

Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report

6-13 May 2024

Weekly brief #119

Top concerns

[COVID-19 : Claims that “AstraZeneca COVID-19 vaccines have been withdrawn worldwide due to dangerous side effects” debunked](#)

The withdrawal of the AstraZeneca COVID-19 vaccine (Vaxzevria) is not related to claims that the vaccine causes a rare and dangerous side effect. Unusual blood clots with low blood platelets are listed as very rare side effects of Vaxzevria.

Reference Guide

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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 6-13 May in Africa.

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Mauritius, Cabo Verde, Kenya, South Africa, Nigeria, Ghana, Lesotho

COVID-19 : Claims that “AstraZeneca COVID-19 vaccines have been withdrawn worldwide due to dangerous side effects” debunked

Engagement: 10 posts, 2746 likes, 3480 comments

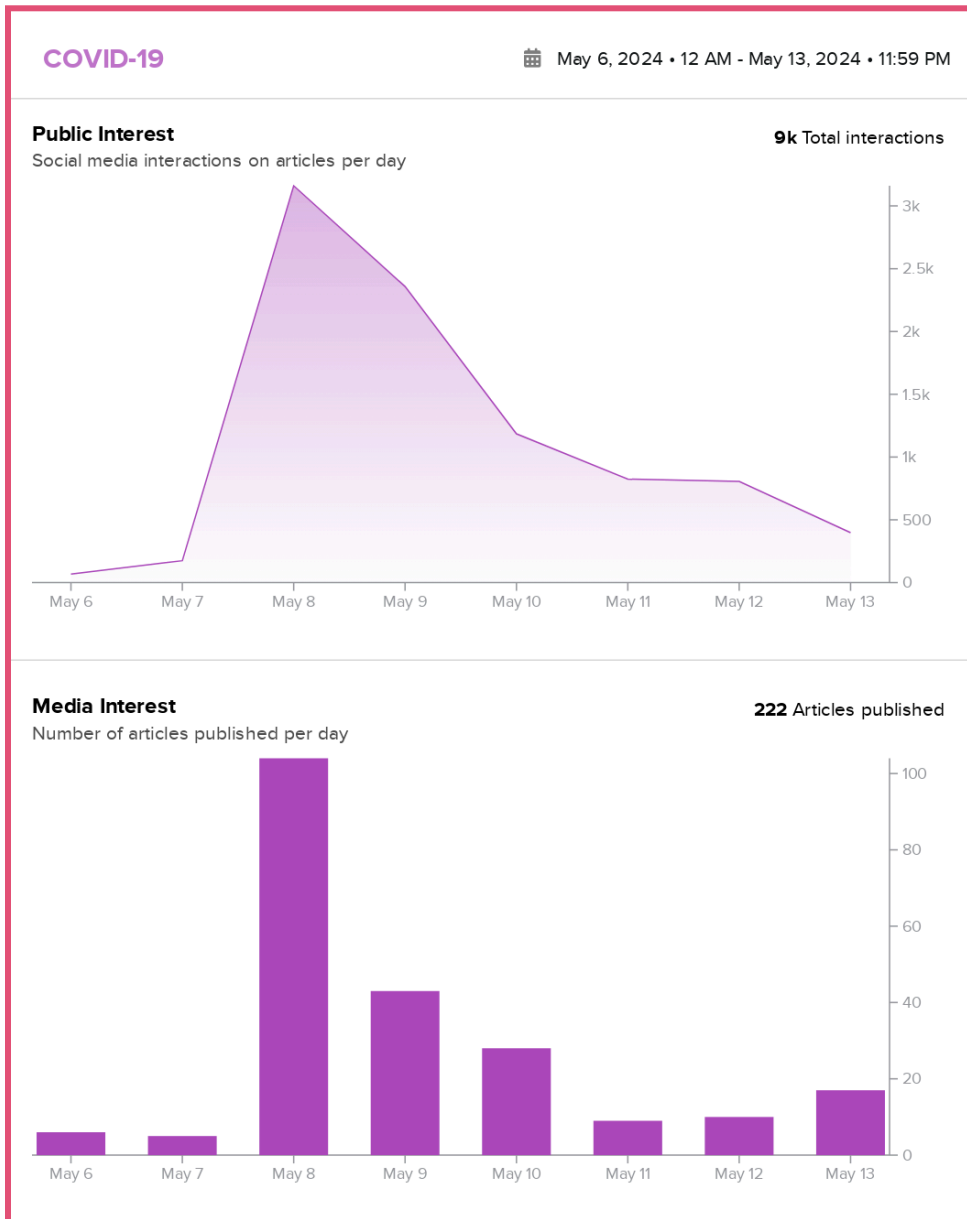
- Headlines from reputable online media agencies and newspapers with high readership and number of followers in [Cabo Verde](#), [Mauritius](#), [Nigeria](#), and [Ghana](#) claiming that AstraZeneca COVID-19 vaccines have been globally withdrawn due to dangerous side effects are misleading.
- Social listening in Nigeria revealed that a screenshot of a [tweet](#) mentioning the [Telegraph](#)'s misleading coverage of the vaccine withdrawal has been amplified on WhatsApp groups.
- The anti-vaccine sentiment fuelled an infodemic online with other common misinformation and disinformation about the COVID-19 vaccine being shared. Claims such as the vaccine causing [infertility](#), [cancer](#) were spotted. Trust in [messengers](#) fuelling conspiracy theories, and distrust in [media](#) and [healthcare leaders](#) were also monitored.
- But the misleading headlines was debunked by [Ghana Fact](#), Ghana's independent fact-checking platform, that due to reduced demand and the availability of newer vaccines targeting new virus variants, AstraZeneca is [withdrawing](#) its COVID-19 vaccine globally. Additionally the [debunk](#) noted that “a scientific assessment by the European Medicines Agency (EMA) at the height of the pandemic concluded that the overall benefits of the vaccine in preventing COVID-19 outweigh the risks of side effects – this is after EMA's safety committee said unusual blood clots with low blood platelets be listed as very rare side effects of Vaxzevria.”
- Furthermore, [references](#) from experts at the Science media centre highlighted that the AstraZeneca vaccine, which is a viral vector vaccine and not an mRNA vaccine like Pfizer or Moderna, faced more challenges in updating its vaccines to new virus variants compared to mRNA vaccines, which “can be more rapidly modified”.

Why is it concerning?

- Given the Telegraph's wide readership (3.4 M followers on X) and its coverage of the pandemic, a misleading headline can have a negative ripple effect. The

Telegraph's reporting about COVID-19 vaccines has often been referenced and shared across [international](#) and African media outlets [[LINK](#), [LINK](#), [LINK](#), [LINK](#)].

- Few days after the announcement about the AstraZeneca vaccine, there has been a decrease in media coverage and social media interactions related to the keyword "AstraZeneca." The peak on May 8 is attributed to the day following the announcement of the global withdrawal of the Oxford-AstraZeneca COVID-19 vaccine.



Source: NewsWhip, keyword: AstraZeneca, monitored period: 6-13 May

- Clickbait headlines about vaccine side effects can fuel online users' confirmed biases and reinforce the rumours and conspiracies they believed during the pandemic.

What can we do?

- Collaborate with media agencies to share accurate health information. This could be by sharing talking points prior to a major press release that is likely going to trigger misinformation. Flagging inaccuracies and working with fact-checkers and News agencies in correcting the information can also be a successful strategy.

References such as: According to [WHO](#), “the AstraZeneca vaccine has an efficacy of 72% against symptomatic SARS-CoV-2 infection, as shown by the primary analysis of data irrespective of interdose interval from trial participants who received 2 standard doses with an interval varying from about 4 to 12 weeks. Vaccine efficacy tended to be higher when the interval between doses was longer.”

AstraZeneca stated on its [website](#): “The Medicines and Healthcare products Regulatory Agency (MHRA) and European Medicines Agency (EMA) reaffirmed the benefits of COVID-19 Vaccine AstraZeneca continue to far outweigh the risks.”

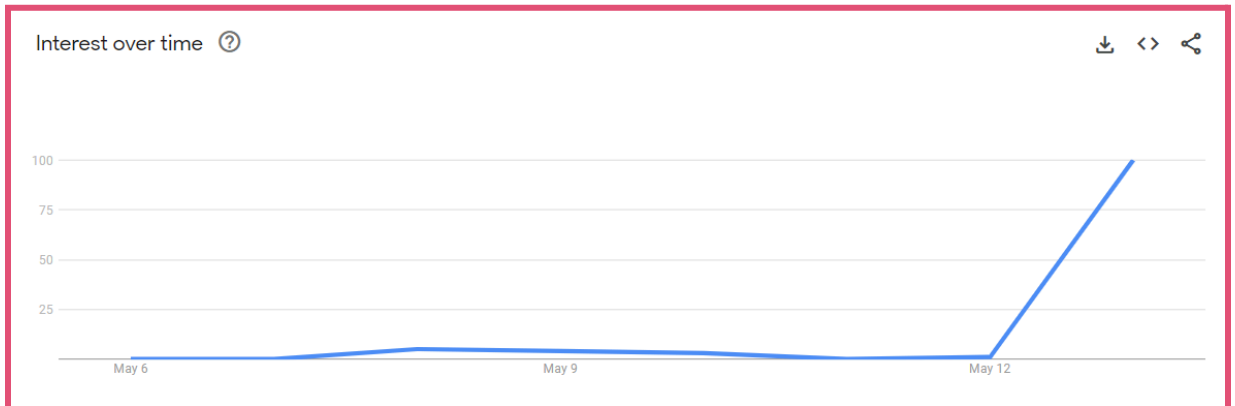
- As documented in [previous AIRA reports](#) , the [77th World Health Assembly](#) (May 27th-June 1st) is also an opportunity for disinformation groups to push anti-vaxx and other political agendas. Pre-positioning of messages and debunks to be shared with the media, influencers and health specialists could help circumvent the spread of the dis/misinformation.

Trends to watch

South Africa records a new confirmed case of Mpox in Gauteng province

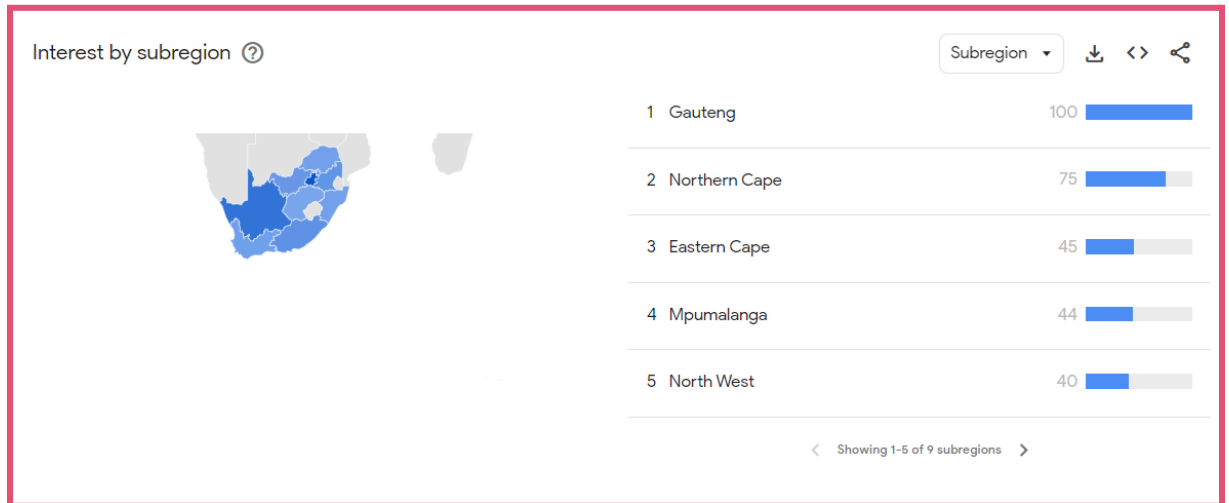
- The Ministry of Health in South Africa reported a [laboratory-confirmed case of Mpox](#). The case is a 35-year-old male residing in the Gauteng province who tested positive on 9 May 2024. The last reported cases of mpox in South Africa were in August 2022.
- In the Minister of Health’s [media statement](#), “According to the preliminary investigation and case findings reports, the patient has no recent travel history to countries experiencing an outbreak of the disease.” and “the risk to the general population is considered low given the low transmissibility of the virus.”
- Among 7 monitored Facebook and X posts discussing the news, users mentioned COVID-19, expressing reluctance to receive another vaccine and attributing Mpox to a side effect of the COVID-19 vaccine, indicating vaccine

hesitancy and limited understanding of Mpox [LINK, LINK, LINK]. A Google Trends search in South Africa reveals a growing interest in the term “Mpox,” with most searches originating from Gauteng. Online users are primarily searching for information about Mpox symptoms, the nature of the disease, and the Mpox vaccine. Below are screenshots from Google trends during 6-13 May:



Related queries ? Rising ↓ <> 🔗

| | | | |
|---|--------------------------------|----------|---|
| 1 | monkey pox | Breakout | ⋮ |
| 2 | what is mpox | Breakout | ⋮ |
| 3 | aap pokke | Breakout | ⋮ |
| 4 | monkeypox vaccine south africa | Breakout | ⋮ |
| 5 | mpox symptoms | Breakout | ⋮ |



A case of Crimean Congo hemorrhagic fever discovered in Bokidiawé, Senegal

- According to an [article](#) by RTS Senegal (Radiodiffusion Télévision Sénégalaise), the national public broadcasting company of Senegal, the chief medical officer of the Matam health district, Dr Alioune Mbacké, has announced the discovery of a new case of Crimean Congo hemorrhagic fever in the village of Bokidiawé in Matam district.
- This is the fifth case reported in Senegal. Dr Mbacké said he had received an email from the Ministry of Health and Social Action, via the epidemiological surveillance division, informing him of this positive case in the Matam region.
- There has been minimal engagement from online users, with 11 comments in total across 8 monitored posts by online media agencies. One user inquired about the [nature of the disease](#).
- Across past AIRA reports, the level of engagement on Crimean-Congo hemorrhagic fever (CCHF) has generally been low. According to AIRA report [#70](#), a case of CCHF was detected in early May. Some online users have raised questions regarding the nomenclature of the disease. An online media agency posted a misleading title referring that the first case of Ebola had been detected in Senegal.

Key resources

Mpox

- [WHO](#), Risk communication and community engagement readiness and response toolkit mpox
- [VFA](#), social media kit on mpox

COVID-19

- [WHO](#), XBB.1.16 Updated Risk Assessment, 05 June 2023
- [WHO](#), Tracking SARS-CoV-2 variants
- [WHO](#), The Oxford/AstraZeneca (ChAdOx1-S [recombinant] vaccine) COVID-19 vaccine: what you need to know
- [WHO](#), provisional agenda of the Seventy-seventh World Health Assembly
- [Ghana check](#), Claims that AstraZeneca COVID-19 vaccines have been withdrawn worldwide due to dangerous side effects are misleading

Crimean Congo Hemorrhagic fever(CCHF)

- [WHO](#), CCHF
- [VFA](#), social media kit on CCHF

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 (siloe 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.