

Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report

10-17 October 2023

(Weekly brief #93)

Top concerns

[Infodemic around the malaria vaccine and genetically modified mosquitoes in Kenya, Uganda and Burkina Faso](#)

This week, anti-vaxx users, influential local authorities and private users contributed to an infodemic about the malaria vaccine and genetically modified mosquitoes.

[The lack of access to safe water in Zimbabwe as a key barrier to stop the spread of cholera](#)

Zimbabweans complain about the lack of access to safe water amidst a cholera outbreak in the country.

[Ahead of an HPV vaccination in Nigeria, both misinformation and debunks circulate online](#)

While some users shared misinformation about the HPV vaccine, a higher number debunked unverifiable information about the HPV vaccine.

Reference Guide

[Infodemic around the malaria vaccine and genetically modified mosquitoes in Kenya, Uganda and Burkina Faso](#).....Pg. 3

[The lack of access to safe water in Zimbabwe as a key barrier to stop the spread of cholera](#).....Pg. 5

[Ahead of an HPV vaccination in Nigeria, both misinformation and debunks circulate online](#).....Pg. 7

Trend to watch

[World polio day on 24 October](#).....Pg. 9

[Key resources](#).....Pg. 9

[Methodology](#)Pg. 10

Public Health Infodemic Trends in the African Region

This weekly report provides key highlights and operational recommendations based on social listening data from October 10-17 in Africa.

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Infodemic around the malaria vaccine and genetically modified mosquitoes in Kenya, Uganda and Burkina Faso

Engagement: **46 posts, 11.3K likes, 1.7K comments**

- The [Uganda Virus Research Institute's](#) (UVRI) project to breed genetically modified (GM) mosquitoes gained attention from online users in [Uganda](#) and [Kenya](#). It sparked concerns about [potential health and environmental](#) impacts, including [genetic](#) modification in humans, [fears of another pandemic](#), and concerns if GM mosquito bites [cure](#) or [increase](#) malaria cases. Some users also share misinformation that [GM mosquitoes spread HIV](#), referenced [depopulation theories](#), and [warned of "science scams"](#).
Meanwhile, news about a new drug for severe malaria treatment developed by [Chinese Fosun Pharma](#) received limited engagement on [Facebook](#) and [X](#).
- In our last [AIRA report](#), we highlighted concerns about an unknown illness at a girls' school in Kenya. This week, we spot the spread of disinformation linking girls' "paralysis" to a "Bill Gates-funded malaria vaccine", propagated by [Now the End Begins](#) (NTEB) and retweeted by [African](#) and [international](#) users. [NTEB](#) [39.7k followers] connects current events to biblical end-time prophecies and displays anti COVID vaccine sentiment on its [website](#).
- In Uganda, several African social media users retweeted a video shared by [Joseph Kiiza Kabuleta](#) [40.6k followers], a former presidential candidate in Uganda and a [vocal anti vaxxer](#). The [video](#) features him saying that the vaccine has [0% protection](#) against malaria. Users also spread misinformation that the [malaria vaccine is "mRNA just like the COVID shot"](#) and referenced the malaria vaccine as ["billionaires' plan" to depopulate the world](#).
- [10%](#) of Burkinabe commentators warned of the harm caused by GM mosquitoes on a Facebook post by local authorities on a [spraying strategy](#) deployed to combat dengue, malaria and chikungunya. This has been also prevalent in [previous conversations](#) among Burkina Be online users.

Why is it concerning?

- Anti-vaxx groups are impacting public perception of the malaria vaccine by fostering increased skepticism regarding the "paralysis" that affected girls in Kenya. This heightened skepticism has the potential to further entrench doubts

about the vaccine's effectiveness, particularly among individuals who were already hesitant about its use.

- Concerns and misinformation about GM mosquitoes and their impact on individuals and the environment are increasing in the African region.
- Misinformation around COVID-19 pandemic still impacts other vaccine narratives. This fuels broader vaccine hesitancy, causing people to be skeptical of all vaccines, including those that have been proven to be safe and effective.
- Influential local authorities that endorse anti-vaxxer beliefs and emotional disinformation might deepen them among their followers especially with the use of unverifiable sources of information about the vaccine and its testing procedure in the region.

What can we do?

- Collaborate with trusted scientists such as Dr. Jonathan Kayondo, principal research officer at UVRI, to provide clear information on genetically modified mosquitoes and to debunk misinformation spreading around the malaria vaccine.
- Equip journalists and public health specialists with [essential guides to debunk online misinformation](#) and engage scientific journalists with verifiable facts on GM mosquitoes to share online and host-led discussions. Fact checkers can also amplify debunks about the harm of GM mosquitoes and disinformation about the malaria vaccine.
- Collaborate with local health authorities to share verifiable information about the malaria vaccine ahead of vaccination campaigns.

Zimbabwe

The lack of access to safe water in Zimbabwe as a key barrier to stop the spread of cholera

Engagement: **15 posts, 1K likes, 341 comments**

- Residents in Harare voiced their complaints regarding the inadequate access to safe water in [two tweets](#) shared by the "City of Harare", which boasts 96.2k followers. Below are some of the comments:

Biggest challenge with this imminent cholera outbreak is the unavailability of council water, residents need tap water to fight the spread of the disease, please pump water to the residents

No running water in Budiro for a month, especially Budiro 1. If no action cholera is unavoidable.

Lack of clean running water, uncollected refuse, blocked sewer system make us prone to these pre-medieval diseases.

You are giving us useless instructions on how to avoid cholera instead of giving yourselves instructions on how to protect residents from Cholera!

- 1) Filthy streets with pollution everywhere
- 2) Sewage
- 3) Dirty water from the taps!

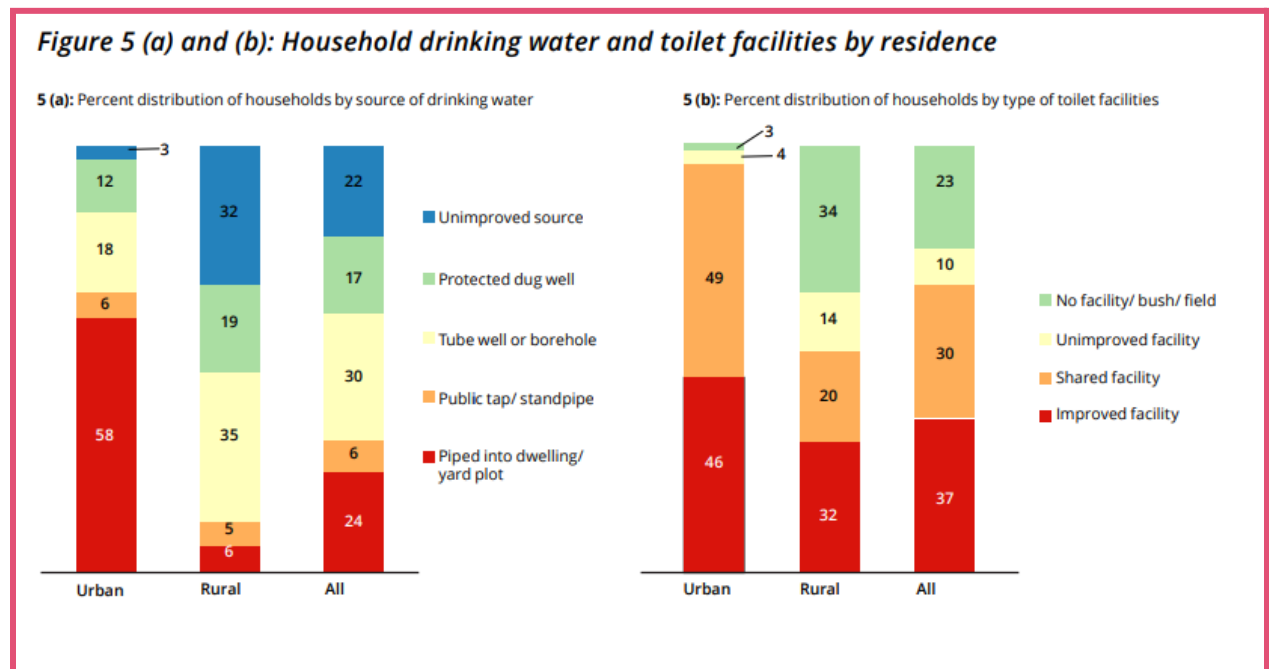
What do you expect?

- [South African](#) and [Zimbabwean](#) users also voiced on X their distrust in local authorities' handling of the outbreak including concerns, such as authorities coming into contact with patients while not wearing protective equipment, which raised doubts about the effectiveness of safety measures.
- A multi-agency mission, including WHO and Zimbabwe's Ministry of Health, visited the cholera epicenter in Buhera, Manicaland province. The Minister of Health, Dr. Douglas Mombeshora, stressed the need to [improve water and sanitation to curb the outbreak](#).
- Last month, 263Chat.com, a Zimbabwean online news platform with 266K Facebook followers, highlighted [how spiritual beliefs in Buhera hinder people from seeking medical care](#), posing a significant obstacle to cholera control.

Why is it concerning?

- According to the weekly bulletin on outbreaks and other emergencies, the first cholera outbreak in Zimbabwe in 2023 started on 12 February. "[Cumulatively there were 4 106 cholera cases with 112 deaths \(CFR 2.5%\) as of 24 September 2023](#)". All of the ten provinces are affected with the majority of the cases reported from Manicaland, Harare, Mash West and Mash Cent provinces.
- Cholera is endemic in Zimbabwe and displays a seasonal pattern which correlates with the rainy season. However, WHO warns that the risk of waterborne diseases is increasing with climate change, and limits [access to clean water and sanitation which create an ideal environment for cholera to thrive](#).

- According to the Zimbabwe multi-sectoral cholera elimination plan 2018-2028, [sources of household drinking water and toilet facilities in urban and rural areas are diverse](#). “More than half of urban households (58%) drink water that is piped into the dwelling, yard, or plot compared with six percent rural households. In rural areas, tube wells or boreholes are the main source of drinking water (35%), followed by protected and unprotected dug wells (19% and 16%, respectively) (figure 5a).”



Source: Zimbabwe multi-sectoral cholera elimination plan 2018-2028

What can we do?

- Advocate for the identification of “cholera hotspots” as priority areas for interventions, such as the implementation of long term water and sanitation infrastructure. A map of cholera hotspots helps to address cholera that persists or reappears regularly (episodic epidemics).
- Collaborate with public settings in both urban and rural areas to promote cholera preventive and treatment behavior including schools, markets, religious/faith based groups, taxi and bus ranks/terminals, cultural groups, adolescent and women groups.
- Advocate for water quality monitoring to ensure the standards of sanitation and hygiene are achieved.
- Continue to engage with communities and conduct social listening to monitor if there are changes in the discourse online and offline and address concerns as soon as they arise.

Nigeria

Ahead of the HPV vaccination in Nigeria, both misinformation and debunks circulate online

Engagement: **17 posts, 2.2K likes, 311 comments**

- As Nigeria prepares to introduce the [Human Papilloma Virus \(HPV\) vaccine](#) into its routine immunization scheduled on 24th of October, social listening findings this week reveal that some online users on Facebook and X (formerly Twitter) are disseminating misinformation and disinformation about the vaccine through comments and posts but also debunking unverifiable information.
- In response to a post by Punch Newspapers, a prominent Nigerian online news agency with 4.3 million followers, [11 commentators voiced their concerns](#) including distrust in pharmaceutical companies, the relation between HPV vaccine and depopulation theory. An online user questioned why vaccines are administered to girls between 9-14 and its potential implications on girls who experience early puberty. Below are their comments:

This same HPV vaccine has been banned in japan and other European countries..


I hope, is not this vaccine I'm hearing, they introduced to reduce population?

Hmmmm why 9-14? Puberty age for some girls start early,what is the health implications on the girl child. May God save us o

Don't trust any pharmaceutical companies!

Do not take it!!!!!!

- On X, a post by "Anambra 1st Son" who has 236.3K followers, [raised concerns about the HPV vaccine](#) and garnered 215.3k views. The post included a video featuring a girl who allegedly experienced paralysis after her first dose of the vaccine. The video questions the efficacy of the HPV vaccine in preventing cervical cancer. Additionally, the post highlights a lawsuit in the US related to the HPV vaccine, specifically focusing on cases of ovarian failure that reportedly led to infertility in women who received Gardasil.
- However, a majority of the 179 online users who commented on his post questioned his rationale. Below are some comments:

Calm down bro. Vaccines  aren't bad , especially one that's undergone all the necessary trials and certifications.

It's vital for the body to be sensitized and form immunity against the potential antigen in the future .

This is how these people spread lies n miss misinformation, the same nonsense you all peddled during COVID-19. Some of you should be arrested for this kind of action.

Do you know how many women die of cervical cancer yearly. This is wrong ichie. What do you have against the vaccine ? At least back up your distrust for the vaccine with some actual facts.

Other users commented on other users' comments regarding the [potential side effects of the Gardasil HPV vaccine](#) and mentioned the fact that it had been [banned in the USA](#). The claim that the Gardasil HPV vaccine was banned was [debunked](#) by the Associated Press.

Why is it concerning?

- In a news release in January 2023, the World Health Organization (WHO) stated that “[cervical cancer ranks as the 2nd most frequent cancer among women in Nigeria and the 2nd most frequent cancer death among women between 15 and 44 years of age.](#)”
- Male and female online users who promote anti-vaccination content, and conservative viewpoints are more skeptical about the vaccine and its potential side effects on women in Nigeria.
- A high percentage of male commentators expressed their perspectives on the burden of HPV on women in Nigeria. This could potentially impede women from openly sharing their personal experiences and concerns about HPV.

What can we do?

- Clarify why the vaccine is administered to girls aged 9 to 14 and provide a simple, understandable explanation of the vaccine's potential side effects. Reinforce the importance of vaccination by highlighting the higher health risks associated with the disease.

- Building awareness of the HPV vaccine through regular health talks with trusted healthcare workers about the vaccine during routine immunization sessions can help parents make informed based decisions about the vaccine.
- Continuous debunking posts that criticize the vaccine helps in countering misinformation and providing the public with accurate, evidence-based information, fostering a more informed and confident approach to vaccination decisions.

Trend to watch

World Polio Day

- Every year on 24 October, [World Polio Day](#) raises awareness of the importance of polio vaccination to protect every child from the disease.
- Continuous monitoring of the conversation in the African region ahead of World Polio day and on 24 October is essential to debunk any misconception and address rumors and misinformation spread online.

Key resources

HPV

- [VFA](#), HPV social media toolkit
- [WHO](#), Cervical cancer fact sheet
- [PAHO](#), HPV Explainer

Malaria

- WHO [initiative](#) to stop the spread of Anopheles stephensi in Africa
- [VFA](#), malaria social media toolkit
- WHO, malaria fact [sheet](#)
- Malaria threat [map](#)
- Malaria social & behavior change communication national [strategies](#)

Cholera

- [WHO](#), multi-country outbreak of cholera, external situation report #5
- [WHO](#), cholera outbreaks, Q&A
- [UNICEF Zimbabwe](#), cholera awareness mini-series
- [VFA](#), cholera social media toolkit
- Social Science in epidemics: [cholera lessons learned](#)

- [Global Task Force on Cholera Control](#), clarifying rumors and community concerns.

Polio

- [WHO Afro](#), world polio day communication toolkit
- [WHO](#), Polio fact sheet
- [Global Polio Eradication Initiative](#), Polio-Eradication-Strategy-2022-2026
- [VFA](#) polio social media toolkit
- [Global Polio Eradication Initiative](#) communication toolkit and technical guidance in French and English
- UNICEF, Digital community engagement polio newsletter, prebunking messages on polio [[ENG](#), [FR](#)]

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 (siloes 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.