

Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report

5-12 September 2023

(Weekly brief #88)

Top concerns

[Concerns around climate change and the spread of cholera in Zambia](#)

Online users expressed their surprise at the outbreak of cholera in August, a typically dry season in Zambia, also raising concerns over the relation between climate change and the proliferation of diseases in the country.

[Concerns over malaria vector in Kenya fuel conspiracy theories](#)

Following a video about the malaria vector *Anopheles Stephensi* in Northern Kenya and its potential threat, online users have amplified conspiracy theories about the malaria vector.

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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 September 5-12 in Africa.

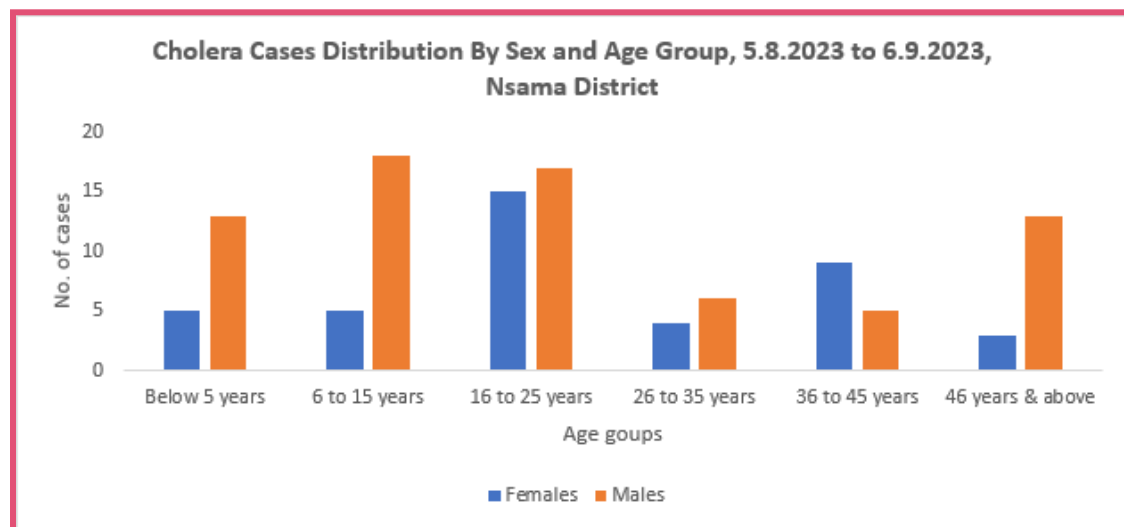
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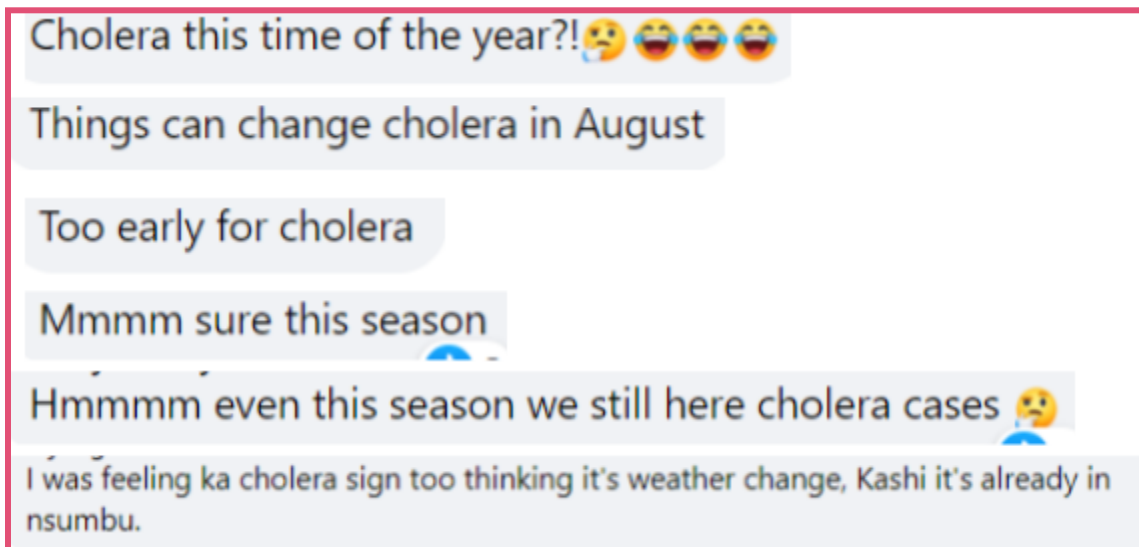
Zambia

Concerns around climate change and the spread of cholera in Zambia

- As per the latest [situation report from the Zambia National Public Health Institute](#) as of September 6th, there have been a total of 113 cumulative cases of cholera, in Nsama (Northern Province district) resulting in a case fatality rate of 4.4%.
- Notably, Nsama is among the nine districts nationwide that have been grappling with sporadic cholera outbreaks since January 21st, 2023 according to the situation report. It's noteworthy that the majority of cholera cases are concentrated among individuals aged 25 and below, particularly affecting young males. The cholera case distribution is shown below:



- The Ministry of Health in Zambia shared a [Viral Facts Africa video on cholera prevention measures](#) and an [informative poster](#) on how to prevent cholera on Facebook. Although the above content received limited engagement from users, the social media posts monitored below attracted a larger audience.
- We analyzed 12 posts from various Zambian online news agencies, such as [Zambia Today](#), Zambia Reports [[LINK](#),[LINK](#)], [Kalembe](#) and the [Zambia Education Information Centre](#). Several social media users expressed their surprise at the presence of cholera in August, typically the dry season, prompting concerns about its connection to climate change. Here are some comments:



- Google Trends data shows fluctuating levels of interest in the keyword "cholera" in Zambia since September 4th, with notable peaks in regions like the Northern province where cases have emerged. Furthermore, searches for "oral rehydration therapy" and "pandemic" emerged as breakout searches, indicating a heightened interest not only in cholera treatment but also an interest in the COVID-19 pandemic. While there is no government/media focus on COVID-19 on Zambian official platforms, the search might be attributed to queries about the relation between COVID-19 and cholera.



Google Trends - "cholera" in Zambia from 4 to 12 September

Why is it concerning?

- Nsama is located along the border with the Democratic Republic of Congo, where a [cholera outbreak](#) has also been recorded. There is a noticeable surge of cholera cases in other neighboring countries including [Burundi](#). Consequently, the issue of cross-border transmission, coupled with population displacement driven by climate change, is a matter of concern that can exacerbate the spread of the disease.

- As El Niño phenomenon approaches, discussions about climate change are set to escalate more in the region. Examples could be online posts such as that of the Ministry of Health in Zambia sharing a [weather alert about the increase of wind speeds](#) or the recent unveiling of [the El Niño preparedness plan by the Nairobi governor in Kenya](#) supporting proactive efforts to prepare cities for the expected rainfall.
- According to the [WHO](#), Climate change has the capacity to erode the advancements made in global health over the course of several decades. “Between 2030 and 2050, climate change is expected to cause approximately 250 000 additional deaths per year from malnutrition, malaria, diarrhea and heat stress alone.” Therefore continuous online monitoring about the interrelation between disease outbreaks and climate is of extreme importance.

What can we do?

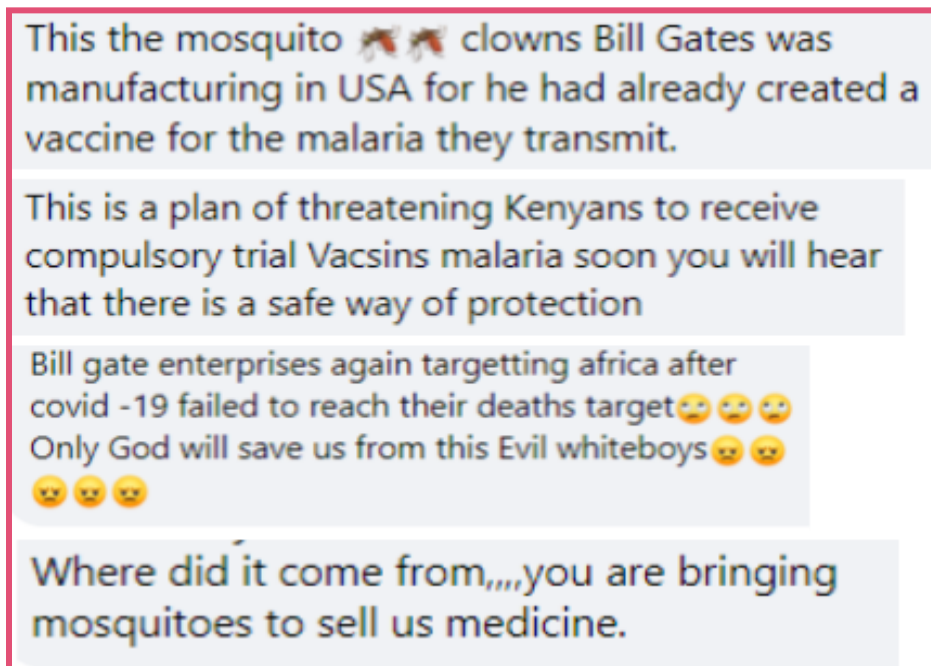
- Identify climate change threats on communities to enhance control and prevention interventions and mitigate the spread of disease outbreaks.
- Mobilize youths in Nsama through [the "local conference of youth"](#) and community groups to discuss ways to incorporate hygiene measures in their lives in order to prevent the spread of cholera.
- Amplify accurate information on the spread of cholera. The [WHO](#) fact sheet and VFA [social media kit](#) on cholera can be used as references and shared on WhatsApp groups in Zambia to share more knowledge about cholera.

Kenya

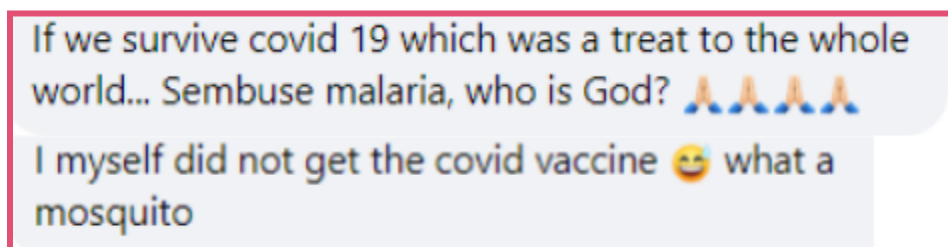
Concerns over malaria vector in Kenya fuel conspiracy theories

- On September 10th, [Citizen TV](#) disseminated a video in which scientists caution about the emerging threat posed by a new malaria vector [Anopheles Stephensi](#) in Northern Kenya, which is demonstrating increasing resistance to locally-used insecticides and is able to spread all year around (not only amidst the rainy season).
- At the time of monitoring, 18 commentators who engaged with Citizen TV's video put forth a conspiracy theory regarding the alleged role of Bill Gates in creating the mosquito and developing the malaria vaccine.
- Another user asserted that the emergence of the new mosquito was a deliberate decision to “threaten Kenyans into receiving mandatory trial

vaccinations against malaria”. Below, you can find a few examples of users’ comments:



- Two additional users drew analogies to the COVID-19 pandemic, pointing out that they had successfully gone through the challenges posed by COVID-19 suggesting that the mosquito threat should not be considered overly burdensome.



- It's worth mentioning that a prior post by CGTN Africa, the African division of the China Global Television Network run by China’s state broadcaster, shared on August 28th, regarding the [RTS,S malaria vaccine](#), has also attracted disinformation from online users. Although CGTN Africa typically receives limited engagement on their posts related to health in Africa, this particular post has spurred online [users to spread disinformation about malaria vaccine](#) as well as other diseases like HIV.
- In AIRA report #79, the discussion surrounding malaria remains consistent, with Kenyan users persistently sharing conspiracy theories related to Bill Gates'

alleged involvement and motives in "mosquito creation and vaccine development," along with the spread of disinformation regarding vaccine composition.

Why is it concerning?

- Conversations about the interrelation between climate change and disease outbreaks are likely to spike up in Kenya with the onset of El Nino approaching. In the absence of clear messages about the interrelations between climate change and health, people may turn to non-scientific explanations to make sense of the situation.
- [Scientists](#) are concerned regarding the potential spread of this mosquito species to major cities, notably the capital Nairobi, with a population of 5 million people. Their apprehensions stem from the mosquito's resistance to insecticides and its adaptability to various environments, "not conforming to typical rainfall patterns and persisting throughout the year".
- Malaria constitutes a significant public health concern in numerous African countries, among them Kenya. According to the CDC, Kenya experiences an estimated [3.5 million new clinical cases and 10,700 deaths each year due to malaria](#). According to the CDC, the residents of western Kenya, in particular, face an elevated risk of malaria transmission.
- Global conspiracy theories can significantly impact public health interventions by eroding trust in international health agencies and public health authorities. The lack of trust can lead to decreased adherence to health guidelines and vaccination campaigns, including the first-ever malaria vaccine, [RTS,S/AS01](#), to Kenya and to 11 other African countries, which was announced in July.

What can we do?

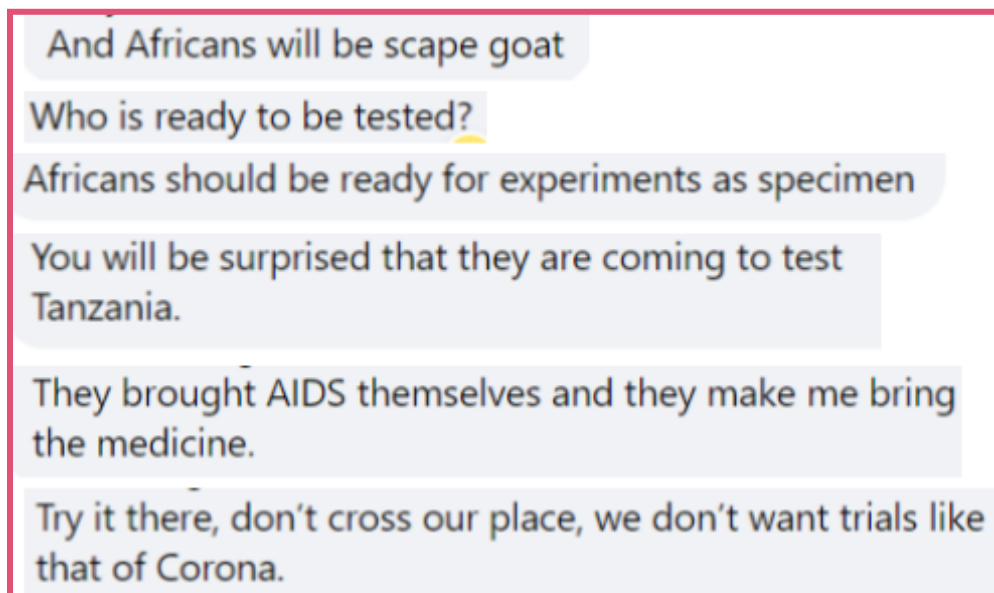
- Mobilize [trusted sources of information](#) including science communication specialists in creating messages about the benefits of the vaccine and limit the spread of mis/disinformation online. This can be amplified through interviews on social media platforms.
- Mobilize entertainment influencers in Kenya such as [Murugi Munyi](#) (363k followers), [Abel Mutua](#) (610k followers) to discuss the impact of climate change on Kenya during the upcoming months.
- Consistently debunking malaria conspiracy theories and disinformation is crucial. A similar example shared in AIRA report [#63](#) was a debunk published by the [Nation Group](#) that fact-checked a false narrative concerning the new malaria vector in Northern Kenya.

- Closely monitor the concerns and information gaps about malaria (including its cause, treatment, prevention) and address gaps during the [vaccination malaria rollout planned between 2023 and 2025](#).

Trend to watch

Conspiracy theories surround BBC Swahili HIV treatment article

- An [article](#) from BBC Swahili discussing an upcoming HIV treatment trial has drawn significant interest from African commentators. The article talks about anti-retroviral therapy trials expected to commence in Denmark before year-end, potentially introducing a cure for the AIDS virus.
- BBC Swahili shared three Facebook posts [[LINK](#), [LINK](#), [LINK](#)], which have collectively generated 1.9k comments at the time of monitoring. This suggests that the topic is likely to gain significant traction, especially when the HIV treatment is ready for distribution.
- Online users who commented on have expressed misinformed beliefs, suggesting that Africans might become subjects of upcoming trials. Users asserted the existence of a conspiracy behind the creation of “AIDS”, claiming that Western countries both created it and are now developing its treatment. Additionally, a user has rejected vaccine trials, drawing parallels with the COVID-19 vaccine trials. Below are some comments:



Key resources

Cholera

- [WHO](#), Multi-country outbreak of cholera, External situation report #5
- [WHO](#), cholera outbreaks, W&A
- [WHO](#), Cholera fact sheet
- [VFA](#), cholera social media toolkit
- Social Science in Epidemics: [cholera lessons learned](#)
- [Global Task Force on Cholera Control](#), clarifying rumors and community concerns.

Malaria

- WHO [Q&A on RTS,S malaria vaccine](#)
- WHO [First Malaria vaccine supply allocations](#)
- UNICEF, [Malaria vaccine Q&A](#)
- Gavi, [Malaria vaccine market shaping roadmap](#)
- WHO, [The RTS,S malaria vaccine](#)

Methodology

The social media listening process relies on a combination 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 (siloeed engagement).

The monitoring reports are produced using 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.