

# Africa Infodemic Response Alliance

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AIRA Infodemic Trends Report

27 April - 4 May 2023

(Weekly brief #70)

## Top trends

### [Omicron sub-variant XBB.1.16 gains traction in Mauritius](#)

COVID-19 conversations in Mauritius highlighted perceptions of the Omicron sub-variant XBB.1.16 as a “common flu” and sentiments of frustrations regarding COVID-19 updates.

### [South African anti vax group spreads conspiracy theories about WHO on Telegram](#)

Conspiracy theories about the WHO and malaria vaccine efficacy have been spread by the South African anti-vax group Freedom Alliance of South Africa on Telegram.

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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 April 27- May 4 in Africa.

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## Mauritius

### Omicron sub-variant XBB.1.16 gains traction in Mauritius

**CONTEXT:** In Mauritius, discussions surrounding COVID-19 have brought to light the prevailing notion that the Omicron sub-variant XBB.1.16 is known as a common flu. Furthermore, citizens have expressed frustration with the dissemination of COVID-19 updates. This frustration has contributed to a general lack of concern regarding rising COVID-19 cases. According to the [summary](#) of top COVID-19 cases and deaths reports as of 23 April in the African region, Mauritius has the highest cumulative number of COVID-19 reported cases in the last two weeks, with 715 cases.

**Engagement:** 10 posts, 3k likes, 364 comments

- Defimedia.info, a prominent media website in Mauritius, shared several articles on its Facebook page [[LINK](#), [LINK](#), [LINK](#)], highlighting updates on the COVID-19 pandemic in the country.
- [One](#) of the articles focused on the emergence of the XBB.1.16, Omicron sub-variant of COVID-19. Two online users who commented on the post described the emergence as “nonsense” and compared it to a “common flu”.
- Another [article](#) reported on the increase of flu cases in the country and the need to take preventive measures to reduce the spread of both the flu and COVID-19. The article about the flu garnered more interest from online users as opposed to the COVID-19 one. Some users described COVID-19 as a simple flu, and that COVID-19 does not exist anymore while other users displayed interest in adopting preventive measures such as avoiding crowds and lockdowns. Below are some comments that illustrate both stances, translated into English:
  - If the virus is here, we must be fearful, and avoid crowds.
  - Stop that please, It has become a disease like the others such as fever, flu, etc..
  - The fear of COVID-19 no longer works unfortunately
  - The flu season mixes COVID and seasonal flu to induce fear in people
  - COVID-19 does not exist and this names scares you
- Some online users commented on Defimedia.info's weekly [update](#) of COVID-19, expressing skepticism about the virus and vaccines. They claimed that the virus only reappeared with the arrival of the flu season and questioned the accuracy of statistics presented in the Facebook post. They also called COVID-19 a hoax and referred to the media outlet as a propaganda that aims to instill fear in the population.

### Why is it concerning?

- WHO upgraded XBB.1.16 to a COVID-19 “variant of interest” along with XBB.1.5 according to its [weekly](#) epidemiological update on COVID-19, 19-20 April 2023.
- The situation in Mauritius is concerning as the number of COVID-19 cases has been rising in the recent two weeks. Given the small number of the population (around 1.3million) and the size of the island (2040Km<sup>2</sup>), it is alarming that the cumulative number of cases in a two-week period is currently the highest in the African region. This suggests that the virus may be spreading through other infectious sub-variants while some individuals do not take the necessary precautions to prevent the transmission.
- The COVID-19 emergency committee at the World Health Organization will meet on May 4 to assess whether the COVID-19 pandemic still constitutes a public health emergency of international concern (PHEIC), initially declared on 30th January 2020. This might impact general recommendations and perceptions around COVID-19.

### What can we do?

- While the media coverage of the Omicron sub variant XBB.1.16 might have gotten more focus in the last two weeks, it is important to emphasize that COVID-19 continues to infect people irrespective of the sub-variant in question.

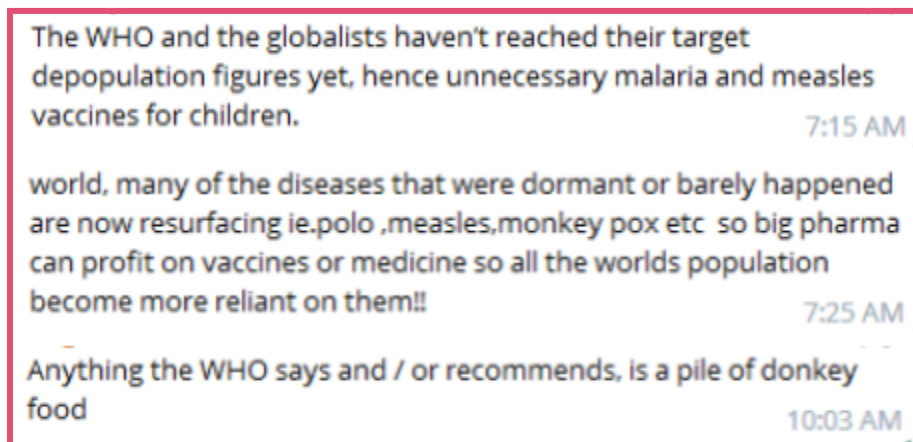
## South Africa

### South African anti-vax group spreads conspiracy theories about WHO on Telegram

**CONTEXT:** South African anti-vax group garnered the attention of Telegram users through numerous posts including conspiracy theories about the WHO and malaria vaccine efficacy following a recent misleading title of a study published by [the Lancet](#), the world’s highest-impact medical journal, about the effectiveness of the RTS,S /AS01 malaria vaccine.

## Engagement: 3761 views

- Two posts [[LINK](#), [LINK](#)] by the South African anti-vax group called “Freedom Alliance of South Africa” (FASA) garnered the attention of Telegram users with over 3761 views of both posts in the past week.
- The posts promoted conspiracy theories about the WHO, suggesting that the organization is engaged in “medical colonialism” and promoting an unsafe malaria vaccine for children.
- Telegram users suggested that the WHO is deliberately using vaccines to control population growth and displayed mistrust in any recommendation provided by the WHO. Below is a snapshot of some users’ comments on Telegram:



## Why is it concerning?

- It is worth noting that while the Freedom Alliance of South Africa (FASA) is known for promoting anti-COVID-19 vaccine narratives, we are seeing more conspiracy theories about the safety of other vaccines, including the malaria vaccine recommended by the WHO. According to WHO, the African region carries a disproportionately [high share](#) of the global malaria burden.
- According to the world malaria report in [2022](#), South Africa continues to make progress towards the elimination of the malaria burden with now less than 5000 malaria cases in 2021. If disinformation amplifies online, it might continue to draw resources for malaria interventions in South Africa.
- FASA has over 3628 subscribers on its Telegram channel and 889 followers on its twitter account and was featured in South African local media channels [[LINK](#)].

## What can we do?

- Work with fact-checkers and other public health organizations to debunk disinformation and conspiracy theories, so the public is informed about the information they receive.
- Communicate that the malaria vaccine is safe and effective, and has resulted in substantial reduction in deadly severe malaria across Africa. [\[LINK\]](#)

## Persistent trends

### **Lack of access to safe water and sanitary conditions persist amid cholera outbreaks**

**Summary:** Online users are engaged in discussions online and expressing their frustration regarding the lack of adequate infrastructure, access to clean water, and sanitary living conditions. These are considered to be the primary concerns of users to fight current cholera outbreaks, not the lack of knowledge, treatments or vaccines.

#### **Cameroon**

- On April 29th, Dr. Manaouda Malachie, the Minister of Health in Cameroon, took to [Twitter](#) to urge the residents of Yaounde to be more vigilant and strictly adhere to public health measures. This was prompted by the continued increase in cholera cases being recorded in hospitals as the Minister mentioned in the tweet.
- In response to the Minister of Health's tweet, concerned online users have raised important issues regarding the availability of safe water and poor sanitation measures. One social media user pointed out that it would be challenging to combat cholera in an environment where access to running and drinking water is severely limited. Inadequate water and sanitation infrastructure can contribute significantly to the emergence and persistence of cholera, particularly in vulnerable communities. Some comments are shared below:

Mr. Minister how can they fight cholera in an environment where there is a severe lack of running and drinking water?

And you say nothing to the Mayors who must clean up and provide a healthy environment for the populations?

Cholera is the disease of filth, and our big cities are exactly the right environments for this disease. This is the root of the problem

## Tanzania

- JamiiForums, a widely popular online discussion forum based in Tanzania with over 3.3M followers on its Facebook page, shared a [post](#) on April 28th about the presence of ten cholera patients in Ilala district, one of the five districts in Dar es Salaam. The post also drew attention to the poor infrastructure conditions in food markets in the capital city, particularly during the rainy season.
- The post features a video that highlights the alarming situation where food traders continue to sell their products on the ground where dirty water flows. Additionally, some traders arrange their food on top of blocked sewers.
- These practices can significantly increase the risk of contamination and the spread of cholera in food markets across Tanzania.
- Online users commented that unsanitary conditions in the city demand attention and that individuals should ensure the cleanliness of food by implementing proper hygiene measures. Below are some comments from social media users translated from Swahili to English:

This dirtiness in Tanzania is not for the authorities, but for the citizens. We are too dirty. People do not have the culture of taking care of garbage. You will

Dirty water, the government should make a plan so that things can stay on top in the market. Water is not safe at all.

- Online users who commented on another [post](#) by JamiiForums, expressed their concerns regarding the issue of waste disposal and the urgent need for improved infrastructure for sewage, especially during the rainy season in Tanzania. An online user commented that some individuals do not take the necessary precautions to maintain cleanliness which exacerbates the problem.

The problem is that the leaders of municipalities and local governments are the ones who are dirty because they do not stand properly. The exercise of waste disposal at a time when the waste remains for a long time without being used and taken to the burial ground.

Our councils looked into the issue of waste disposal and the improvement of infrastructure for the purpose of sewage and dumps especially during this rainy season but also at all times. The money you are spending carelessly until CAG burns

When the rains pick up, just a little bit already... The problem is that people are very dirty and do not observe cleanliness.

## Zimbabwe

- Online users who commented on a Facebook [post](#) by the official page of the City of Harare, expressed their concerns regarding the issue of garbage piling, highlighting the need for effective waste management policies and the deteriorating sanitary conditions prevailing in the capital.
- Below are some comments:

equally there's been ever piling terrible gabbage and mess within and around the Chisipite central car lot , without any sign of any effort to collect by the city gangsters .

This is emanating from the poor sanitary conditions prevailing in Harare. In high density suburbs such as GlenView, Budiro, you will never win this war , look @ the gabbage and the run down on harare gardens HiFa

## Trend to watch

### A case of Crimean-Congo haemorrhagic fever detected in Senegal

- On April 30th, NDARINFO, an online news website based in Saint-Louis, Senegal, published [an article](#) confirming a case of Crimean-Congo hemorrhagic fever (CCHF) in the country. According to the article, the case was initially detected at the Dalal Jamm Hospital on April 21st, and reported by the Ministry of Health and Social Action in Senegal.



- Numerous local [[LINK](#), [LINK](#)] and international news outlets [[LINK](#), [LINK](#), [LINK](#)] have reported on the recent confirmation of Senegal's first case of Crimean-Congo hemorrhagic fever. This news has garnered significant attention thus far as it can underscore the potential threat of CCHF to public health, both locally and regionally as CCHF outbreaks have a case fatality rate of up to 40%.
- According to the [World Health Organization](#), Crimean-Congo hemorrhagic fever (CCHF) causes severe viral haemorrhagic fever outbreaks.
- CCHF is endemic in Africa, the Balkans, the Middle East and Asia, in countries below the 50th parallel north, the geographical limit of the main vector species, a tick.
- An online media website called "Senegal" shared misinformation on [Facebook](#) regarding the announcement of the first Crimean-Congo case in Senegal. The title of the post stated that the first case of Ebola had been detected in Senegal, and could cause confusion among its 88k followers. Confusion about the different hemorrhagic fevers can make it more challenging for online users to understand the differences between the various types of hemorrhagic fevers, to take appropriate precautions to prevent transmission of the disease and to trust media sources for accurate information and updates about public health.
- Three online users have raised questions regarding the nomenclature of the disease in a Facebook [post](#) by AGORA Actualités, an online news website, based in Algeria with 78k followers. Online users are concerned about the appropriateness of the naming convention used for CCHF as it might lead to stigmatization of the disease to certain populations in Africa.
- These highlight the importance of clear and concise communication about the differences and commonalities between Ebola, the CCHF and other hemorrhagic fevers and what that means in terms of prevention, diagnosis, treatment, vaccination to avoid potential confusion and misinformation by local and regional online users.

## Key resources

### Cholera

- [Social media toolkit](#) with all recent Viral Facts videos on cholera: (ENG, FR).
- Global Task Force on cholera control [resources](#)
- [Social, behavioral and community dynamics related to the cholera outbreak in Malawi](#) / RCCE Collective Service in the East and Southern Africa Region.
- Cholera outbreaks [Q&A](#) (WHO)

- Cholera question [bank](#), the collective service/Social science in humanitarian action platform

## **COVID-19**

- [Social media toolkit](#) with all recent Viral Facts videos on COVID-19 (ENG, FR).
- Behavioral considerations for acceptance and uptake of COVID-19 [vaccines](#)
- COVID-19 Behavioral Needs Assessment on Vaccine Uptake, Routine Immunization, and Maternal Newborn Child Health Services, [UNICEF ESARO](#)
- [GAVI](#), Could the “Arcturus” variant trigger a new wave of COVID-19 infections and deaths?
- [GAVI](#), Arcturus: WHO upgrades XBB.1.16 to a COVID-19 “variant of interest”
- [WHO](#), From emergency response to long-term COVID-19 disease management: sustaining gains made during the COVID-19 pandemic.

## **Crimean-Congo**

- Crimean-Congo hemorrhagic fever [WHO](#) fact sheet

## **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.