

Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report

30 September - 7 October 2024

Weekly brief #139

Top concerns

[Confusion on Marburg Virus Disease \(MVD\) vaccines in Rwanda](#)

Rwandan online users expressed distrust following confusions on the availability of the MVD vaccine.

[Distrust in African leaders and rise in conspiracy theories in mpox conversations in the Democratic Republic of Congo, Ghana and Kenya](#)

Regional influencers sow doubts on the mpox response and vaccination efforts in DRC

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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 30 September - 7 October 2024 in Africa.

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Rwanda

Confusion on Marburg Virus Disease (MVD) vaccines in Rwanda

Engagement: **30 posts, 9097 likes, 1854 comments**

Below are the main concerns from Rwandan online users according to a general social listening taxonomy¹:

MVD vaccines: confusion whether there is a cure or not, and skepticism about the fast process of releasing a vaccine

The emergence of MVD in Rwanda has sparked confusion among online users around the safety of vaccines for MVD following the announcement of the Ministry of Health to start vaccinating frontline workers with candidate vaccines delivered by Sabin Vaccine Institute as part of a clinical trial [[LINK](#), [LINK](#), [LINK](#)]. Users ask questions about whether a cure exists and speculate over the rapid development of a vaccine.

Examples below:

1. "I read that there is no cure or vaccine." [[LINK](#)]
2. "You say that there is no cure and no vaccine, and you end up saying that the cure is going to be used?!?! The other day they said that there is no cure or vaccine for Marburg 🤔, Where did they get the vaccine, and they said that there is no cure even with the vaccine 🤔" [[LINK](#)]
3. "Oh, go take care, are you being vaccinated against a disease that has killed 11 people? Ebola has killed thousands of people without vaccination, AIDS has been without a vaccine for years, but it is not yet known that they gave them a vaccine?" [[LINK](#)]

Authorities questioned about existence and quality of vaccine

In relation to these concerns, users are also expressing distrust in health authorities and skepticism about vaccination efforts. Many individuals are grappling with conflicting information, which has prompted them to raise questions about the reliability of health officials and public health agencies. **Examples below:**

¹ A public health taxonomy is a system of classification or structure that allows an analyst to align data with a search strategy to better understand domains related to a public health topic of interest. See more in Purnat TD et al. (2022). Delivering actionable infodemic insights and recommendations for the COVID-19 pandemic response. *Weekly Epidemiological Record*. 2022 Jul 8; 97 (27), 313 - 324. <https://apps.who.int/iris/handle/10665/359144>

1. “WHO in September: there is no Marburg vaccine or cure. WHO in October: get vaccinated” [\[LINK\]](#)
2. “Minister, please explain to us that we have heard that these vaccines are the first to be used in the world and that their quality is not questionable!?” [\[LINK\]](#)

Conspiracy theories about the vaccine and about the cause of the disease

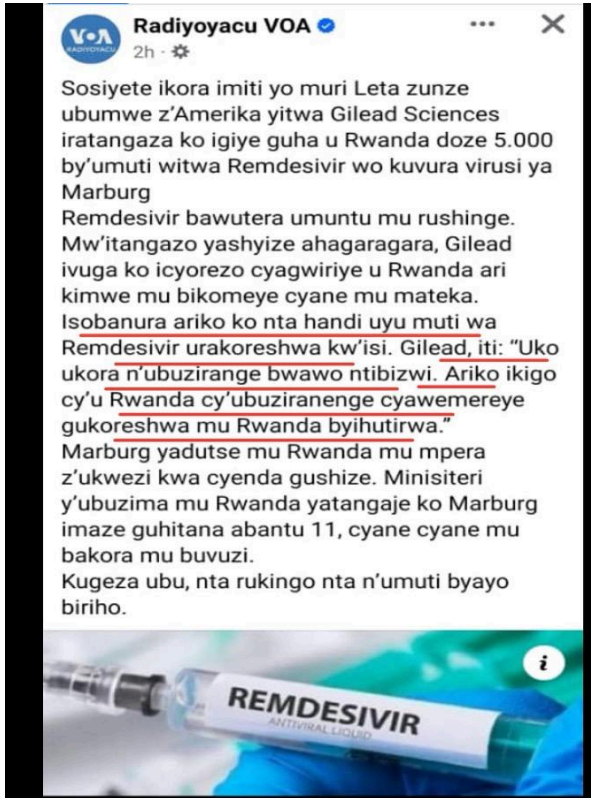
Distrust in health authorities is further compounded by conspiracy theories proliferating in discussions about both the vaccine and the origins of the disease. Some believe that western countries are exploiting the situation, suggesting that the outbreak is a deliberate act to harm the African population. This continues to exacerbate existing tensions and suspicions toward health interventions. **Examples below:**

1. “So be careful not to kill people because you are protecting them 🙈🙈 keep these vaccines because white people are bad people 🗿” [\[LINK\]](#)

Furthermore the general perception of the health authorities is associated with a sentiment of distrust. This sentiment is particularly strong among those who perceive the MVD response is prioritizing external interests over the health and safety of its citizens. **Example below:**

1. “We Rwandans have become victims of the whites because of our leaders who sold our country to the whites 😭😭” [\[LINK\]](#)
2. “Otherwise, I see the government selling us without our knowledge. This is the covid we haven't figured out yet, then something else comes along. That we come in times of plagues c. Are they going to visit us every year?” [\[LINK\]](#)
3. “But the Ministry of Health is led by whom and who would have panic attacks that do not know the consequences? This is a terrible corruption that causes people to die. Honorable president of the country, please help Rwanda and stop this work that the ministry of health wants to do 🙏🙏🙏🙏” [\[LINK\]](#)

Visual analysis:



1 -Screenshot circulating in Facebook comments: [\[LINK\]](#)

“Remdesivir is not used anywhere in the world. Gilead Sciences says: “How it works, and its quality is not known but the Rwanda quality agency approved it for emergency use in Rwanda.” Online users question the efficacy of vaccines, particularly when concerns are raised by the manufacturers themselves.



2-Screenshot circulating in Facebook comments: [\[LINK\]](#)

“Remdesivir for injection 100 mg /vial Not for distribution in US, Canada or EU” Online users are concerned about the distribution of the vaccine when the label indicates it is not intended for distribution in the US, Canada or EU.

Why is it concerning?

- Confusion about whether a Marburg cure/vaccine exists or not can lead to a lack of trust in local health authorities, international manufacturers of vaccines and public health agencies. This can also fuel more distrust and conspiracy theories about the role of authorities in mitigating the spread of the disease.

- Even with public health guidance on the recently arrived MVD candidate vaccines, concerns about vaccine safety are still prevalent. In a recent media brief, the Minister of Health, Dr. Nsanzimana assured Rwandans that the MVD vaccine has undergone clinical trials in Uganda and Kenya, demonstrating its benefits for recipients. He emphasized that the vaccine has passed the second phase of testing and has been rigorously evaluated for safety and efficacy in accordance with standard protocols.[[LINK](#)]

What can we do?

- **Highlight current joint efforts between WHO and the Ministry of Health in fighting MVD:** Conducting interviews with individuals who have recovered from MVD, as well as showcasing the challenges faced by healthcare workers, can reduce conspiracy theories and foster greater trust in health authorities. By sharing personal recovery stories and the realities of frontline work, the public can better understand the commitment and expertise of health officials, thereby reinforcing confidence in the measures being implemented to mitigate the spread of the disease.
- **Monitor public sentiment:** Implement mechanisms to assess public perceptions and concerns regarding the vaccine and the evolution of the outbreak.
- **Strengthen communication:** Establish a communication strategy that includes regular updates on MVD outbreak in Rwanda. This can include regular media dialogues or other community engagement mechanisms. Engaging with the public through various media channels can help address concerns and reduce misinformation.

Democratic Republic of Congo, Ghana, Kenya

Distrust in African leaders and rise in conspiracy theories in mpox conversations in the Democratic Republic of Congo, Ghana and Kenya.

Engagement: 35 posts, 113 likes, 43 comments

Below are the main concerns from Kenyan, Ghanaian and Congolese online users according to the mpox social listening taxonomy.

Claims against local authorities:

Across three African countries, we note a prevalent theme of distrust in leadership in mpox conversations. Many online users question the integrity of local authorities and the motivations behind public health claims.

In Kenya, for instance, there are strong sentiments that officials are not being truthful about the situation regarding Mpox. Many people express disbelief in the reported cases, accusing leaders of dishonesty and suggesting that financial motives are driving their actions. As highlighted in previous reports, this distrust is compounded by fears of alleged corruption, with some online users predicting the emergence of "mpox millionaires". Online users state that financial gain is prioritized over public health, fostering an environment of cynicism toward official narratives. **Examples below:**

1. *"Siphoning money all through! A scandal awaits. Very soon we will have Mpox millionaires..... A competition of its own.... They had COVID 19 millionaires. We have Mpox millionaires....."* [\[LINK\]](#)

Similarly, in Ghana, skepticism is directed at leaders claiming to record cases of mpox. Online users caution international organizations like the World Bank to be wary of these claims, suggesting that they may be fabrications aimed at securing funding for political campaigns. This suspicion is further echoed in concerns about potential new taxes being introduced under the pretext of managing the mpox outbreak. **Examples below:**

1. *"Dear World Bank, My Country Ghana did not confirm any Mpox virus and nobody has been suspected of any case. If any leader is claiming to have recorded and case please do not listen to them because they want money to fund the election.... Thank you"* [\[LINK\]](#)
2. *"Here is another reason Ghanaians could be taxed more. Let's get ready for another monkeypox tax"* [\[LINK\]](#)

In the Democratic Republic of Congo (DRC), online users are calling for greater transparency from local authorities both for mpox emergency management and vaccines implementation. **Examples below:**

1. *"Let Dr Jean Kaseya be the first to take this vaccine, then his family, all Congolese politicians and their families, and let it be in public. After them, it will be the little people."* [\[LINK\]](#)

2. A Congolese private user shared a video on Facebook discussing the challenging conditions of a healthcare facility hosting mpox patients in Kinshasa. It was subsequently amplified by local influencers. This has led online users to question whether the funds allocated for managing mpox are being used effectively. [[LINK](#), [LINK](#)]

In the DRC, we note a growing belief in conspiracy theories surrounding the mpox vaccine. Many individuals express skepticism about the vaccine's safety and efficacy, and that financial interests overshadow public health. **Examples below:**

1. *“A statement put together by the pharmaceutical industry for propaganda purposes to capture funding and then create fear in the population ...VACCINE =POISON=BUSINESS”* [[LINK](#)]
2. *“Why take a vacation when we have all the natural resources to remedy the situation? We can't take what comes from those who are against us, it's poison!”* [[LINK](#)]

Regional influencers propagating conspiracy theories

An influencer with 93K followers on Facebook warns against the mpox vaccine and requests parents and children to refuse the mpox vaccination campaign in DRC. He claims that it has been allegedly created by international lobbies whose dream is to control Africans and Congolese resources [[LINK](#)].

Another congolese influencer has warned against the administration of mpox vaccines in the DRC on the basis of false information. She questioned the presence of the European Union flag on some vaccine batches, suggesting it indicates a conspiracy against the Congolese [[LINK](#)]. While the vaccines were donated by the Africa CDC, the Jynneos vaccine is produced by the Danish company Bavarian Nordic, explaining the EU flag on the shipment of vaccines in the DRC [[LINK](#)].

In a recent tweet shared on his X account [[LINK](#)], Congolese artist Maitre Gims says “I warned about Diddy, I warned about Bill Gates, I warned about the pyramids”. This sparked reactions further fueling doubts about the reliability of the mpox vaccines in the DRC [[LINK](#), [LINK](#), [LINK](#)]. His previous meeting with philanthropist Bill Gates in December 2023 garnered comments that included conspiracy theories about his involvement in health programming in Africa.

The recent meeting between the Congolese president Felix Tshisekedi and American philanthropist Bill Gates on September 24, 2024, has also intensified these suspicions. The meeting was set at the sidelines of the United Nations General Assembly, through which they discussed the health situation in the DRC, the advances on polio vaccination efforts as well as the advances to support a strong Congolese education system [\[LINK\]](#). As observed, many online users took this opportunity to spread conspiracy theories that continue connecting Bill Gates to amplified suspicions about foreign health interventions in Africa. Conspiracy comments were shared on the Facebook pages of the Ministry of Health and the Presidency of the Republic [\[LINK\]](#), [\[LINK\]](#)

Why is it concerning?

- This week, mpox conversations across Kenya, Ghana and the DRC exhibit a strong sentiment of distrust in local authorities. This has been a recurrent sentiment across several weeks now and shared in previous social listening trend reports about mpox.
- Disinformation actors and influencers throughout the region effectively coordinate ahead of vaccination campaigns to exploit the potential confusion and questions that emerge among citizens. Main narratives aim at eroding further mistrust on global and national institutions and health authorities.
- Relying on misinformation spread by those who promote unscientific data and manipulate emotions can exacerbate vaccine hesitancy, especially when their reach is amplified by regular users on social media platforms. Disinformation actors often use these tactics to sow doubts about vaccine safety and promote narratives of medical sovereignty, positioning audiences in a dichotomic opposition to global health efforts vs alleged Pan-Africanism ideologies.

What can we do?

- Establish two-way communication:** Establish a consistent dialogue between local health authorities, health field workers and community members through community meetings or engagement platforms. This can help to rebuild trust between the community and local efforts to halt the emergency, ensuring

questions are clarified and influencing public perception of the response to mpox management.

- Work with influencers and media to amplify accurate messages:** Identify and collaborate with local credible ambassadors (musicians, journalists, public figures) who are trusted by the public and can convey verified messages. Train influencers in fact-checking techniques and infodemic management so that they can share reliable information with their followers and correct misinformation.
- Initiate a regular exchange between the Ministry of Health and the press to debunk rumors during the public health emergency.** Organize regular press briefings between the Ministry of Health and the media to share updates on the mpox response, debunk rumors circulating online and answer questions from the public.
- Creation of a dialogue platform:** Set up a working group with representatives of major media, fact-checking organizations and influencers to discuss emerging rumors and coordinate debunking actions. Set up a rapid response unit: Create a dedicated team within the Ministry of Health to monitor social networks and the media to identify rumors in real time and provide official responses.

Key resources

Mpox

Resources for social listening analysts

- [WHO](#), Public health taxonomy for social listening on mpox conversations

Resources for journalists & fact checking

- [Internews](#), reporting on mpox, a guide for journalists
- [WHO](#), comprehensive list of mpox webinar series
- [AFP Fact check](#), WHO mpox emergency declaration does not advise lockdowns
- [DW](#), Fact check: No link between mpox and COVID vaccination
- [DW](#), Fact check: Four fakes about mpox

Resources/Content for social media

- [VFA](#), mpox social media kit
- [WHO](#), LIVE: Q&A on #mpox. Join us and #AskWHO your questions!
- [WHO](#), Episode #124 - mpox: what you need to know

Technical update

- [WHO](#), Strategic framework for enhancing prevention and control of mpox
- [WHO](#), Mpox in the Democratic Republic of Congo
- [Africa CDC](#), Mpox situation in Africa
- [WHO](#), multi-country outbreak of Mpox

Public health guidance/RCCE

- [WHO](#), Risk communication and community engagement (RCCE) for mpox
- [WHO](#), the Global Mpox Dashboard
- [SSHAP](#), Key Considerations: Risk Communication and Community Engagement for Mpox Vaccination in Eastern DRC
- [WHO](#), Risk communication and community engagement (RCCE) for monkeypox outbreaks: interim guidance, 24 June 2022.
- [WHO](#), Public health advice for sex workers on mpox

MVD

Resources/Content for social media

- [WHO](#), Marburg fact sheet
- [WHO](#), Marburg virus disease Q&A
- [VFA](#), social media kit

Methodology

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

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 (siloe engagement).

The monitoring reports are produced using NewsWhip Analytics, Google Trends. 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 or groups (e.g. private Facebook groups).

We also rely on infodemic managers based in Nigeria, Democratic Republic of Congo and Kenya to provide insights into relevant national infodemic trends or offline content, as well as country-level reports. As we produce more content, we seek to triangulate and corroborate information across these groups to strengthen our infodemic response.