

# Africa Infodemic Response Alliance

A WHO-HOSTED NETWORK



**AIRA Infodemic Trends Report**

**11-18 February 2025**

**Weekly brief #150**

# Top concerns

## [Doubts about the effectiveness of the malaria vaccine in Uganda as the country prepares to incorporate It into the national immunization program](#)

Numerous concerns regarding the vaccine’s safety and efficacy have emerged in online comments, revealing the persistence of information gaps.

## [Cholera: Concerns about food hygiene and compliance with environmental laws in Ghana and Nigeria](#)

Poor sanitation and the lack of access to safe drinking water continue to be raised as the main challenges in curbing the spread of cholera in Ghana and Nigeria.

# Reference Guide

<a href="#"><u>Doubts about the effectiveness of the malaria vaccine in Uganda as the country prepares to incorporate It into the national immunization program</u></a> .....	Pg. 3
<a href="#"><u>Cholera: Concerns about food hygiene and compliance with environmental laws in Ghana and Nigeria</u></a> .....	Pg. 5

## Persistent trend

<a href="#"><u>An article on the development of an HIV vaccine in South Africa has sparked intense controversy on social media, particularly regarding the true reasons behind the halt in U.S. funding</u></a> .....	Pg. 9
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<a href="#"><u>Key resources</u></a> .....	Pg. 11
<a href="#"><u>Methodology</u></a> .....	Pg. 12

## Public Health Infodemic Trends in the African Region

This weekly report provides key highlights and operational recommendations based on social listening data from 11-18 February 2025 in Africa.

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## Uganda

### Doubts About the Effectiveness of the Malaria Vaccine in Uganda as the Country Prepares to Incorporate It into the National Immunization Program

Engagement: **32 posts, 639 likes, 67k views, and 269 comments**

Keywords : "paludisme" OR "malaria" "malaria vaccine" OR "vaccin contre le paludisme" (moustique OR mosquito) AND (génétiqument modifié OR "genetically modified") (gene drive OR "forçage génétique") AND (mosquito OR moustique)

- The recent announcement by the Ugandan Ministry of Health that it is planning to add a malaria vaccine to the vaccination schedule for children has prompted a number of reactions and questions on social networks. Many Internet users are expressing fears about the safety and harmlessness of this new vaccine, pointing to a lack of information on where it is manufactured, its composition, and its ability to effectively prevent the disease. In addition, a number of questions are frequently asked: Can a child still contract malaria after vaccination? Which geographical areas will be concerned? Who will benefit?

[\[link\]](#) [\[Link\]](#)

Below are a few comments:

Have you done a due diligence on this Vaccine about its safety, effectiveness and efficacy or its a 'one size fits all' decision by the funders?

Can I get vaccinated also  
Am 25years

Hope you won't mandate it because many parents, including me, have more trust in the vast diagnostic and therapeutic resources available than in that vaccine!

Will the child be safe for life

My villagemates would appreciate complete information on the technology behind this vaccine and its safety profile, as many do not yet have any information. That can help us to tell if it will be a game-changer or a potential setback

Because even those in the ministry don't know what's in that vaccine, and could be really bad

- A poll conducted on the Ministry of Health's X account (formerly Twitter), titled "Is the Malaria Vaccine a game changer in the fight against Malaria? Share your thoughts," recorded 2,014 votes and 23.4k views. The results highlighted a real divide among pollers, with 46% responding "No" versus 45.1% voting "Yes." An additional 160 comments provided further insights or justifications for these positions. [\[link\]](#)

### Why is it concerning?

- The Ugandan government plans to introduce the malaria vaccine into the national immunization schedule, according to an [official statement from the Ministry of Health](#). This decision has raised questions about the preparedness of healthcare infrastructure and the effectiveness of existing public awareness efforts.

[Based on social media comments](#), the numerous questions surrounding the vaccine, as well as the divided public opinion on its usefulness, underscore the need for public health authorities and communication professionals to strengthen their efforts in informing and educating the population.

- Recent figures from the [Ugandan Ministry of Health](#) and international organizations show that malaria remains one of the leading causes of morbidity and mortality in Uganda [\[Link\]](#). According to official statistics, several thousand children under the age of five are affected each year, illustrating the urgent need for more effective preventive measures [\[Link\]](#)
- Public skepticism regarding vaccines—particularly new ones—is not unique to Uganda. Information gaps, misinformation and disinformation can lead people to question the manufacturing process, clinical trials, and quality control of the malaria approved vaccines.

## What can we do?

- Listen to communities and regularly communicate clear, precise, and up-to-date information from reliable sources to address the common questions about malaria vaccines. The WHO's [Questions and Answers](#) webpage provides information about vaccine safety, efficacy, development, and testing that can be used to develop communication messages.
- Experiences from [other countries](#) that have already introduced the malaria vaccine into their routine immunization programme could help detect concerning narratives and adapt the communication strategy.
- Strengthen community engagement and partnerships with local leaders, health workers, and civil society organizations to enhance trust and ensure that health interventions are tailored to the needs and concerns of the population. A collaborative approach helps address misinformation more effectively and fosters greater acceptance of vaccination and other public health measures.
- Use and adapt to the local context the available resources on this topic, such as [the Viral Facts](#).

## Ghana

### Cholera: Concerns about food hygiene and compliance with environmental laws in Ghana and Nigeria

Engagement: Ghana **29 posts, 2,193 likes, 321 comments**

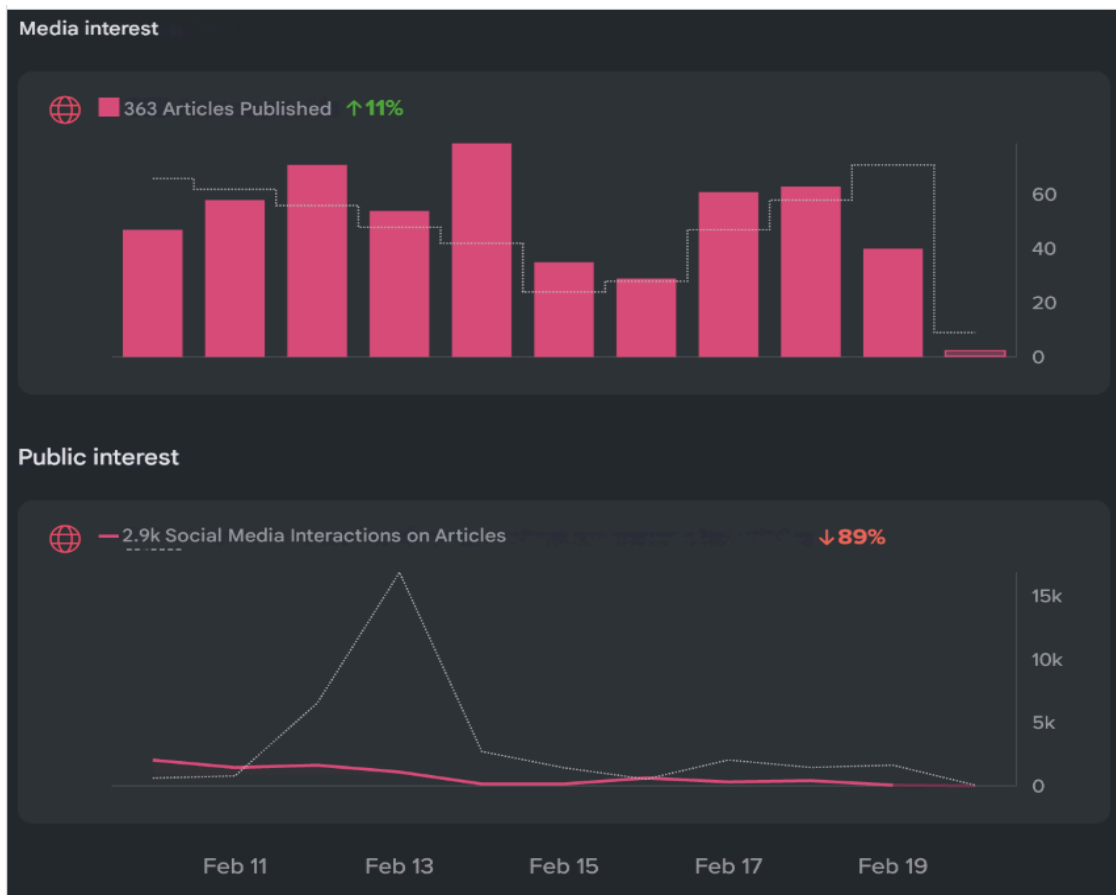
**Keywords :** "choléra" OR "cholera" "vaccin contre le choléra" OR "cholera vaccine" "campagne de vaccination" OR "vaccination campaign" "épidémie de choléra" OR "cholera outbreak" ("eau contaminée" OR "contaminated water") AND (choléra OR cholera)

- Social media monitoring in Ghana reveals deep concerns about the cholera outbreak and an urgent need to strengthen food hygiene regulations. Many people are calling for better access to clean water to prevent the spread of cholera in the country [\[Link\]](#). Internet users are particularly worried about poor hygiene conditions, the use of wastewater from open drainage systems, and sewage discharge, which are seen as key factors contributing to the current health crisis. Calls have been made for improved waste management practices [\[Link\]](#) [\[Link\]](#) [\[Link\]](#) [\[Link\]](#).

- During his speech in Parliament, Ghana's Minister of Health emphasized the importance of improving sanitation and hygiene practices to prevent future outbreaks. [\[Link\]](#)

### Why is it concerning?

- [Cholera vaccination campaign](#) kicked off in Ghana on February 14, 2025
- Over the period under review, there was a marked increase in the volume of articles published (363, or +11%), suggesting growing media interest in the subject. On the other hand, public engagement on social networks, although having reached a marked peak around February 13, fell considerably, with an 89% drop in total interactions (around 2.9 k). In other words, even as media coverage increases, online public discussion and reaction drops off sharply, suggesting a dissociation between the production of articles and the actual engagement of web users. Graph below



Source: NewsWhip, social listening to conversations about cholera in Ghana from February 11 to 19.

- Amplification of Concerns on Social Media : Digital conversations play a key role in spreading misinformation. Posts describing poor hygiene and scarce clean water often heighten anxiety—particularly when official reassurance is

lacking—and can sow distrust toward health authorities, fueling alarmist narratives or conspiracy theories around the outbreak.

- Risk of Misinformation and Loss of Public Trust : False beliefs about cholera can minimize its severity or promote untested treatments. Rumors of contaminated water may lead communities to reject safe sources, while ineffective communication from authorities risks undermining prevention measures like vaccination and water purification.
- Institutional Communication and Perceived Lack of Action : When institutional responses seem slow or insufficient, the public may doubt the seriousness of the effort. Inadequate or delayed updates create an information vacuum quickly filled by speculation, and the absence of reliable voices in the discussion weakens critical health messages.
- Emotional and Psychological Impact of the Crisis : Widespread images of suffering and unsanitary conditions can trigger panic, complicating outbreak management. Fear may lead to stigmatization of affected communities and amplify social frustration or political tensions if the crisis is viewed as a failure of government responsibility.

### What can we do?

- Make Communication More Proactive and Transparent
  - Regularly share updates on the epidemiological situation and measures taken (via radio, television, and social media).
  - Anticipate rumors by responding quickly to people’s questions and concerns, providing reliable and easily understandable information.
- Encourage Community Participation and Health Education
  - Organize training sessions and practical workshops on food hygiene, water purification, and cholera prevention, in collaboration with local leaders and NGOs.
  - Support the creation of community health committees responsible for monitoring and reporting concerns, as well as promoting good hygiene practices in neighborhoods.
- Identify and Combat Misinformation
  - Implement monitoring of social media and local media to quickly detect false information and respond with verified facts.
  - Collaborate with influencers, journalists, and fact-checking organizations to disseminate targeted corrective and reassuring messages. Use VFA’s resources on cholera to debunk rumors [\[link\]](#).
- Strengthen Health Workforce Training
  - Ensure that health professionals (doctors, nurses, community health

workers) receive regular training on cholera management, effective public communication, and social listening.

- Create a network to facilitate experience-sharing among different regions, allowing best practices in cholera control to be pooled.
- Promote Food Hygiene Regulations
  - Work with local authorities to ensure that markets, restaurants, and street vendors comply with minimum hygiene standards.
  - Increase inspections, raise awareness, and impose penalties where necessary for high-risk practices (use of wastewater, improper food storage, etc.).

## Nigeria

**Engagement :** Lagos 11 post, 327 mentions "J'aime", 231 commentaires

**Keywords :** "choléra" OR "cholera" "vaccin contre le choléra" OR "cholera vaccine" "campagne de vaccination" OR "vaccination campaign" "épidémie de choléra" OR "cholera outbreak" ("eau contaminée" OR "contaminated water") AND (choléra OR cholera)

- The reopening of the Oke Arin/Gorodom market on Lagos Island ([The Oke Arin/Gorodom market is one of the largest and busiest on the island of Lagos](#)), playing a vital role in the city's commercial ecosystem. It attracts thousands of traders and customers every day, not only from Lagos but also from neighboring regions, making it an essential hub for the distribution of foodstuffs, household goods and other necessities.), following a two-week closure due to breaches of state environmental laws, has generated significant reactions regarding market-specific and city-wide sanitation issues in the spread of cholera. [\[Link\]](#) [\[Link\]](#) [\[Link\]](#)
- The market reopened after traders signed an agreement to maintain environmental cleanliness. [\[Link\]](#)

### Why is it concerning?

- Oke Arin/Gorodom market is just one example: poor sanitation, particularly linked to improper waste management and the lack of strict health measures, facilitates the spread of cholera-causing bacteria.
- Public health risk: Degraded sanitary conditions in markets and densely populated neighborhoods further expose residents to waterborne and foodborne illnesses.



- Challenge to public trust: Repeated closures and what can be perceived as “arbitrary” enforcement of environmental laws can undermine citizens’ confidence in local authorities, making it more difficult to implement lasting public health measures.

### What can we do?

- Strengthen inspections and enforcement: Regular monitoring and the implementation of deterrent penalties for failing to meet hygiene standards are necessary to ensure market cleanliness.
- Raise awareness and provide training: It is crucial to educate both traders and consumers on best hygiene practices and the risks associated with waterborne diseases. The traders’ agreement at Oke Arin/Gorodom is a step in the right direction but must be coupled with practical training.
- Improve infrastructure access: Better access to safe water, more efficient waste collection services, and stronger support for local authorities can significantly reduce sources of infection, in line with the [WHO Guidelines for Cholera Control \(PDF\)](#).
- Encourage citizen participation: Involving local communities, opinion leaders, and traders’ associations in overseeing hygiene practices and adherence to environmental laws can help sustain positive changes and ensure greater resilience to cholera.

## Persistent trend

**An article on the development of an HIV vaccine in South Africa has sparked intense controversy on social media, particularly regarding the true reasons behind the halt in U.S. funding.**

- The article, titled “South African scientists were testing a promising HIV vaccine. Then came Trump’s aid cuts” [\[Link\]](#)[\[Link\]](#), was shared and commented on more than 4,000 times on Facebook. It highlights the concrete impact of U.S. budget cuts on research carried out in South Africa.
- In the comments, many internet users argue that the United States halted its funding to prevent Africa from developing a vaccine. Such speculation is fueling distrust and raising questions about possible political or economic motives behind the decision [\[Link\]](#).

### Why is it concerning?

- Research and Public Health Context:** According to UNAIDS, South Africa remains one of the countries most heavily affected by HIV, with over 7.5 million people living with the virus [\[Link\]](#). The abrupt end to U.S. funding—highlighted in the article, “South African scientists were testing a promising HIV vaccine. Then came Trump’s aid cuts”—raises concerns about possible delays in vaccine research, potentially blocking major breakthroughs. Given HIV’s significant impact on mortality and morbidity, any interruption in research and clinical trials could prolong the wait for an effective vaccine and hinder global efforts to reduce HIV-related deaths.
- Potential Impact on Public Trust and Collaboration:** If the public believes that major donors are deliberately blocking the progress of an African-developed vaccine, confidence in international partnerships could erode, feeding into conspiracy theories about foreign interference in African health initiatives. This distrust could deter participation in clinical trials and undermine cooperation between local scientists and global partners. As misinformation spreads, it may complicate ongoing HIV prevention and treatment campaigns, ultimately slowing progress toward controlling the epidemic.

## Key resources

### Cholera

WHO, [cholera outbreaks, Q&A](#)

VFA, [cholera social media toolkit](#)

Global Task Force on Cholera Control, [clarifying rumours and community concerns.](#)

SSHAP, [key considerations: socio behavioural insight for community- centred cholera preparedness and response in Mozambique, 2023](#)

SSHAP, [social, behavioural and community dynamics related to the cholera outbreak in Malawi, 2022](#)

### Malaria

WHO, [Annual malaria report spotlights the growing threat of climate change](#)

WHO, [Annual world malaria report 2023](#)

WHO [initiative to stop the spread of Anopheles stephensi in Africa](#)

VFA, [Malaria social media toolkit](#)

WHO malaria fact [sheet](#)

Malaria threat [map](#)

[Malaria Social & Behavior Change Communication National Strategies](#)

### HIV

WHO, [HIV fact sheet](#)

## 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 (siloes 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.