Africa Infodemic Response Alliance

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AIRA Infodemic Trends Report

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Weekly brief #151

Top concerns

[Mpox is causing a strong wave of concern and uncertainty, notably in Zambia, South Sudan, Uganda, and the DRC](#)

[HIV in South Africa and Kenya: Antiretroviral shortages and stalled vaccine innovation raise serious concerns, while misinformation and uncertainty grow in Kenya](#)

Recent reports in South Sudan, Zambia, the DRC, and Uganda reveal a worrying progression of the epidemic, while a lack of clear messaging increases uncertainty among communities, making it more difficult to control the spread of the virus.

In South Africa, the halt of a promising vaccine and financial challenges raise concerns about innovation and access to ARVs, while in Kenya, growing uncertainty, rumors, and increasing worries revolve around the future availability of antiretroviral treatments.

Reference Guide

RDC, Zambia, South Sudan, Uganda

The emergence of mpox is causing a strong wave of concern and uncertainty, notably in Zambia, South Sudan, Uganda, and the DRC

Engagement: 11 posts, 11K likes, 3K comments, and 861 shares

Keywords : ("Monkeypox") AND ("Zambia" OR "South Sudan" OR "Uganda" OR "RDC") AND (cluster OR infection)

☐ In South Sudan, the Ministry of Health announced on monday the confirmation of six mpox cases, indicating a growing epidemic following the announcement of the first index case about three weeks ago. This information, relayed by several local media outlets, highlights the rapid progression of the epidemic in the country, raising questions from online users about the extent of transmission and the preventive measures in place [Link].

☐ In the South Kivu province of the Democratic Republic of the Congo, an alarming incident was reported: about ten patients allegedly escaped from the Miti-Murhesa treatment center, prompting the Ministry of Health to issue a warning about the management of the epidemic in the region. This episode adds to other reports, amplifying the fear of uncontrolled spread in areas where healthcare resources are limited [Link].

Zambia : 3 posts, 5K likes, 1,200 comments, 400 shares

☐ In Zambia, messages indicate the rapid emergence of Mpox case clusters, yet communication remains scattered and imprecise. Online comments reveal significant confusion, especially about the transmission and protective measures.Many are asking for concrete, precise guidelines, demonstrating that the lack of communication is fueling growing concern and distrust toward health authorities.

☐ Here are a few comments

> The awareness on this disease should be expanded its clear a lot don't understand how it is transmitted can the ministry of health give awareness to this matter before it becomes an epidemic

> Oh so this MPOX is sexually transmitted?

> Is it sexually transmitted

> His monkey pox serially(sexually) transmitted or what now

> Is mpox a sexually transmitted disease as well.

> Avoid skin to skin what does it mean?

Uganda : **2 posts, 4K likes, 1,100 comments, 500 shares**

Internet users are calling for clear explanations on how the virus spreads and concrete measures they should take daily to protect themselves effectively. Gaps in providing clear messages make it difficult for the population to understand the situation and fuels a growing sense of uncertainty.

South Sudan : **2 posts, 3K likes, 900 comments, 350 shares**

- ☐ In South Sudan, particularly around Juba, the situation is worsened by the lack of detailed information on infection hotspots and preventive measures. The perception of a partial or unclear response further fuels an atmosphere of distrust and anxiety among the population.

- ☐ Here are a few comments

Where are the cases reported please don't just assume things because you need donations

What are the prevention measures to be taken if I'm to ask ?😱

In which areas of Juba specifically?

How can we prevent it ?

which place exactly within Juba where this six cases were been reported?

DRC : **2 posts, 4.5K likes, 1,000 comments, 450 shares**

The absence of structured communication reinforces the feeling of uncertainty in Équateur Province. Residents complain about the lack of regular updates and clear instructions, making it difficult to adopt protective behaviors. This lack of reliable information allows rumors to spread further, compromising the authorities' ability to build trust and effectively guide the management of the epidemic.

☐ Community feedback data, summarized by the infodemic management team in DRC, highlights several concerns regarding the management and communication surrounding mpox:

In Tshuapa and Lomami, the use of traditional medicine, such as Kolokonjo leaves was reported despite the lack of scientific evidence of their efficacy.

In Kinshasa, doubts persist about the origin and effectiveness of the vaccine, while stock shortages and the early closure of vaccination sites make access to doses difficult. This situation increases distrust and hinders vaccination efforts.

In Sankuru, the shortage of medication is a major concern, leading some to resort to self-medication or unproven alternatives, increasing the risk of complications and the spread of the disease.

These concerns emphasize the urgent need for clearer communication and better resource management to restore trust and improve the response to the epidemic.

What can we do?

☐ Disseminating regular and accessible updates: health authorities should issue clear and frequent bulletins that detail the number of cases, the affected areas, and the preventive measures to be adopted. These updates can be broadcast via local radio, social media, and community meetings to ensure that the entire population is reached.

☐ Involving community Leaders: It is essential to collaborate with village chiefs, community leaders, and religious figures to convey messages that are adapted to local realities. These trusted local actors can rephrase official guidelines in a simple and understandable manner, thereby strengthening public trust and encouraging adherence to the recommendations.

☐ Using Visual and Educational Materials: Creating infographics, explanatory videos (such as those provided by [Viral Fact Africa](#)), and clear posters on barrier gestures and preventive measures will help simplify complex information. These resources, when distributed in health centers and through local media, will reduce confusion and offer concrete guidance to the public.

☐ Establishing Interactive Communication Channels: Organizing live question-and-answer sessions via radio or social media will allow citizens to receive immediate responses to their queries. Additionally, setting up a dedicated hotline or call center can provide personalized support to address community concerns.

☐ Coordinating Communication at a Regional Level: Authorities in the affected countries should work together to harmonize their messages and disseminate common guidelines. Joint press conferences and the publication of unified protocols would help create a consistent message, reinforcing the credibility of the measures and alleviating uncertainty across the regions.

HIV in South Africa and Kenya: Antiretroviral shortages and stalled vaccine innovation raise serious concerns, while misinformation and uncertainty grow in Kenya

Engagement: South Africa ； **8 posts, 27K likes, 10K comments, and 7K shares**

Keywords :("HIV") ("Kenya" OR "South Africa") ("ARV" OR "continuity") ("innovation" OR "vaccine trial") (""budget cuts" OR "USAID")

- ☐ USAID directives have brought research projects on a promising HIV vaccine to an abrupt halt. This suspension of innovation raises concerns about the South African healthcare system's ability to advance in the fight against the virus [Link].
- ☐ The halt of these projects is seen as a setback to discovering new solutions that could enhance HIV prevention and treatment in the region.

Why is it concerning?

- ☐ According to UNAIDS, South Africa remains one of the countries most affected by HIV, with over 7.5 million people living with the virus [Link].
- ☐ In the comments, many users claim that the United States halted its funding to prevent Africa from developing a vaccine. Such speculations fuel mistrust and raise questions about possible political or economic motives behind this decision [Link] [Link].
- ☐ Despite financial challenges exacerbated by international decisions, including budget cuts from theUSA, South African authorities are making efforts to ensure the continued supply of antiretroviral (ARV) treatments [Link] [Link] [Link] [Link].
- ☐ The comments reflect deep concern and distrust toward pharmaceutical companies and institutions overseeing HIV treatments and vaccines in South Africa. They are accused of prioritizing financial interests over scientific progress, particularly by suppressing or stifling certain medical discoveries related to ARVs to maintain the existing market.
- ☐ Another major concern revolves around the safety of researchers involved in medical advancements. Some users fear that scientists may be threatened or even eliminated, drawing parallels to figures like "Dr." Sebi, who is frequently cited in conspiracy theories.

- ☐ These discussions reflect a widespread climate of suspicion toward health institutions, fueled by the belief that major discoveries could be concealed to protect economic interests.
- ☐ In this context, many voices are calling for increased protection for scientists to prevent financial stakes from overshadowing potential benefits for affected populations.
- ☐ Below are some of the comments:

> Protecting this woman at all costs, she is not safe. We don't expose such people without protection, i mean proper protection

> **Fikile Vezi** Exactly. This is ground breaking and will affect Big Pharma's bread and butter. Her life is in danger.

> RIP in advance…. They killed a lot of scientists who discovered even how to do fuel for the car

> This kind need to supported and protected at the same time. We are tired of loosing people just after making a breakthrough in research or a potential life changing discovery.

> As south Africans we need to protect her from what happened to Dr Sebi.

What can we do?

- ☐ Initiatives like "Viral Fact Africa" and "Les Clics de la Tentation" by Sidaction use engaging content to educate the public and debunk misconceptions about HIV.
- ☐ The Presidential Initiative on AIDS Strategy for Communication to Youth (PIASCY) in Uganda has demonstrated the effectiveness of sexual health education in preventing HIV and combating misinformation.
- ☐ Involving public figures and opinion leaders to spread positive and factual messages about HIV can help shift perceptions and reduce stigma.
- ☐ Recognizing and promoting the contributions of national researchers can strengthen public trust in local health initiatives.
- ☐ National strategies must incorporate comprehensive approaches, as recommended by UNAIDS in its 2021–2026 Global AIDS Strategy, to end inequalities and defeat the epidemic.

Engagement : <mark>Kenya ;</mark> 7 posts, 6K likes, 1,789 comments, and 973 shares

Keywords :("VIH" OR "HIV") ("Kenya" OR "Afrique du Sud" OR "South Africa") ("ARV" OR "antirétroviraux") ("traitement" OR "approvisionnement" OR "continuity") ("innovation" OR "vaccin VIH" OR "vaccine trial") ("financement" OR "budget cuts" OR "USAID")

- ☐ Several posts highlight major concerns about the continuity of antiretroviral treatments in Kenya, particularly regarding potential shortages and the impact of funding cuts on long-term HIV care programs. Many online discussions reflect anxiety about the government's ability to maintain a stable ARV supply, with users questioning whether alternative funding sources have been secured. Additionally, fears of increased treatment costs or disruptions in medication adherence have surfaced, especially among vulnerable populations who rely on public health programs.
- ☐ Tuko.co.ke, Kenya's most widely read news platform, has reported on these concerns, amplifying public discourse on the uncertainty surrounding ARV accessibility and the implications of budget reallocations [Link].
- ☐ The context of budget cuts and the reallocation of international funding threatens to disrupt the ARV supply chain, which is essential for the continuous care of people living with HIV [Link].

Why is it concerning?

- ☐ Kenya has approximately 1.4 million people living with HIV. Any disruption in ARV distribution could lead to treatment interruptions, increasing patients' viral load and making the disease more difficult to control.
- ☐ The Kenya AIDS Strategic Framework II (2020/21-2024/25) highlights that implementing Kenya's HIV response will require 647.7 billion Kenyan shillings, to be sourced from national funding, the private sector, and development partners.
- ☐ ARVs must be taken without interruption to prevent the development of drug-resistant HIV strains[Link]. A prolonged medication shortage could make some treatments ineffective, forcing patients to switch to more expensive and complex regimens.
- ☐ Uncertainty regarding access to medication creates stress, anxiety, and increased stigma among patients. Many people may hesitate to get tested or start treatment out of fear that they won't be able to continue it properly.

What can we do?

- ☐ In a context of potential ARV supply shortages, panic and misinformation can worsen the situation by leading some patients to interrupt their treatment or resort to inappropriate alternatives. It is therefore essential to communicate effectively to reassure and inform.
- ☐ Explain why stopping ARV treatment can be dangerous and provide solutions for those facing difficulties in accessing their medication.

Trend to watch

hMPV in Ghana: Information gap and lack of detailed data raise serious concerns

- ☐ In Ghana, the confirmation of the first case of HMPV has caused significant public concern, primarily due to a lack of clear information regarding the mode of transmission, severity of the virus, and preventive measures. [The official announcement](#) did not provide precise explanations on whether the virus spreads through direct contact, airborne particles, or contaminated surfaces, leaving room for uncertainty. Additionally, the absence of detailed information on high-risk groups and the potential impact on vulnerable populations has led to speculation about the disease's severity and potential complications. Without concrete guidelines on protective measures, citizens are left to speculate, fueling fear, misinformation, and heightened anxiety about the outbreak's true extent [[Link](#)][[Link](#)][[Link](#)].
- ☐ The lack of detailed data on modes of transmission, risk groups, and control protocols complicates the ability of health authorities to communicate effectively and reassure the public. Without clear information, it becomes difficult to provide precise and tailored recommendations, leading to confusion and heightened anxiety. In this information gap, social media quickly becomes a breeding ground for rumors and conspiracy theories, further deepening mistrust in health institutions.

  However, some official resources are available, such as those from the World Health Organization (WHO), which provides fact sheets and recommendations on emerging respiratory infections, including [hMPV](#). These resources could be better utilized and adapted to the local context to bridge communication gaps and reassure the public with verified and accessible information.

☐ It is therefore crucial to implement a coordinated response, with regular updates and simple explanations on preventive measures, to restore public trust and ease concerns.

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

☐ Viral Facts Africa, mpox social media kit with engaging explainers and debunks

☐ WHO, LIVE: Q&A on #mpox. Join us and #AskWHO your questions!

☐ WHO, Episode #124 - mpox: what you need to know

☐ UNICEF, U report DRC

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, External situation report#44 - 23 December 2024

Public health guidance/RCCE

☐ WHO, the Global Mpox Dashboard

☐ WHO, Risk communication and community engagement (RCCE) for monkeypox outbreaks: interim guidance, 24 June 2022.

☐ WHO, Public health advice for sex workers on mpox

☐ WHO, Considerations for border health and points of entry for mpox: interim guidance

☐ WHO, Community protection for the mpox response: a comprehensive set of actions

- ☐ SSHAP, Mpox question bank: Qualitative questions for community-level data collection
- ☐ Practical guidance for risk communication and community engagement (RCCE) for Refugees, Internally Displaced Persons (IDPs), Migrants, and Host Communities Particularly Vulnerable to COVID-19 Pandemic [LINK]

Mpox vaccines
- ☐ WHO, Mpox Q&A, vaccines
- ☐ WHO, Mpox immunization

HIV
- ☐ WHO, HIV fact sheet
- ☐ WHO - HIV/AIDS: Information and Questions & Answers
- ☐ UNAIDS - HIV/AIDS News and Reports
- ☐ Sidaction - Communication kit and educational content on HIV/AIDS
- ☐ WHO Global Health Observatory - HIV indicators and data
- ☐ WHO Risk communication and community engagement considerations (CREC)
- ☐ Internews : Preparing the information ecosystem for health emergency response

HMPV
- ☐ WHO - Fact sheet and recommendations on emerging respiratory infections
- ☐ Educational tools - Infographics and videos explaining HMPV
- ☐ WHO Global Health Observatory - Data on emerging respiratory infections

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 (siloed 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.