

# Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



**AIRA Infodemic Trends Report**

**29 January - 5 February 2024**

**Weekly brief #105**

# Top concerns

[Families gripped with grief with the loss of loved ones as the Cholera outbreak rages in Zambia](#)

Comments on social media show desperation and sadness as people lose their loved ones to the cholera outbreak

[Conspiracies and misinformation re-emerge as the third round of the polio vaccination campaign resumes in Kenya.](#)

Social media interactions on the third round of polio vaccination campaign in Kenya, reflect narratives refuting the efficacy of vaccination

[Burkina Faso introduces the RTS,S in the routine vaccination chain, this information has provoked many reactions on social networks.](#)

Opinions diverge between the satisfaction of regaining health sovereignty and the persistence of conspiracies targeting the countries of the Alliance of Sahel States.

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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 January 29-February 5 in Africa.

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## [Families gripped with grief with the loss of loved ones as the cholera outbreak rages in Zambia](#)

Engagement: **35 posts, 113 likes, 43 comments, 141.6k views**

### Social media commentary and situation at a glance

- The cholera outbreak led to the [closure of schools due for reopening on February 12, 2024](#), with the head teachers in Zambia showing concerns and worries over the future of [education](#) in Zambia. A post from “Africa and Madagascar” a religious organisation on X shows expressions of [support](#) as Zambia experiences the cholera outbreak stopping children from going to school and other religious events.
- From a post from UN Central Emergency Response Fund (UNCERF) announcing the allocation of \$2.5M by Martin Griffiths (UNReliefChief) to provide an urgent response, [comments](#) reflect the distrust people have about the government in providing urgent relief to tackle the cholera outbreak .
- Concerns from the social media in response to [the designation of the Zambian president as the SADC Cholera Prevention Champion](#) also show comments on [dissatisfaction](#) with the handling of cholera outbreaks over the years and [doubts](#) about the ability of the government to prevent the outbreaks.
- Social media interactions indicate [feelings of happiness and satisfaction](#) with the announcement of automatic employment of all the volunteers working during the current cholera outbreak in Zambia by the government.

### Why is it concerning?

- As at 04 February 2024, WHO Zambia [reports](#) that community deaths consist of sixty-five percent of the total number of the casualties recorded in some districts. Poor access to safe water, waste management concerns, cholera contraction at school, insufficient knowledge on the use of ORS and limited knowledge on the effectiveness of the oral Cholera vaccine (OCV) have contributed to these casualties.



**Source:** NewsWhip, public and media interest for Zambia cholera outbreak from 29 January - 5 February 2024.

- The outbreak has lingered since January 2023 according the [WHO](#) reports with records of death and hospitalisation.

### What can we do?

- Support the [government's](#) efforts by scaling up equitable access to cholera vaccines and implementing targeted outreach [campaigns](#), ensuring comprehensive nationwide coverage, particularly in vulnerable communities.
- Sustain the RCCE activities initiated by the government's door-to-door sensitization and media through the radio, TV and interviews and support the [field actions](#) conducted by the Ministry of Health to slow the disease's spread.
- Regular monitoring of community sentiments and feedback in hotspot areas especially can reveal any shift or developments in concerns and rumours
- The World Health Organization (WHO) developed [Cholera fact-sheets](#) to provide an overview on the cholera disease. Cholera, a bacterial infection spread through contaminated water, causes severe watery diarrhoea and dehydration.

While mild cases are common, rapid fluid loss can be deadly if untreated. Vaccination, clean water, and sanitation are key to prevention.

- According to [WaterAid](#), a not-for-profit organisation, children bear the brunt of the cholera crisis in Zambia, with almost 1/2 of cholera cases and 1 in 3 deaths, as Zambia suffers its worst cholera epidemic in the country's history. With the aim of safeguarding the futures of young people and children nationwide, the WaterAid Zambia Country Director, Yankho Mataya delivers a stark warning that "[No child should die from cholera...We must act quickly to save children's lives](#)" in Zambia. The intent is for families to take responsibility in observing cholera symptoms for quick intervention and treatment.
- Long term considerations include addressing underlying factors such as poverty, overcrowding, and limited access to healthcare which contribute to the spread of cholera. The government's investment in poverty reduction programs, improvement of housing conditions, and healthcare access expansion will help to address these underlying issues.

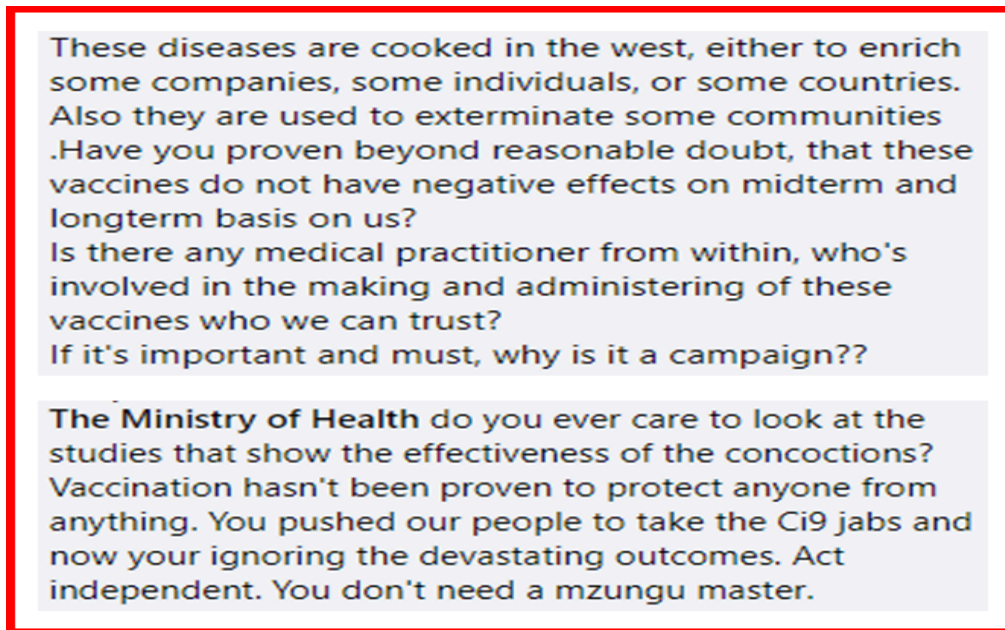
## Kenya

### Conspiracies and misinformation re-emerge as the third round of the Polio Vaccination Campaign resumes in Kenya.

Engagement: **3 posts, 160 likes, 11 comments**

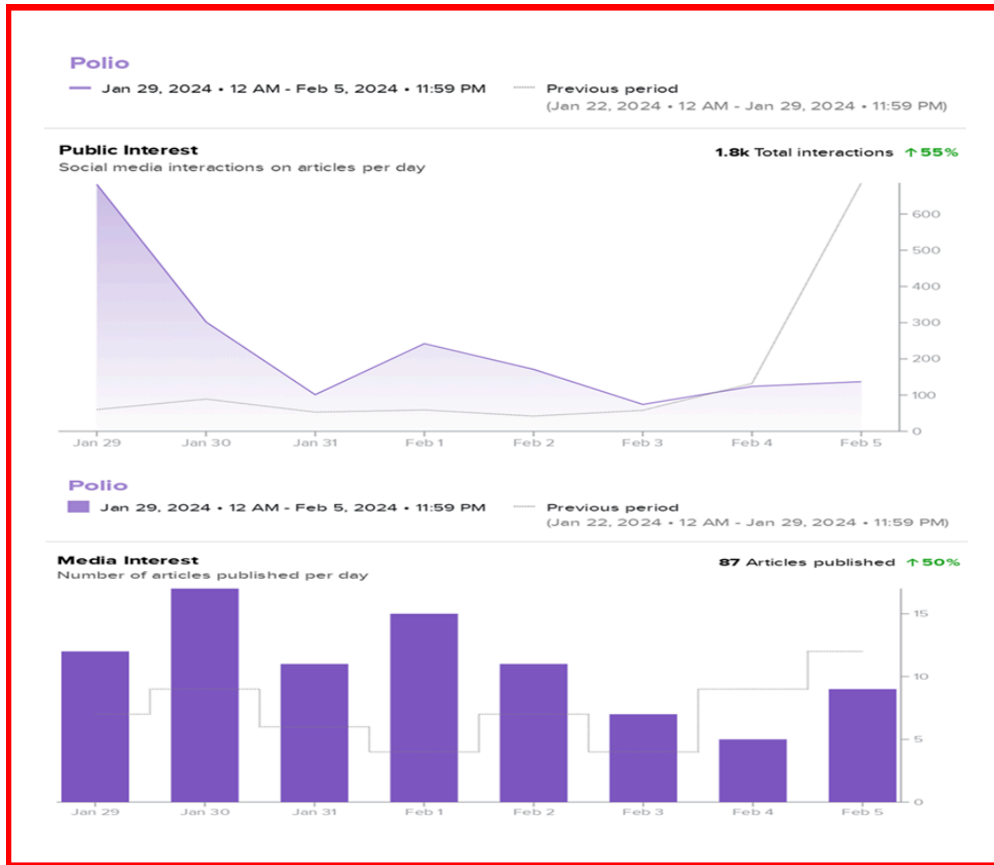
- Mixed reactions followed the third round of the polio vaccination campaign by the [Ministry of Health, Kenya](#) that "lasted from January 27 to January 31, 2024, but it was postponed in November 2023 because of strong rainfall in the area. In total, 755,011 children under the age of five are targeted by the vaccine campaign. In addition, all refugee camps in Garissa as well as the sub-counties of Fafi and Dadaab will have 238,447 children between the ages of five and fifteen." The current polio outbreak is explained by [importation from a neighbouring country](#) and suboptimal routine immunisation coverage in several counties, putting all children at risk of polio disease. The vaccination campaign follows the isolation of 14 polio viruses from stools collected from children in refugee camps in Garissa as well as from environmental samples from sewage in Garissa and Nairobi counties.
- [Positive responses](#) indicate trust and support for the ministry's campaign and requests to extend the campaign to other parts of the country.

- Commenters echoed the negative statements over the vaccine roll-out which depicts the people's trust and dependence on conspiracies and misinformation. [Below](#) are some comments.



### Why is it concerning?

- The isolation of the [circulating vaccine-derived poliovirus type 2 \(CVDPV 2\)](#) from stool and environmental sewage samples gives concerns on the morbidity and possible spread of the disease.
- Vaccination campaigns represent positive strides toward reducing a country's disease burden. However, negative sentiments can pose challenges, particularly in the face of heightened media attention about the polio vaccine campaign in Kenya, leading to potential resistance from online users.



**Source:** NewsWhip, public and media interest for Kenya polio outbreak from 29 January - 5 February 2024.

### What can we do?

- Regularly communicate clear, accurate, and timely information from trusted sources like government agencies and public health experts to build trust and transparency which fosters trust and encourages accurate information sharing.
- Establish a dedicated team responsible for monitoring information flows, identifying misinformation, and crafting effective responses to negative sentiments towards vaccination. The plan should target [high-risk counties](#) in Mandera, Wajir and Garissa, communication channels, and response protocols. To improve accessibility and the spread of correct information, think about working with [Viral Facts Africa](#) and using VFA videos and localising it.
- Apply the use of the social media handles of organisations like to verify health information. Promote media literacy by educating the public on critically evaluating information, recognizing misinformation tactics, and identifying reliable sources. This empowers individuals to make informed decisions



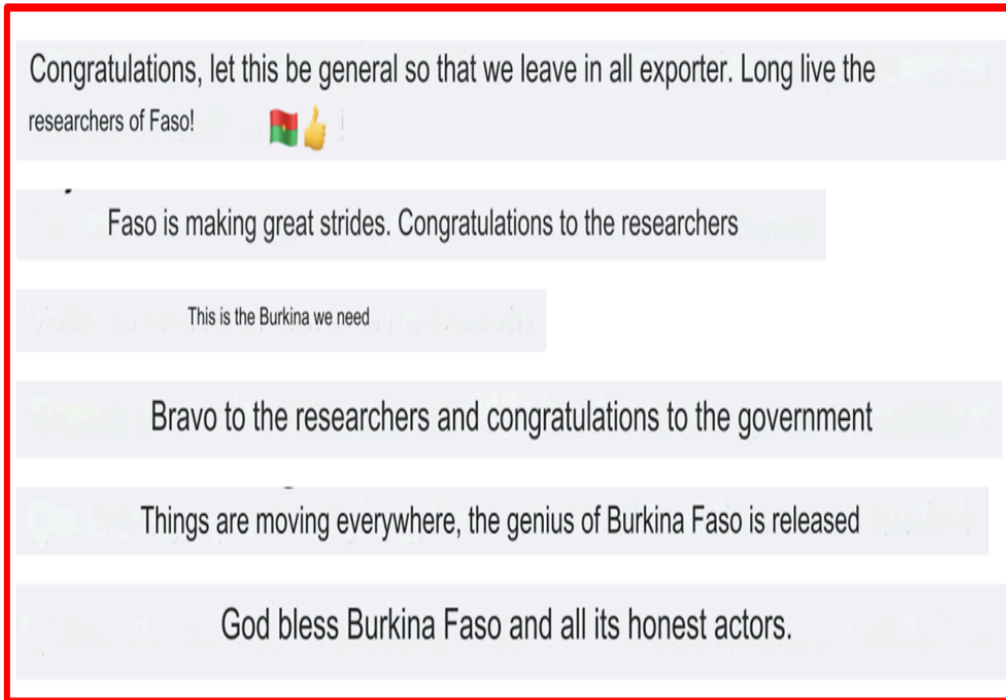
## Burkina Faso

**Malaria: Burkina Faso introduces RTS,S into routine vaccination chains.**

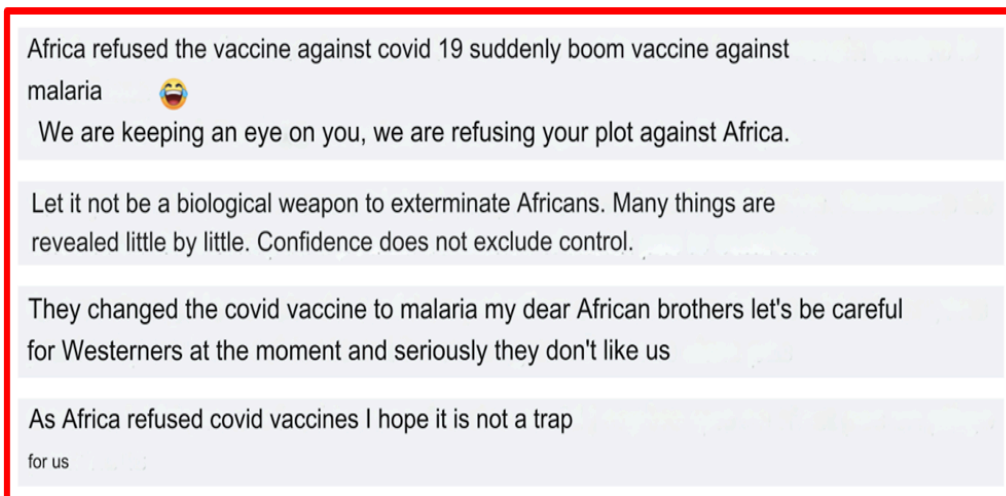
Engagement: **287 likes, 16 comments, 4k views**

Opinions diverge between the satisfaction of regaining health sovereignty thanks to the participation of Burkina Faso researchers in vaccine clinical trials and the persistence of conspiracies targeting the countries of the Alliance of Sahel States.

- [Burkina Faso introduced the malaria vaccine into its Expanded Program on Immunization on Monday, February 05, 2024.](#) The vaccine is being deployed in 27 health districts deemed a priority by national health authorities due to the high rate of malaria-related cases and deaths. This launch comes after Burkina Faso received 658,500 doses of vaccine in December 2023. According to the WHO, to be protected from the disease, children should [receive four doses of vaccine: the first dose at five months, the second at six months, the third at seven months and the fourth at fifteen months.](#)
- Burkina Faso is the only French-speaking country in West Africa to have participated in this historic project, which dates back some thirty years. ["Burkina Faso, through its various research institutions, has been taking part in various clinical trials for almost 20 years to support efforts to combat malaria"](#). explained Dr Emmanuel Nanema, Director General of the Centre National de la Recherche Scientifique et Technologique (CNRST). The CNRST is home to the Nanoro Clinical Research Unit, headed by Professor Halidou Tinto, a Burkinabe researcher involved in the research and testing of the two vaccines.
- The satisfaction of regaining health sovereignty thanks to the participation of Burkinabe researchers in vaccine clinical trials. Here is a screenshot of some comments:



- However, questions persist about the time it took to develop the malaria vaccine, which took over thirty years, compared with vaccines against COVID-19, for example.
- Below are a few [comments](#) tending to suggest a conspiracy against the countries of the Alliance of Sahel States.



### Why is this a cause for concern?

- [Burkina Faso is one of the 10 countries in the world most affected by malaria.](#) This disease is one of the main causes of consultations in the country's health facilities, accounting for 43% of all consultations." According to the [WHO](#), malaria control and prevention efforts over the years have gradually reduced the burden of the disease in the country.

- Mixing political issues with health situations can create doubt and mistrust among the population.

### What can we do?

- Regularly communicate clear, accurate and timely information from reliable sources, such as government agencies and public health experts, to build trust and transparency, which in turn fosters trust and encourages the sharing of accurate information.
- Encourage countries to strike a balance between politics and health to ensure transparent, efficient and needs-based management of public health. This recommendation stems from the understanding that health issues must be dealt with independently without political influences, to ensure decisions are based on scientific evidence and general welfare considerations.
- Adapt [Viral Fact's production](#) on the subject into the local languages of the countries that have introduced the malaria vaccine.

## Trends to watch

### Government intensifies efforts to combat polio, Rift Valley fever, red eye disease outbreaks in Kenya

- Following the reported [first case](#) of the Rift Valley disease in Kenya, conversations increased with a significant spike in conversations on 01 February 2024 in response to the media announcements by the Ministry of Health. The report has led to discussions between [Kenya's Ministry of Health](#) and their partners on the necessity of funding vaccines, which are essential for fostering disease resistance in the communities. Information gaps need to be addressed as online commenters need [information](#) on the disease.
- For the red eye disease outbreak also known as [conjunctivitis](#), members of the public are advised to frequently wash their hands and avoid touching their face, sanitise high touch surfaces and not share personal items like towels. To reduce spread, those affected are advised to self-isolate. The guideline underlines the importance of containing the disease spread. The red eye disease is highly contagious and depending on the causative agent, it may trigger widespread outbreaks.

## Key resources

### **Cholera**

- [WHO](#): Cholera Fact Sheets (English)
- [WHO Infographic](#): Cholera (English)
- [WHO Infographic](#): Cholera Kits
- [VFA](#): Cholera preventive measures
- [Global Task Force on Cholera Control](#): About Cholera
- [BBC](#): Zambia Cholera Outbreak
- [WHO](#): Cholera Outbreaks, Q&A
- [Climate Knowledge Portal](#): Zambia Climatology
- [WaterAid Zambia](#): Water Sanitation and Hygiene
- [UNCERF](#): Emergency Response

### **Polio**

- [WHO](#): Polio Fact Sheets
- [The Task Force for Global Health](#): Polio Disease Control and Elimination
- [Global Polio Eradication Initiative](#): Polio Eradication Strategy
- [UNICEF](#): Polio Eradication
- [VFA](#): Explainer: Polio

### **Malaria**

- [WHO](#) , Q&A on malaria vaccines (RTS,S and R21) (English and French)
- [WHO Infographics](#) : RTS,S malaria vaccine (English)
- [WHO infographics](#) : RTS,S malaria vaccine
- [WHO](#): World Malaria Report 2023
- [VFA](#): Malaria social networking toolkit (French)
- [GAVI](#): Briefing on the start of routine malaria vaccinations in Africa, January 19
- [WHO](#): Malaria: The Malaria Vaccine Implementation Program (MVIP)
- Vasee Moorthy, Mary J Hamel, Peter G Smith, *Malaria vaccines for children: and now there are two*, The Lancet, Vol. 403, Issue 10426, P504-505, FEBRUARY 10, 2024

### **Rift Valley Fever**

- [WHO](#); RVF fact sheets

## Red Eye Disease (Conjunctivitis)

[CDC](#): Facts Sheets

## Methodology

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

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.