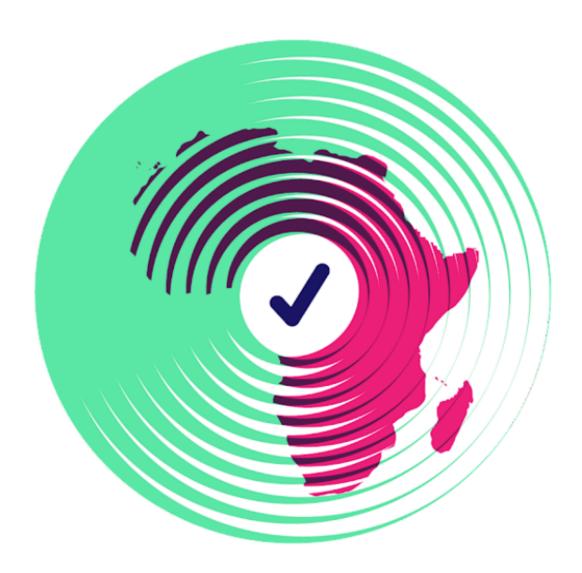
Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



AIRA Infodemic Trends Report 19 November – 3 December 2024 Weekly brief #143

Top concerns

<u>Escalating Misinformation in DRC</u> <u>Surrounding an Undiagnosed Disease:</u>

Social media posts fueling panic and conspiracy theories are undermining public trust in health authorities.

Continuing Misinformation Regarding the Nationwide Livestock Vaccination Program in Kenya (2025):

Claims link the program to animal and human health risks, fueling skepticism among farmers and amplifying distrust in government initiatives.

Malaria Vaccine Misinformation in Nigeria
Fuels Public Distrust:

Allegations of mRNA vaccine technology use and increased mortality among vaccinated girls undermine public confidence in the vaccine.

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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 19th to December 3rd, 2024 in Africa. For more information, please contact please contact the WHO AIRA team: Yara El Moussaoui elvowho.int Rocío López Iñigo, llopez@who.int



<u>Escalating Misinformation in DRC Surrounding an Undiagnosed New Disease</u> Outbreak.

Engagement: 7 posts, 322 likes, 68 comments, 12 shares/retweets

Social media commentary and situation at a glance

• Conspiracy theories employed to explain the uncertainty: Recent social media posts, including viral Facebook posts and comments, have triggered significant panic regarding an <u>undiagnosed disease</u> currently circulating in the Province of Kwango, with recorded 406 cases and with symptoms of fever, headache, cough, runny nose and body ache. All severe cases were reported to be severely malnourished. Among the cases, 31 deaths have been registered¹. The majority of cases reported are among children, particularly those under five years of age.

This situation has sparked increasing questioning among the public. The conversations allege that the disease may be linked to a global conspiracy involving vaccination programs, drawing parallels with past misinformation surrounding the COVID-19 vaccine. These posts suggest the disease is intentionally being spread as part of a covert agenda. This unverified information has sparked widespread fear, misinformation, and growing mistrust in health authorities and their efforts to manage the situation. Link 1 Link 2 Link 3

Limited access to updates exacerbates misunderstanding: The situation is
exacerbated by the limited access to information about the undiagnosed
disease. Many questions are still unanswered while officials investigate the
situation. Thus regular people are more likely to access speculative and alarmist
content shared on social media by mis-/disinformers. Link 4 Link 5 Link 6 Link 7

Why is it concerning?

• Increased public fear: Misinformation linking the undiagnosed disease to conspiracies or vaccination programs has sparked fear and panic among the public. With growing uncertainty and limited access to credible official updates, the public is turning to sensationalized content that often aims at mobilizing emotions over accurate information provision. This can result in confused communities not always being receptive to public health guidance, with the potential for lack of adherence to public health guidance later in the process.

¹ As of December 10th, 2024

 Undermining expert authority: Contradictory online discussions supported by unverified sources diminish the impact of expert guidance on this undiagnosed disease, causing confusion among the general public and eroding trust in health authorities. This can further exacerbate misunderstandings and impact information-seeking behaviours in these acute moments.

What can we do?

- Share the knowns and unknowns: Ensuring updates are shared regularly by public health officials is essential to dispel suspicions and avoid misinformation filling blanks. It is important to recognize what is known at the moment while informing the public about what is being done to better understand the situation. Transparency is key to building and maintaining trust among the public.
- Leverage trusted voices at the community level to avoid panic: Maintain local experts, community leaders, and influencers informed on what is known and next steps ahead. They can support in debunking false claims and maintaining the calm among communities while there's more clarity on the situation.
- Increase access to reliable information by key partners: Collaborate with provincial governments, local media and civil society organizations to ensure that accurate, expert-led content is easily accessible in affected regions.



Continuing Distrust in Health Authorities and Misinformation Surround Kenya's Livestock Vaccination Program Ahead of 2025 Rollout

Engagement: 11 posts, 2581 likes, 67 comments, 1599 retweets

Social media commentary and situation at a glance

Fears that livestock vaccination may affect human health: Social media posts concerning Kenya's 2025 nationwide livestock vaccination program continue (shared in the previous AIRA report) to fuel widespread panic and skepticism. Starting January 2025, Kenya will launch a nationwide Animal Vaccination Campaign targeting 22 million livestock to combat transboundary diseases such as foot-and-mouth disease. The exercise, spanning all counties, aims to protect the dairy sector and ensure its <u>sustainability</u>.

Claims have linked this program to global conspiracy theories involving figures like Bill Gates, suggesting it's a covert scheme to "reduce methane emissions with hidden health risks to humans". In this article, a political leader claims that "the vaccines would alter the genetic structure of livestock, ultimately causing animals to cease emitting methane gas into the atmosphere leading to severe health and environmental consequences". This has sparked fears about the safety of the vaccine and government health efforts, particularly among farmers, further exacerbating distrust in public health initiatives.

• Lack of clarity on program goals fuels misunderstanding: As observed throughout the data, many farmers and members of the public remain unaware of the program's core objectives, including its potential to enhance animal health, improve productivity, and support livelihoods. This gap in understanding not only increases susceptibility to false claims but also risks undermining the program's success by failing to align with community expectations and needs. During a widely viewed episode of the Lynn Ngugi Show, farmer Mary Kathoni voiced apprehensions about the upcoming livestock vaccination program, raising speculation about external influences, including Bill Gates's involvement in Africa. As the founder of Kilimo cha Haki, an organization advocating for fair agricultural policies, she underscored the importance of scrutinizing new initiatives to safeguard farmers' interests. This prominent discussion which has sparked national debates reflects a growing skepticism among stakeholders and underscores the urgent need for transparent, science-based communication to address concerns and combat misinformation effectively.

Why is it concerning?

- Risks to animal health and livelihoods: Resistance to the vaccination program could lead to low uptake, increasing the risk of livestock disease outbreaks. Such outbreaks threaten rural livelihoods and economic stability, particularly for communities reliant on livestock production.
- Spread of misinformation and its impact on One Health initiatives: Conspiracy theories are increasingly targeting One Health initiatives, particularly animal health interventions, marking a concerning shift from the usual focus on human vaccines. This poses a novel risk to this integrated approach to health that recognizes the intrinsic and interdependence among health of humans, domestic and wild animals, plans and the wider environment.

- Engage farmers, agriculture associations and pastoralist organizations:
 Partner with local leaders, farmer cooperatives, and pastoralist organizations to clarify doubts, respond to questions and channel responses to their peers as they become ambassadors for the program. Equip them with clear, fact-based materials to respond to questions, address concerns and counter misinformation among their networks effectively.
- Make clear what are the program's goals and how it can protect both animal and human health: Establish a rapid response team to effectively coordinate with experts and debunk false claims, using engaging content such as infographics, videos, and community forums to clarify the program's safety and goals, emphasizing on One Health approaches. Partner with relevant agencies to consider a comprehensive approach to One Health misinformation.
- **Highlight proven benefits:** Share success stories from past livestock vaccination campaigns to build trust and showcase the program's potential to prevent disease outbreaks, enhance productivity, and secure economic stability.



Malaria Vaccine Misinformation in Nigeria Fuels Public Distrust:

Engagement: 15 posts, 1541 likes, 34 comments, 235 retweets

Social media commentary and situation at a glance

• Questions and concerns on the vaccine technology emerge as Nigeria introduces malaria vaccine in the country: The rollout of the malaria vaccine as part of routine immunization in some African countries has become a focal point for misinformation. The launch of the R21 malaria vaccine in Nigeria last week marks a pivotal step in combating this disease particularly affecting children under five. The phased rollout begins in Bayelsa and Kebbi, two states with high malaria prevalence. Social media posts falsely claim that the vaccine uses mRNA technology similar to COVID-19 vaccines, raising fears tied to previous controversies. Concerns about the vaccine's funding by organizations such as the Bill and Melinda Gates Foundation and unverified claims of increased mortality among vaccinated girls during clinical trials have amplified skepticism.

Mixed public perception on vaccines safety and vaccine efficacy: While some celebrate the inclusion of the malaria vaccine in routine immunization as a milestone in combating the disease, others remain wary. Both the RTS,S and R21 vaccines have been shown to be safe and are prequalified by WHO. However, misleading claims are spreading fears on gender-based mortality disparities from clinical trials are leading to polarized opinions among parents and caregivers. Moreover, doubts on the efficacy of the malaria vaccine trigger additional concerns. In this regard, the vaccine is intended as a complementary tool to other tested effective malaria prevention and control measures. Yet, malaria vaccine are already saving lives and helping to reduce severe malaria among children at risk (phase 3 clinical trials of age-based delivery of RTS,S and R21 vaccines showed more than 50% reduction in malaria cases over first year of follow up, when children are at high risk of illness and death)

Why is it concerning?

- Erosion of trust in public health initiatives: Misinformation linking the malaria vaccine to mRNA technology and past controversies has deepened public skepticism. This distrust undermines confidence in vaccination programs and jeopardizes broader immunization efforts.
- Increased risk of malaria cases: Public hesitation fueled by false claims about vaccine safety, funding, and effectiveness could result in low uptake, leaving many children vulnerable to preventable malaria infections and worsening health outcomes.
- Dominance of false narratives: Social media platforms are amplifying misinformation, overshadowing accurate information from health authorities. This not only undermines the malaria vaccine rollout but also erodes trust in other public health interventions.
- Polarization of public opinion: Mixed perceptions, fueled by unverified claims about clinical trials and partial immunity, have created a divided public, complicating efforts to build consensus and achieve widespread acceptance of the vaccine.

What can we do?

- **Highlight success stories and transparency:** Share real-world examples of vaccine effectiveness and openly address concerns about funding, clinical trials, and partial immunity to rebuild public trust.
- Educate and communicate clearly: Use accessible, culturally sensitive campaigns to explain the vaccine's benefits, safety, and multi-dose regimen, focusing on reducing malaria cases and saving lives.

Key resources

Malaria

- WHO, Q&A on malaria vaccines (RTS,S and R21) (English and French)
- WHO Infographics: RTS,S malaria vaccine (English)
- WHO: World Malaria Report 2023
- VFA: Malaria social networking toolkit
- WHO: Malaria: The Malaria Vaccine Implementation Program (MVIP)
- GAVI: Five things you need to know about the new R21 malaria vaccine

Methodology

The social media listening process relies on a combination of social media analyses conducted for French and English 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 (siloed engagement).

The monitoring reports are produced using NewsWhip Analytics and 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 (e.g. Whatsapp) 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.