engagement).

The monitoring reports are produced using Meltwater, NewsWhip Analytics, Crowdtangle, Google Trends, and UNICEF Talkwalker dashboards as well as the WHO EPI-WIN weekly infodemic insight reports and the 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.