

Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report

21-28 November 2023

(Weekly brief #98)

Top concerns

[Vaccine disinformation follows RTS,S malaria vaccine dispatch to Cameroon](#)

Vaccine disinformation and misinformation spread following the shipment of WHO-recommended RTS,S malaria vaccine in Cameroon.

[Impact of El Niño in Kenya amid fears of outbreak of waterborne diseases](#)

Residents in Kenya are increasingly frustrated as the effects of El Niño take a toll on their livelihoods, leading to substantial crop losses and economic hardships.

[Disinformation and vaccine hesitancy during HPV vaccination in Togo](#)

Online disinformation fuels vaccine hesitancy during the HPV vaccination campaign in Togo.

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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 November 21-28 in Africa.

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Vaccine disinformation follows RTS,S malaria vaccine dispatch to Cameroon

Engagement: **43 posts, 6912 likes, 853 comments**

Social media commentary and situation at a glance

- On 21 November, the Ministry of Public Health in Cameroon posted a press release on Facebook, announcing the [acquisition of 331,000 doses of the RTS,S malaria vaccine](#).

The news gained broad exposure, shared by international and Cameroonian news agencies like [BBC News Africa](#), [Cameroon News Agency](#), [CRTV web](#), and [journalduCameroun.com](#). The Expanded Immunization Programme in Cameroon amplified the message with four Facebook posts [[LINK](#), [LINK](#), [LINK](#), [LINK](#)].

Accounts disseminating vaccine disinformation in Africa were closely monitored.

Alexandra Henrion-Caude (156K followers)

- [Alexandra Henrion-Caude](#), a French RNA specialist and anti-vaxxer with 156K followers, spread vaccine disinformation. She selectively quoted from a [Science Magazine article](#), alleging severe side effects of “anti-malaria vaccines” (including meningitis) without mentioning that “safety issues disappeared when the vaccine was administered” to more children than in clinical trials leading WHO to approve it. [She additionally urged users to individually alert all Cameroonians](#). She further circulated a video by [Joseph Kiiza Kabuleta](#), a vocal Ugandan [anti-vaxxer](#), who spread multiple disinformation about the malaria vaccine. This includes claims that “It’s mRNA just like the COVID shot”, low efficacy after vaccination, and a 10-fold increase in meningitis cases among vaccinated people. [AIRA’s report 93](#) highlighted retweets of this video by several African social media users. A Malawian online user also [posted the same video](#), providing commentary on news of the malaria vaccine.

Maitre Sikati (14K followers)

- In the same line, [Maitre Sikati](#), a Cameroonian lawyer with 14K followers, spread vaccine disinformation by quoting the same Science magazine article. He also promoted vaccine hesitancy, suggesting that pharmaceutical companies lobby to include their vaccines in health programs for profit only.

Nathalie Yamb (374K followers)

- Nathalie Yamb [374K followers] is a pan africanist whose tweet amplifies [vaccine disinformation, the spread of divisive rhetoric and animosity towards global health leaders](#). Many commentators align with the sentiment urging [Africans to resist and boycott vaccination](#).

An online user has cited the book "Kenya Today: Breaking the Yoke of Colonialism in Africa" to illustrate the argument that [Africa has been positioned as a testing ground for medical experiments](#)

Egountchi Behazin (17.1K followers)

- Egountchi Behazi, a political activist and pan africanist, with 17.1K followers on his X account, shared **12 tweets that spread disinformation** about the RTS/S vaccine and its dispatch in Cameroon including:

1. [Contestation](#) of Gavi, and WHO who did not respect the normal vaccine approval process of the vaccine.
2. [Call to distrust Cameroonian authorities](#) after engaging in a [direct conversation](#) with the Cameroonian Health Minister on X and not being satisfied with his answers.
3. Alert over using [Africans as guinea pigs](#) to test the vaccine.
4. Alert over **side effects** including [risk of cerebral malaria and meningitis in young girls](#), and increase in the probability of febrile convulsions.
5. Selective quotes from the same [Science Magazine article](#), alleging severe side effects of "anti-malaria vaccines".
6. [Low efficacy](#) of the RTS/S vaccine at 55% after 4 doses compared to R21/Matrix M at 77%

His [4-minute video](#) including all the above mentioned references garnered 3900 views on YouTube and has been shared among WhatsApp users.

- In general, the comments predominantly expressed anti-vaccine sentiments and [conspiracy theories](#), often referencing concerns about depopulation in Africa. Online users questioned the [differentiation between malaria vaccines and those for COVID-19](#). They inquired about its variance from [anti-malarial tablets given to infants during hospital vaccinations](#) and expressed concerns about the [duration of protection](#). Below are some examples:

I hope it will not be compulsory. Africa will always remain a dumping and testing ground for Europeans.

Don't allow your children to take those vaccines. Think of what happened to a child in the South region because of vaccine.

We hv mosquito nets no need for vaccine. Remember the woman whose daughter got blind n paralyzed because of vaccine. No me ooo

Vaccine in Cameroon is a time bomb. I remember the story of that poor girl that was abandoned in India because of vaccine

Nobody should allow his child to take that thing for a very simple reason all of us have malaria in us already

Why is it concerning?

- The Cameroonian Ministry of Public Health reports [a high endemicity of malaria in the country, with nearly 6 million cases and approximately 4,000 deaths annually](#). The majority of these fatalities occur among children under the age of five. Although there is a positive trend reflected in national surveillance reports, indicating a reduction in malaria-related deaths from 18% in 2019 to 13.5%, the persistently high number of cases underscores that malaria remains a significant public health challenge in Cameroon despite ongoing efforts.
- In [AIRA Report 93](#), we emphasised the retweets of Joseph Kiiza Kabuleta's video by multiple African social media users. Notably, the same video was reshared in comments and by other anti-vaxxers. This behaviour underscores the common practice among anti-vaxxers to amplify beliefs and spread emotional disinformation by consistently retweeting content from like-minded individuals.
- It is concerning when anti-vaxxers selectively quote from reputable sources like Science Magazine to deceive online users. This distorts the scientific information, misrepresents the context and contributes to vaccine hesitancy.
- Relying on disinformation accounts who may lack the necessary background to accurately interpret scientific information about vaccines can exacerbate vaccine hesitancy.

What can we do?

- Emphasise verifiable sources for information on the new malaria vaccine and its safety and approval procedure at the global and national levels. This can be coupled with countering [anti-vaxxers disinformation](#) with fact-checking articles.
- According to the WHO, "[As African countries finalise vaccine rollout plans, an extra 1.7 million doses will be delivered to Burkina Faso, Liberia, Niger, and Sierra Leone in the coming weeks](#)". Anticipating upcoming information by preemptively addressing and debunking mis/disinformation about the malaria vaccine can be beneficial.
- Amplify the findings of pilot programmes in Kenya, Malawi and Ghana since the launch of the programme in 2019. WHO signals a "[strong community demand for \[malaria\] vaccine](#)". Identify the lessons learned from those countries including how to build trust with communities about the vaccine.
- Highlight the [WHO's guidance on trusting health workers as a reliable source for the success of the Malaria Vaccine Implementation Programme in African countries](#).
Recognize community health workers as change-makers for enhanced child health and strengthened malaria control.

Kenya

Impact of climate crisis in Kenya amid fears of outbreak of waterborne diseases

Engagement: **32 posts, 3768 likes, 943 comments**

Social media commentary and situation at a glance

- Recent floods in Kenya were forecast [in advance](#) by the [Kenya Meteorological department](#). However, el Niño rains exacerbated frustrations among residents in affected areas including Nairobi, Mombasa, and Garissa.
- After the floods, a minimum of 10 online media agencies and [Doctors without borders](#) magnified the potential health risks that could ensue.
- In Nairobi's informal settlements, residents complain of "[dilapidated sewerage systems](#)" as well as fears of the spread of cholera.
- Farmers in Garissa County suffered crop losses, as reported by [Kulan Post](#) on TikTok, an online agency covering stories from Northern Kenya.
- On November 24, Médecins Sans Frontières (MSF) highlighted that [the ongoing floods pose a significant health threat to the residents of Dadaab](#).

The prolonged absence of access to clean drinking water increases the risk of outbreaks of waterborne diseases including cholera.

- Citizen TV reported that the [heavy rainfall in Lamu Island has raised concerns about the potential spread of diseases](#). In response, the county government has issued an order to close stalls, prompting complaints from business owners who are facing financial losses due to the enforced closure.
- Cape media africa alerted its audience about “[a potential surge in malaria cases in the Horn of Africa due to ongoing heavy rains and widespread flooding attributed to el Niño.](#)”

Why is it concerning?

- According to WHO’s fact sheet on climate change, “[climate change is directly contributing to humanitarian emergencies from heatwaves, wildfires, floods, tropical storms and hurricanes and they are increasing in scale, frequency and intensity.](#)”

From a climate and health perspective, the impact refers to the consequences and implications that climate-related factors have on public health. The vulnerability of different populations to these climate-induced health risks is concerning.

- The United Nations Environment Programme (UNEP) highlights [economic loss and damage as adverse consequences of climate change](#). These impacts extend beyond environmental changes, affecting economies and livelihoods.
- UN women highlights how “[the climate crisis is not gender neutral](#)”. Women can face more challenges such as further travels to collect household items, decreased productivity, increased threats to their safety.

What can we do?

- Advocate for sustainable practices, early warning systems, and resilient healthcare infrastructures to protect communities from the health impacts of a changing climate.
- Fostering community engagement and participation in local climate resilience initiatives can be beneficial. Encourage citizens to actively contribute to and participate in community-led programs that aim to address climate-related health challenges.

Togo

Disinformation and vaccine hesitancy during HPV vaccination in Togo

Engagement: **10 posts, 574 likes, 29 comments**

Social media commentary and situation at a glance

- On 27 November, the Ministry of Health in Togo [launched a Human Papillomavirus \(HPV\) vaccination campaign](#).
- The news was amplified by UN agencies including [WHO](#) and [UNICEF](#) but also by accounts that spread disinformation and sowed vaccine hesitancy.

Dr. Emmanuel Sogadji (321 followers)

- In a tweet, Dr. Emmanuel Sogadji, President of the Togo consumers' league, [advised his child against taking the vaccine "in trial"](#).
- Togoscoop, a local online news agency, highlighted that Dr. Sogadji alerted Minister Moustafa Mijiyawa to the [potential consequences of widespread inoculation with a "trial vaccine"](#).
- Dr. Sogadji underscored that the memories of the COVID-19 pandemic, including vaccination and the "revelations" that followed, still resonate in the collective memory, justifying parents' concerns about the vaccination campaign.
- In a tweet, journalist Albert Agbeko, also amplified [the concerns of the Togo Consumers' League](#).

Egountchi Behanzin (17.1K followers)

- In a 20-minute YouTube video, Egountchi Behanzin, spread [HPV vaccine disinformation, fostering hesitancy among Togolese and African parents](#).
- He contrasted France, where the vaccine is recommended but not mandatory, with Togo, claiming children are "forced" to take it without parental consent.
- Behanzin talked about financial benefits for politicians and healthcare workers from each administered vaccine in Togo. He also expressed his concern about the lack of public information on the vial contents received by the Togolese government.
- Behanzin disseminated three tweets [[LINK](#), [LINK](#), [LINK](#)] urging Africans to reject vaccination. The tweets promote conspiracy theories, suggesting that African leaders allow their populations to be used as guinea pigs for unverified vaccines administered to children without parental consent.

Why is it concerning?

- As per the Information Centre on HPV and Cancer, [annual estimates suggest that 455 women receive a cervical cancer diagnosis, and 309 succumb to the illness](#). Cervical cancer stands as the second most prevalent cancer among women in Togo and ranks as the second most frequent cancer in women aged between 15 and 44 years.
- Dr. Michael Hameleers, assistant professor at the Faculty of Social and Behavioral Sciences at the University of Amsterdam, identifies **three motivations behind disinformation**. These include disinformation driven by financial gains, ideological motivation, or politically motivated disinformation. **Ideologically motivated disinformation seeks to influence recipients by promoting specific ideas, values, and/or identities.** [“The identification of ideological motives may help to reveal which beliefs and identities are targeted by malign actors, and which segments of the audience are potentially reached by content that reassures or attacks their ideological beliefs.”](#)¹

What can we do?

- Conducting comprehensive training programs for journalists to equip them with the necessary skills and tools to effectively debunk claims is beneficial. This includes reinforcing capacity on how to report on mis and disinformation without spreading falsehoods further.
- Encouraging collaboration between journalists and fact-checking organisations fosters a collective effort in debunking false claims. Journalists can leverage the expertise of these organisations to verify information effectively. Debunking disinformation to depict a positive immunisation experience is important at this stage.
- Consider boosting social media messaging on vaccine effectiveness with fact-based information showing that the HPV vaccine is effective against cervical cancer. Viral Facts Africa produced an HPV explainer in [English](#) and [French](#) to reinforce the safety of the vaccine.
- Explore vaccine acceptance among parents to recognize and address emerging concerns, disinformation or information gaps.

¹ Michael Hameleers, Disinformation as a context-bound phenomenon: toward a conceptual clarification integrating actors, intentions and techniques of creation and dissemination, *Communication Theory*, Volume 33, Issue 1, February 2023, Pages 1–10, <https://doi.org/10.1093/ct/qtac021>

Persistent trend

Burkina Faso

Dengue in Burkina Faso: challenges in debunking misinformation

Engagement: **31 posts, 12,360 likes, 747 comments**

Social media commentary and situation at a glance

- As per the Minister of Health, Dr. Robert Lucien Jean-Claude Kargougou, [the epidemiological situation of dengue is currently active but being effectively managed](#). There is a discernible downward trend observed in the incidence of new cases, severe cases, and fatalities.
- Dr. Emmanuel Nanema, the General Delegate of the National Centre for Scientific and Technological Research, [debunked online misinformation](#), highlighted in [a previous AIRA report](#). He clarified that mosquitoes released during the Target Malaria campaign were employed in the fight against malaria and did not spread the current dengue outbreak.
- A total of 323 online users, in response to Dr. Emmanuel's clarification on the Facebook post, commented on Facebook posts by [Agence d'Information du Burkina \(AIB\)](#) and [Burkina 24](#). They contested his statement. They expressed [scepticism](#) and [lack of trust](#) in scientific research. An online user asserted that dengue either did not exist or was not widely known before 2019. [The disease occurred only after a few years of releasing genetically modified mosquitoes](#). Another user inquired about the [duration of the study conducted](#) on genetically modified mosquitoes before their release into the wild. A different user shared misinformation, [asserting that both diseases originate from the same mosquito](#), which is not accurate.
- Addressing the resilience of misconceptions poses a significant challenge, as mere debunking often falls short in convincing individuals to reevaluate their beliefs. An alternative approach can involve cultivating an environment that empowers individuals to actively seek and discover accurate information independently.
- Dr. Djire, a doctor from Burkina Faso, in a [video by Malian broadcasting company, Kati 24](#), [1.2 million followers], shared a conspiracy theory. He believes that the dengue outbreak was intentionally created by western powers to destabilise the Sahel region. This comes after Russian biomedical experts visited the country.

Trends to watch

Democratic Republic of Congo

First documented case of sexual transmission of clade I

Monkeypox in the Democratic Republic of Congo

- The WHO shared a report about [the first known case of sexual transmission of clade I Monkeypox \(MPXV\)](#).
- He is a Belgian resident who, while visiting the Democratic Republic of the Congo, tested positive for clade I in Kenge, Kwango province.
- Sexual contacts of this case in the Democratic Republic of the Congo also tested positive for clade I MPXV, with closely related viral sequences.
- Until April 2023, there were no officially documented cases of sexual transmission of clade I MPXV reported globally. This marks the first instance where a reported clade I MPXV infection is associated with sexual transmission.

China

Upsurge of respiratory illnesses among children in Northern

China

- The [recent surge in respiratory illnesses](#) among children in northern China raises concerns not only about the immediate health implications but also about the potential for disinformation campaigns to exacerbate the situation.
- Drawing from past experiences with COVID-19 disinformation, it becomes imperative to closely monitor disinformation groups and anti-vax accounts, both on an international scale and within African networks. Here are a few examples of accounts featured in previous AIRA reports and debunks to keep on the lookout:

Selection of notorious disinformation accounts/groups:

- [Peter A. McCullough, MD, MPH](#)
- [The Vigilant Fox](#) 🦊
- [Joseph Kabuleta](#)
- [Freedom Alliance of South Africa](#)
- [Doctor Aseem Malhotra](#)
- [Alex Jones](#)
- [Children's Health Defense](#)
- [Egountchi Behanzin](#)

Debunks and Resources

- factcheck.org: [No Causal Association Between RSV and COVID-19 Vaccine](#)
- AFP: [COVID-19 vaccination does not increase risk of RSV infection](#)
- Reuters: [China says no unusual pathogens found after WHO queries respiratory outbreaks](#)

Key resources

Cholera

- [WHO](#), cholera outbreaks, Q&A
- [VFA](#), cholera social media toolkit
- [Global Task Force on Cholera Control](#), clarifying rumours and community concerns.
- [SSHAP](#), key considerations: socio behavioural insight for community- centred cholera preparedness and response in Mozambique, 2023
- [SSHAP](#), social, behavioural and community dynamics related to the cholera outbreak in Malawi, 2022

Dengue

- [WHO](#), dengue, fact sheet
- [WHO](#), guidelines for prevention and control of chikungunya fever

Malaria

- [WHO](#), Annual malaria report spotlights the growing threat of climate change
- [WHO](#), Annual world malaria report 2023
- 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](#)

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.