Combating COVID-19 Misinformation in Nigeria
A Compendium of Selected Stories from the ARN Project
This publication was produced as part of IWPR’s Africa Resilience Network (ARN) programme, administered in partnership with the Centre for Information Resilience (CIR), The International Centre for Investigative Reporting (ICIR), and Africa Uncensored.
Combating COVID-19 Misinformation in Nigeria

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FOREWORD

An infodemic of misinformation and disinformation has run hand in hand with the COVID-19 pandemic.

Mis/disinformation about COVID-19 has been spread throughout Africa. Unreliable, false and malicious information about the scale of the pandemic and the origin, diagnosis and treatment of the virus has been propagated via politicians, broadcast/social media, celebrities, scammers and through social networks. The implications are severe, wide-ranging and long-lasting: generating public health risks; undermining trust in governments, media and international organisations; increasing vulnerability to crime; weakening social cohesion; encouraging xenophobia and driving instability. Added to that, certain nation states have used this infodemic to denigrate in the eyes of Africans the standing and reputation of the US, as well as artificially raise their own.

Launched at the end of 2020, the main goal of the program was to counter state-sponsored COVID-19 related disinformation in Kenya and Nigeria by increasing the capacity of journalists and media professionals to identify and expose disinformation networks and narratives.

"Before the program, I wasn't keen on going the extra mile to verify information - but now I am. I want people to know the truth. Information is power"

— Africa Resilience Network participant

The Africa Resilience Network created the chance for almost 80 journalists and activists from Nigeria and Kenya to tool up to respond to the infodemic.

An open competition received over 1000 applications from journalists and information professionals from across Kenya and Nigeria. Chosen for their geopolitical importance, both countries have mature media markets, diverse audiences and influences within their regions.

The program trained and mentored the journalists to identify the source and broadcasters of disinformation, patterns of production and propagation and gain insight into the networks and communities that drive and consume information and disinformation. We coordinated the disclosure and manipulation and shed light on the tactics behind disinformation campaigns.

The successful applicants rarely met each other, or indeed the partners, as the entire program was delivered from, and received to kitchen tables, living room sofas, and quieter office corners. Conceived as face to face training in the early weeks of the
pandemic, the program pivoted and adapted training and mentoring to COVID-19 times was a challenge met by participants and trainers alike. Over 4000 learning hours of training were Zoomed; mentors reached out by Whatsapp, email, and phone to support journalists working to produce copy, broadcasts, video, infographics and podcasts.

Aiming to reach audiences on different media platforms and make a truly worthwhile contribution to the battle on mis and disinformation, as one Africa Resilience Network program participant put it:

"I think we only really see the tip of the iceberg in terms of what is trackable - on social media, Facebook, Twitter...as a lot is being spread by Whatsapp groups and local communities"

Gathered here are a number of the almost 200 journalistic pieces and investigations have been produced over our months of effort. These pieces range from deep dives into the murk of rumours, conspiracy theories, and deliberate misguidance exposed and fake news debunked.

The Africa Resilience Network developed website – [https://africaresiliencenetwork.com/](https://africaresiliencenetwork.com/) – shares many of these stories shared alongside a wealth of learning materials and resources on COVID-19. We hope that professional media audiences will use this resource to learn how to new tools in their efforts to fight mis and disinformation, and benefit as another participant said:

"The tools from ARN have really helped me to grow in my research and writing. My experience has been great. I only knew the basics of fact checking when I joined, but now I know a lot more".

Delivered by an established international and regional partnership led by the Institute of War and Peace Reporting (IWPR), UK with the Centre for Information Resilience (CIR) UK, Africa Uncensored, Kenya and the International Centre for Investigative Reporting (ICIR), Nigeria the Africa Resilience Network program was funded by the US Government’s Global Engagement Centre.

This partnership of not for profit organisations, who specialise in investigative journalism and exposing disinformation, believes that access to honest information is a right which needs to be actively upheld, and even more so in a time when many of us are confused and anxious as to how to find accurate and reliable on which to make important decisions about our health.

Lisa McManus
Programme Manager, IWPR
PREFACE

Before the COVID-19 pandemic hit the world in 2020, Nigeria had been dealing with fake news, misinformation problem. I remember in 2019, in the months leading to the 2019 general elections, some 15 news organisations and the University of Lagos deemed it necessary to come together to fight the virulent misinformation that dogged the polls. That collaborative effort, which birthed CrossCheckNigeria found that political parties, politicians, their fronts, cronies and supporters all deliberately cooked up or circulated fake information aimed at harming their opponents.

In a pluralistic nation like Nigeria that is divided along religious and ethnic lines, mischief-makers bent on sowing discord and widening the fissures of division have also used fake news and misinformation as a tool to further their agenda. Fake images, voice recordings and even videos have been circulated in order to discredit the other religion or tribe and foment crisis.

The insurgency in the Northeast that has decimated that region for over a decade has also become a veritable battleground for misinformation combats. Social media savvy Boko Haram insurgents, citizens and even state actors and institution were found to have shared fake news to push specific narratives.

However, the Corona Virus disease came with its own peculiar kind of misinformation regime. First, misinformation about the disease, like the pandemic itself, hit the world suddenly and with devastating effect. It did not help that there was a lot that even scientists could not explain about the disease. A lot of misinformation swirled around the world about wearing of masks, physical and social contact, even the mode of transmission of the disease. Worse still, religious leaders, parents, ordinary people and even scientists, for diverse reasons, helped to push fake narratives about the disease.

However, the COVID-19 misinformation pandemic was also different because of its capacity to wreak bodily harm and cause even death. For example, at one point, with COVID-19 killing so many people around the world, some suggested that taking hydroxychloroquine would cure the disease. Others recommended ingesting alcohol-based sanitisers, herbs, or salt water a remedy.

Thus, the media response to fighting this new information disorder had to be different. Of course, the media in Nigeria, as in other parts of the world responded robustly and swiftly to the COVID-19 infodemic, with many newsrooms quickly setting up fact checking desks and organizing crash training programs for their reporters.

Of all these responses, the one from the Africa Resilience Network, ARN, was unique. The ARN is a collaborative initiative of the Institute for War and Peace Reporting, IWPR, the Centre for Information Resilience, CIR, the International Centre for Investigative Reporting, ICIR, and Africa Uncensored, aimed at using the media to combat misinformation and disinformation. Its unique response to the infodemic lies in its bringing different professionals, including journalists, medical doctors, lawyers
and other experts in the sciences, activists and social media influencers into its fighting army.

These fake news fighters were not only trained by some of the best verification experts in the world but also worked with legal and medical teams as well as senior editors who acted as mentors to produce some of the most outstanding stories that debunked the misinformation about COVID-19 that have been peddled. From debunking claims about heat killing Corona Virus or COVID-19 vaccine causing infertility in women to putting a lie to misinformation about the efficacy of local herbs or gagging with salt water to cure the disease, the stories produced under this project are unique not only in their thoroughness but also in providing detailed evidence – based, data – backed reasons for conclusions reached.

Combating COVID-19 Misinformation in Nigeria: A compendium of ARN Reports is not just a compilation of the stories by journalists and other professionals debunking misinformation, it is also a narrative of the experiences of these people as part of an army raised to fight a war – against the scourge of misinformation, which can be as deadly as a virus like Corona.

With chapters like “How we did it”, “Tracking the learning”, “Lessons from the Journalists” and “Lessons from the Trainings and Mentorship”, there is really a lot to learn in the book about how we can all fight misinformation together.

I believe that the book will be useful to practicing journalists, journalism students and teachers, researchers, verification experts, civil society organisations, and anyone interested in combatting misinformation.

Dayo Aiyetan
Executive Director, ICIR
INTRODUCTION ARN BOOK COMPENDIUM

The Birth of the African Resilience Network (ARN) – Fake Expose

THE ARN – Fake Expose is a project of IWPR, the Institute for War and Peace Reporting (IWPR) supported by the U.S. Department of State / Global Engagement Center-funded program. It was implemented in collaboration with the Centre for Information Resilience (CIR) in the UK, The African Uncensored (Kenya), and the International Centre for Investigative Reporting (ICIR) in Nigeria. It focused mainly on ‘Building Capacity to Expose and Protect against State-Sponsored COVID-19 Disinformation in Kenya and Nigeria’. The project worked with 40 participants in each country, including journalists and Civil Society Actors working in the health sector, carefully selected and divided into two cohorts.

Why Disinformation and Misinformation around COVID-19

COVID-19 has only been with us for a short time, but misinformation and disinformation have long been a danger to health and social cohesion. The speed and ease with which false information spreads is unprecedented, as is the threat that it poses.

Disinformation and misinformation, and “fake news” are among the greatest dangers in these times of COVID-19. Not having access to correct information impacts everyone’s ability to protect themselves against this virus. Many people use social media, messaging apps and other media to spread false information and disrupt lives. Others innocently spread untruths about the virus because they do not have access to reliable information. Spreading false information about COVID-19 for whatever motivation is life-threatening.

What We Did

Through the creation of the ARN, we provide a platform for our partners in Kenya and Nigeria to investigate, check fact, bust myths, and uncover the truth behind the falsehoods around COVID-19 and publish the same on different platforms and in major local languages in both countries.

How We Did It

Through training, networking and mentoring participants in a specific set of skills to identify and expose disinformation, including network analysis, Open-Source intelligence (OSINT), data gathering and analysis, ethics, freedom of information, safeguarding and others. We further supported them to use this and similar content to investigate disinformation and misinformation around COVID-19.

Our Key Processes

Participants
Participants were put through a rigorous qualifying exercise. They were requested to apply, and upon consideration, were asked to complete a needs assessment questionnaire from which the training curriculums were designed. Selected candidates had a total of eight (8) online training sessions, one (1) intercountry networking session in Nigeria and Kenya; and one (1) Focus Group Discussion (FGD) as permitted, three (3) days of physical training (not all were able to make the physical-in-country training as a result of fund paucity and COVID-19 restrictions. Some participants outside Abuja joined remotely).

Throughout these rigorous selection and training sessions, the participants’ tolerance and commitment levels were encouraging. The zeal was also reflective in the passion with which the graduation products were developed.

❖ Mentoring

The project mentors were inspiring and motivational. Seven established and accomplished senior media practitioners were engaged as mentors on the project. After the mentors were engaged, they were made to participate in the project’s introductory session to understand the project and what it stands to achieve completely. Mentors were then paired with participants for guidance on their story production, and a monthly reporting template was developed and shared with mentors to track progress with each participant.

❖ Medical Advisors

The project engaged two medical advisors to work with the participants and provide medical guidance and advice related to the journalists’ stories. The medical advisers, upon engagement, participated in the training designed for journalists to understand project goals and objectives, the role and responsibilities of the advisor on the project.

❖ Legal Advisors

The project engaged two Barristers to provide legal guidance and advice to the journalists to ensure that their reports do not expose the reporter or implementing partners to any legal jeopardy.

Key Achievements

Over 30 journalists have been trained and supported to carry out fact-checking activities around COVID-19 in Nigeria and a similar number in Kenya. These journalists have produced and published two contents each using a different medium (mainstream and social media).

Adeolu Kilanko

Program Manager, ICIR
Described as “an illegal trial of an unregistered drug,” a “clear case of exploitation of the ignorant,” and a “violation of Nigerian and international law,” the 1996 trial of Trovan by a pharmaceutical company – Pfizer Inc. – deployed some Nigerian kids in the ancient city of Kano as guinea pigs.

The devastating result led to long years of agitations and legal battles against the American pharmaceutical giant. There were accusations and counter-accusations among the ‘dramatis persona’ but the victims were already gone forever.

Today, 25 years after the ugly experience, the hurting memory is yet to be erased from the consciousness of an average Nigerian, and this seems to have continued to haunt even genuine efforts towards addressing some health concerns.

In Sokoto, a North-western state like Kano, the fears are that the latest victim could be from the ongoing vaccination against the coronavirus disease (COVID-19) as some residents who spoke to this reporter have declined to take the highly recommended jabs against the rampaging virus.

Hauwa Mohammed, pregnant with her fourth child, was one of the women seated at the antenatal unit of Mabera neighbourhood community clinic.

At the mention of ‘coronavirus vaccine’ by this reporter, Mrs Mohammed sat up and began to voice her concerns, reiterating issues of trust and safety. Her voice was louder than that of the other women in the waiting room.

Speaking loquaciously in Hausa, her native language, she stares at this reporter suspiciously, probably thinking the reporter was there to administer the vaccine.

Mrs Mohammed said she “doesn’t trust anything coming from the west,” as she recounted what she described as the “inhuman killing of innocent children in Kano over meningitis treatment by Pfizer.”

She said; “Nobody in his right senses will trust that vaccine; they will always send bad medication to us because they believe we are plenty, so that they can wipe us out. They killed so many people in Kano that year.

“Yes, we agree the coronavirus exists, but I will never take anything coming from the whites as a solution. I will rather use traditional herbs.”

Similarly, in Gagi, a village in Sokoto south district, a large number of the women this reporter met were not willing to embrace the vaccine.
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Zulihat Abdullahi is the women leader in the community, who, though, expressed concern that the virus has infiltrated communities in Sokoto State, but insisted she would not take the jab.

“We believe that the virus exists and people who have been infected have been healed with traditional medicine. Those who died were buried too. But I can assure you that our traditional medicine, which has been made from roots, is very effective in healing those infected by the virus,” Mrs Abdullahi said.

She, however, cautioned that “if you don’t believe in this drug it will never work for you,” adding that “the drug is made from natural herbs and it’s very easy to make with little instruction.”

Speaking on the COVID-19 vaccine, the women leader said they were already overwhelmed by reports of many people who were said to have encountered problems after taking the vaccine.

Asked whether they attempted to confirm the authenticity of the reports, Mrs Abdullahi said the experience with meningitis in Kano State was enough evidence required to believe the rumour.

She said; “My sister from Damboa took me to a COVID-19 vaccine centre so that I would be vaccinated. I simply told her that I heard that a woman got vaccinated and she fainted.

“We learnt people were paying as much as N40,000 to be vaccinated but as for the centre that she took me to, it was free. I would rather use the money to set up a business than to pay to get a vaccine.”

She said she declined to take the jab despite her sister’s pleas.

Also speaking, Hauwa’u Umar, a young mother, noted that she was aware that the vaccine is useful but insisted she would not take it.

She said; “I believe that there is COVID-19 virus and I am among the people who were mobilised to enlighten people about it. But I don’t want the vaccine because I don’t know how my body would react to it. It may be useful but I don’t want it.”

She said the virus has heightened poverty among them, saying businesses were closed down and children were unable to go to school for a long time.

“A lot of people don’t want to be vaccinated because some are of the opinion that the vaccine prevents one from giving birth,” she added, and she also noted that; “Some say if you get vaccinated you would die but I don’t know how true it is but I don’t want to be vaccinated.”

Inno Ahmadu, like others, believes the virus exists but she has not been vaccinated. But her reason was quite different.

She agreed that she has heard a lot of misinformation about the vaccine but she said the misinformation was not the reason she was yet to be vaccinated.
“It is because of the fear I have for injections,” she said.

Mrs Ahmadu said she was unable to take part in the pilgrimage to Saudi Arabia in 2020 due to the virus, and that she quite understands the severity of its scourge.

She, however, said if the jabs had been converted to tablets, maybe she would have taken it.

*Like Women, Like Men*

Segun Ilori is a pharmacist working with a non-governmental organisation that manages procurement and supply chain in Sokoto State. But his medical expertise did not stop him from nursing fear about the coronavirus vaccine.

However, after much contemplation and hesitation, he took his first jab a few days after Nigeria rolled out its vaccination programme.

But as soon as he did this, he became a suspect among his colleagues. He was monitored even for attitudinal change, he told this reporter.

He said; “My colleagues would on a daily basis peep into my office mischievously to check if I was doing well. Some even teased me with different misinformation they have heard about the vaccine.

“They said they had expected me to start speaking in tongues, stagger in my walks or that I could have even turned to robots as they have seen in different skits on social media. But they were all disappointed.”

Weeks after noticing Mr Ilori’s stability after taking the vaccine, two of his colleagues went for their jabs. But according to him, others have insisted they would not take the jab “for fear of the unknown.”

*Vaccination In Nigeria*

The vaccines arrived in Nigeria in March, one year after the country’s index case was recorded in Lagos, the nation’s commercial hub.

The country received 3.94 million doses of the Oxford-AstraZeneca vaccine through the COVAX facility in early March, and it commenced vaccinating willing citizens.

“In keeping with our promise, the PTF is prioritising the frontline healthcare workers in the first batch of vaccines received,” the chairman of the Presidential Task Force on COVID-19, Boss Mustapha, said, at the National flag-off of COVID-19 vaccination at the National hospital, Abuja.

Cyprian Ngong, a medical doctor at the hospital, became the first person to receive a jab in Nigeria.

So far, a total of 1,964,095 eligible Nigerians have been vaccinated with the first dose.
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According to data from the National Primary Health Care Development Agency (NPHCDA), the agency at the centre of the vaccine rollout plan for Nigeria, as of June 28, 2021, a total of 3,397,472 vaccine doses have been administered.

This is considerably low, going by the aim of the Nigerian government to vaccinate approximately 109 million people against the COVID-19 virus over a period of two years.

A good number of Nigerians have been deliberate in avoiding the vaccine. This may be attributed to rumours and conspiracy theories that have trailed the vaccine even before it got to Nigeria.

A lot of skits have been done suggesting how different people would react after taking the vaccine, from involuntary and unconscious bone movement, staggering walking movements, to speaking in tongues.

After reports of death and blood clots in people that have received the AstraZeneca vaccine in Europe, it was temporarily suspended. News of the vaccine causing death had been shared on social media.

Even after the World Health Organization had recommended that the vaccinations should continue as the benefits outweigh its risks, some were determined never to take the vaccine.

**Poll**

According to a Twitter poll carried out for this report to determine why people have not gone to take the vaccine, 32 per cent of the 964 people that voted under 24 hours said they do not trust the vaccine.

28 per cent said there are a lot of things yet to be known about the vaccine, 23 per cent fear the side effects while only 17 per cent are willing to get vaccinated but have not had time to go.
EFFORTS by government officials in Nigeria to widen the COVID-19 vaccine coverage is meeting formidable obstacles as a vast population of young people are resisting official entreaties.

The growing cases of vaccine hesitancy among young people in Nigeria have been traced to aggravating spread of disinformation concerning the COVID-19 vaccine. This is largely occasioned by trending disinformation on social media platforms often sponsored by influencers who leverage their popularity to spread misleading information.

Disinformation stories are often in videos and shared majorly on Twitter, Facebook, WhatsApp and other social media platforms.

Notably was the video posted by former Senator Dino Melaye on Twitter, in which he asked, “How is it possible on earth that in one year, we find vaccine for COVID-19? An intelligent gathering has reviewed that some of those who took that vaccine died within three days.”

Treading on the same misleading claims is Kogi State Governor Yahaya Bello who, in a viral video said, “They want to use the COVID-19 vaccines to introduce the disease that will kill you and us. God forbids!”

Members of the Presidential Task Force on COVID-19 in Nigeria recently identified the upsurge of disinformation on social media platforms as a major challenge.

In a telephone interview with Femi Akinpeloye of the infectious diseases’ unit of Lagos State University Teaching Hospital, Ikeja, the medical expert disclosed that peddling of misleading information about COVID-19 posed great danger to every member of the public.

According to him, the striking point remained that vaccination would not work in isolation. It would rather work better when a greater proportion of the population got vaccinated. The safety of one is the safety for all, he said.

He noted that though several young people did not believe in the existence of COVID-19, they had been largely spared even in the height of the surge of the disease, thereby strengthening that feeling of false safety among them.

According to him, producing a vaccine against diseases with no cure had never really been a problem. Once the organism causing the problem could be identified, then vaccine would be produced, he explained, noting that this was how antibiotics were
produced. For him, it involved getting the micro-organism causing the problem to produce vaccine that man could use.

He further disclosed that it took approximately six months to one year to safely provide vaccine for human use. From the moment COVID-19 became a pandemic, he said, lot of laboratories started working on it.

Research started going on and because it was ravaging the world, people began to share information. For this reason, developing the vaccine was easier. Data were available for everybody to access, and pharmaceutical companies around the world that were into vaccine production stepped up to savage the situation, he explained.

He noted that the majority of the vaccines assumed over 75 per cent provision of antibodies against the disease. “What vaccine does is that it ensures the body is able to produce immunity against that particular virus. So much vaccine is not protecting you completely, there is still a margin to contact the virus. But even if you contact the virus, it is not expected to hit you like somebody who has not taken the vaccine. The person who did not get the vaccine is likely to fall sick that the person who got the vaccine already.”

With regard to availability of supporting data, he said data could not be gathered in a day, week, when it came to situations like this. Data gathering on vaccination, according to him, was not something that could be done within a very short time.

“You have to give it time so that the data will be reliable,” he said.

There are parameters for accessing the effectiveness of any vaccine, including reduction in the number of positive reported cases and availability of the vaccine.

Asked about the public acceptance of the vaccine, he said the reason COVID-19 vaccine was not ‘selling much’ in terms of acceptability among the youth was because the death toll at the initial stage was predominately among older people within age range of 45 and above. Many of them had one underlying problem or the other, he said, noting that the new strains of the virus were now killing younger people.

On public perception on COVID-19 vaccine uptake, he said, “While this varies across board, I believe it is because the uptake of the vaccine in our environment is more of you and the knowledge that you have. Generally, on the public, I think, is about 45 per cent. Many people do not have the information on where there can get the vaccine.”

He said though the vaccine uptake was voluntary, the government could still find a way to bridge the gap by not forcing it on the people.

“It is just that they can make it a requirement for many things. The government can make it as a requirement in both public and private universities for students to take the vaccine.”

The medical expert said “Let leaders in authority build confidence of the people by showing examples through sharing of pictures, videos when receiving COVID-19
vaccine on the social media platforms. They can further amplify it through documentary of messages on reassuring the people on the importance and protective effects of the vaccine. This will give people more confidence to take the vaccine.”
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FACT CHECK: DEBUNKING COVID-19 MISINFORMATION FROM THE PULPIT

BY EMIENE ODAUDU-ERAMEH

Nigeria like many countries around the world is currently in COVID-19 vaccine season. And like every other country, citizens are struggling to adjust to the new normal, occasioned by the pandemic such as social distancing and wearing of face masks while in public.

They also now have to make up their minds if they want to take the vaccine or not.

This is a tough choice for the average Nigerian who had scoffed at the various public health measures the government introduced to help mitigate the pandemic in 2020. For example, many complained when the first of several nationwide lockdowns, was imposed in March 30, 2020 arguing that they depend on their daily jobs for sustenance. This was despite the palliative support promised by the Federal government which was many complained was either grossly inadequate or in many cases, non-existent.

Several Clerics, especially from the Pentecostal community, also protested against government COVID-19 measures, especially the continued closure of churches and other places of worship even as the general lockdown was being relaxed.

Once such cleric is Pastor Chris Oyakhilome, the President and Founder of Christ Embassy, a leading Pentecostal church in Nigeria who has persistently and from the outset used misinformation to advance his anti-COVID conspiracies.

 Pastor Chris as he is popularly called by his teeming admirers and church members, has blatantly denied the existence of the COVID-19 virus describing it as the biggest deception ever.

For example, following the government March 30 nationwide lockdown as a result of rising COVID-19 infection rates, Pastor Chris had alleged then in a sermon that the lockdown was imposed in order to keep citizens indoors while 5G cables were laid. He stressed that citizens needed to be kept indoors to prevent protests against the installation of the 5G network.

In the same sermon, he also claimed that 5G technology and not COVID-19 was responsible for the deaths recorded in Wuhan China, since China is one of the countries in the lead in building and deploying the 5G technology.

When the lockdown was eased and government began to campaign for the wearing of facemasks in public as a means of limiting the spread of the virus, Pastor Chris spoke against the wearing of facemasks. He credited the US Centre for Disease Control for his position claiming the organization said masks are not only ineffective against the spread of the virus but also dangerous to health.
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He further claimed that the COVID vaccine is one way of compelling people to use 5G technology as part of a larger plan to install a new world order. Proponents of the new world order according to the clergy man hope to achieve a unitary system of government in the world. The video has since been taken down from the Church’s website. But a tweeter user (@Iam_ChiomaEzeh) had posted short clips of the message on her twitter page.

HOW TRUE ARE HIS CLAIMS?

Claim 1: Was The Lockdown Declared To Keep Citizens At Home While 5G Was Installed?

First of all, the minister of Communications and Digital Economy Isa Ali Pantami had in statement at the time said no approval had been given for the deployment of 5G technology in the country.

The statement further said the trial for the 5G network had run for a period of three months starting 25 November 2019, to critically review the implications of deploying 5G in Nigeria, and that this reporting process was ongoing. The statement also clarified that the trial was done with 4G technology.

The Nigerian Communications in a statement by its Public Affairs Director at the time, Dr Henry Nkemadu debunked the claims and called on Nigerians to disregard it.

So, if 5G network has not been deployed in Nigeria, it completely debunks the claim that the lockdown was declared to install the technology and to avoid the protests that would have met such effort.

The massive backlash that greeted the above conspiracy forced Pastor Chris to slightly dial back the claim saying instead that he was primarily concerned with the health risks that may likely be associated with the emergent 5G network. Unfortunately, this clip purporting to clarify his initial claim was not as widely circulated on social media as the first in which the original claim was made.

VERDICT: FALSE

Claim 2: Can 5g Network Be Linked To COVID-19?

The World Health Organization had in a Question and Answer on its website noted that no adverse effect had been recorded from the deployment of 5G technology. According to the Q and A, “provided that the overall exposure remains below international guidelines, no consequences for public health are anticipated.”

Further, COVID-19 has also spread to countries which have not deployed 5G technology such as India, Colombia and Lesotho according to Wikipedia.

VERDICT: FALSE

Claim 3: Are Face Masks Unsafe For Use In Public?
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The US Centre for Disease Control had in an explainer to underscore the effectiveness of wearing masks said masks are a simple barrier to help prevent respiratory droplets from reaching others. Studies show that masks reduce the spray of droplets when worn over the nose and mouth.

The explainer goes further to insist that masks should be worn even when one does not feel sick. “Several studies have found that people with COVID-19 who never develop symptoms (asymptomatic) and those who are not yet showing symptoms (pre-symptomatic) can still spread the virus to other people. Wearing a mask helps protect those around you, in case you are infected but not showing symptoms.” The explainer noted.

According to an expert on immunization and Health Financing Dr Shola Dele-Olowu “masks are more important when people are in enclosed spaces, but wearing them in public is not unsafe.”

VERDICT: MISLEADING

Claim 4: Are Vaccines Part Of A Larger Plan To Install A New World Order?

Dr Dele-Olowu who is a deputy director at Clinton Health Access Initiative in response to the claim asked ‘What is a new world order?’ She noted further that “when someone says new world order, we need to even know what it is, is it not madness?” she asked.

So, what is the “New World Order”?

The phrase has a Wikipedia page which defines it as “a conspiracy theory which hypothesizes a secretly emerging totalitarian world government.”

The common theme in conspiracy theories about a New World Order according to the page, is “that a secretive power elite with a globalist agenda is conspiring to eventually rule the world through an authoritarian one world government—which will replace sovereign nation-states—and an all-encompassing propaganda whose ideology hails the establishment of the New World Order as the culmination of history’s progress”.

The page explains further that “many influential historical and contemporary figures have therefore been alleged to be part of a cabal that operates through many front organizations to orchestrate significant political and financial events, ranging from causing systemic crises to pushing through controversial policies, at both national and international levels, as steps in an ongoing plot to achieve world domination.” This theory is also linked to fundamentalist Christianity concerned with the end-time emergence of the Antichrist and this is perhaps where Pastor Chris hinges his theory on.

But what is the COVID-19 vaccine and is this possible?
Information on the World Health Organisation website confirmed the existence of several safe and effective vaccines that prevent people from getting seriously ill or dying from COVID-19, adding that this is one part of managing COVID-19.

As of June 3, 2021, WHO, the pre-eminent global health body and agency of the United Nations said it has independently evaluated the following Vovid 19 vaccines both for safety and efficacy- AstraZeneca/Oxford vaccine, Johnson and Johnson, Moderna, Pfizer/BionTech, Sinopharm and Sinovac.

An Explainer on the WHO website while stressing the safety of COVID-19 vaccines also debunked a common misinformation that the vaccines alter the DNAs of those who take them. As the WHO website explains, COVID vaccines like all scientifically approved vaccines “… only deliver information. They teach your body how to make a protein that triggers an immune response,“.

The Explainer further said “the COVID-19 vaccines produce protection against the disease, as a result of developing an immune response to the SARS-Cov-2 virus. Developing immunity through vaccination means there is a reduced risk of developing the illness and its consequences. This immunity helps you fight the virus if exposed. Getting vaccinated may also protect people around you, because if you are protected from getting infected and from disease, you are less likely to infect someone else. This is particularly important to protect people at increased risk for severe illness from COVID-19, such as healthcare providers, older or elderly adults, and people with other medical conditions.”

VERDICT: MISLEADING

How Does Pastor Chris’ Stand Influence His Members?

When the link of Pastor Chris’s sermon was checked on Hoaxy a fact checking tool which is used to visualize the spread of information on twitter it did not return any results.

But an advanced search of a tweet by @Iam_ChiomaEzeh in which he propounded the theory of the new world order showed that the thread had 1,558 Retweets, 1,174 Quote Tweets and 2,353 Likes. The twitter user has 11.4K Followers.

While many of the comments on the thread dismissed the claims outright, one Jane tweeting at @9Oluco said “Regardless of anything, Pastor Chris is a man led by the spirit I’d take this seriously.”

Another comment from Olamide @itsolamide__ said “Sis stop answering all these people that wants to argue and thanks for posting this, I didn’t connect yesterday.”

The teachings of Pastor Chris at the peak of the pandemic in the country inspired a hashtag #IStandWithPastorChris with people declaring support for his teaching.

While there is some opposition online to the anti-COVID-19 conspiracy theories of the cleric, it is a different matter entirely offline as virtually all the members of the Church
who were interviewed, were adamant that they would not take the vaccine; a position consistent with the church’s teaching on the issue.

Jane Anenih, a member of Christ Embassy, in an interview said nothing would make her take the vaccine. When pressed further to know why she said “it is personal, I don’t think I like the idea of the vaccine and I will not take it.”

Another member Christy Wada, said her sister who attends Christ Embassy called and instructed all her siblings not to have anything to do with the vaccine. “Sister Favour called I and my other siblings and asked us not have anything to do with the vaccine, but she did not say why and so I will not take it”.

**Implications of Misinformation by Clerics**

From the huge followership these religious leaders have it is evident that whatever position they take has far reaching consequences on those who look up to them for guidance.

There is usually a cult like following in the churches they lead. For instance, members of Pastor Chris’s church have been seen to copy his hairstyle which is a slicked down permed style. Another Pentecostal and founder of Deeper Life Ministry Pastor William Kumuyi in the early days of his church in the country, forbade his members from owning a television set calling it the devil’s box. As a result, many of his members did not own televisions sets. Years later many still do not.

As with other countries, the COVID-19 pandemic led to massive disruption of life in Nigeria, a fact established by a cross sectional study in the BMJ Journal titled Public perception of COVID-19 management and response in Nigeria in which a vast majority of Nigerians rated the federal government low in its handling of the pandemic.

It is in part this lack of trust for government and its policies which was amply demonstrated by the woeful government COVID-19 palliative program along with the total absence of social welfare policies that leave struggling Nigerians under the undue influence of their spiritual leaders.

Nigeria’s failing healthcare system does not help matters in any way. With a 1: 2753 doctor patient ratio according to statistics from the National Health Workforce Registry which was handed over to the federal government in 2020, many people often resort to churches and traditional medicine centers for health problems that should be easily diagnosed and treated but is not. The WHO recommended ration is 1: 600 doctor to patient ratio.

For instance, it is not uncommon to have accident victims with fractures opt to be treated by traditional bone setters as they say they are more effective and cheaper.

And so, when a Pastor who they turn to for solutions to their health problems take a stand on a matter, they are not likely to disagree with him.
Pastor Chris has approximately 13,000,000 followers worldwide according to Wikipedia. He personally has 2.1 million followers on Facebook and 1.2 million followers on twitter. The church also has Kingschat a messaging app which can be downloaded from the Google Play Store which has over 4 million users according to information on its Facebook page.

Christy who was interviewed earlier said she has used the app and while it is a social networking app, information about the church is often shared on the app too.

A look at reviews about the app shows that while some people complain about the app, many others are quite happy with it. Joseph Omega Yambasu who gave it a five-star rating said “I liked this app for one reason because it’s where I get connected to the man of God Pastor Chris and receives life impacting messages.”

Another user De Flames Comedy said “This app is really, really amazing. A lot of features to enable you spray God’s word globally. Big thanks to Pastor Chris for putting this up for God’s children.”

Those who complained about the app said it took to long to load. But there was always someone from admin in the comments assuring that such a problem would be addressed. For instance, one Micheal Idam said “the app is great but it needs a lot of improvement. For one the UI design for the group could be smarter. Looks too dull.” He complained.

For a country where many people express doubts about the existence of the virus, and/or believe that it is a white man’s sickness, the stand of Pastor Chris and his church then helps in strengthening resistance to the vaccine and other public health initiatives aimed at combating the pandemic.

This is a situation Nigeria can ill afford considering the emerging and more lethal variants of the virus which can still affect Africa much more severely than the original one. Furthermore, Nigeria remained a polio endemic country for a long time because of resistance to the vaccine in the northern part of the country. The lessons of the past should hopefully help us deal with the present threat posed by COVID-19.
Nigerian Preachers Chris Okotie, David Oyedepo, Wrong on Negative Side Effects of COVID-19 Vaccine

By Favor Bukola Ayeni

A musician-turned-preacher, Reverend Chris Okotie, misled Nigerians in July last on the side effects of COVID-19 vaccine, saying those who received it would acquire the blood-sucking attributes of a vampire.

In a video interview published on 12th, July 2020 on YouTube which has been viewed over three hundred and seventy-five thousand times, Okotie described COVID-19 vaccine as satanic. Okotie, a former presidential aspirant in Nigeria has made several false claims and comments since the beginning of the COVID-19 pandemic in 2020.

He said “what Bill Gates is doing under the auspices of the United Nations is to make sure that you receive the Food, the GMOs (Genetically Modified Organisms). When you eat that Genetically Modified Food that you eat and you take the vaccine, you have entered into communion with Satan, Lucifer. And that communion involves blood.

Now, since the blood of Jesus is not what is talking about, or what he has to offer, he will require you to seek blood somewhere else. And the only place where you can find blood is in another human being. So one of the things that the vaccine will make you do is to become a vampire who needs to drink blood for sustenance.

But we, as Christians, we don't drink the blood, we drink wine; which is an emblem of the blood and that sustains us spiritually. But his communion will require you drinking blood consistently so that you are a vampire for your sustenance."

In August 2020 via WhatsApp broadcast, he instructed his members not to wear face mask, arguing thus: “when a man is standing before God in church wearing a shield or mask, he is denying the finished work of the cross.” According to him, wearing a face mask is ‘denying the finished work of Christ.’ This WhatsApp broadcast was a major news story in several newspapers. His instruction came before the COVID-19 vaccine was available in Nigeria.

No, COVID-19 Vaccines Do Not Turn People into A Blood-Sucking Vampire

Dr Joe Abah, a former Director-General of the Bureau of Public Service Reforms on his Twitter handle @DrJoeAbah declared on June 4, 2021, that he had taken his second AstraZeneca COVID vaccine but didn’t turn into a monkey, to show to his followers that peddlers of misinformation about the vaccine were wrong.
Combating COVID-19 Misinformation in Nigeria

Dr. Joe Abah
@DrJoeAbah

I took my second AstraZeneca Covid vaccine yesterday. No adverse reactions at all. I haven’t turned into a monkey. I ran my Ezemmuo ‘magnet’ over my upper arm, no microchip. Please go and get vaccinated if you haven’t done so already. I miss handshakes and hugs.
Cc. @NphcndaNG

6:16 PM · Jun 4, 2021 · Twitter for iPhone

7 Retweets 1 Quote Tweet 59 Likes

Tweet

HENRY @4eyedmonk Apr 3

So many people have taken the COVID-19 vaccine - over 150 million in the world, and nearly 1 million in Nigeria. Vaccine has not connected them to 5G. It has not put a chip in them. I have taken the vaccine, my parents have too. We have not turned to zombies #YesToCOVID19Vaccine

8 12 30
Combating COVID-19 Misinformation in Nigeria

More Preachers Peddle Similar Misleading ‘Spiritual’ Falsehood About COVID-19 Vaccine

Bishop David Oyedepo, who presides over the Living Faith Church Worldwide, while delivering a sermon during the church’s 40th-anniversary service, joined in propagating conspiracy theories around COVID-19 pandemic in Nigeria, said “let me warn you against this deadly thing (COVID-19 vaccine) circulated around the country because it has not been duly tested. An elder of this church, who works with the World Health Organisation, confirmed this, thanking me for always speaking the truth about the authenticity of the COVID-19 vaccine. Nobody has the right to enforce vaccination on you, and anybody cannot terminate your employment because you refuse to take the vaccine, my God will show up (for you).

They wanted Africa dead. I heard them say it. When we didn’t die as they proposed, they brought out this vaccination scheme. You need to hear their proclamation that Africa will lack spaces to bury corpses. But, today, the reverse is the case. Africa has the least casualty among all the other continents of the world.”

Before the vaccine was made available, the Bishop had criticised the government for closing down churches in order to contain the deadly virus, saying that “the voice of darkness is influencing people at various levels, targeting the church because the growth and expansion of the church is the greatest headache of the devil. But the gates of hell shall not prevail against it. The devil and all his agents shall surely pay for this. I don’t know what hospital that records the kind of healing that the church of God records. And now hospitals, where people die every day, are open, but the church is closed because the oppression of the devil has no medical cure.”

Also, the senior pastor of LoveWorld Incorporated, with an estimated 13 million followers globally (also known as Christ Embassy), in Lagos, Nigeria, Chris Oyakhilome, provably false claims since the beginning of the pandemic in the country. In a sermon streamed on YouTube with over 12,000 views, he claimed that the introduction of 5G technology was responsible for COVID-19. He also alleged that the COVID-19 vaccine will be used as a vehicle to introduce a “new world order” led by the anti-Christ. This video, which was streamed on April 8th, 2020 has been deleted by YouTube.

The 5G network is a fifth-generation wireless communications technology supporting cellular data networks.

Pastor Chris Oyakhilome Sanctioned By British Regulator over False COVID-19 Claim

The Office of Communications (OFCOM), the British broadcast regulator, sanctioned and prevented LoveWorld Television Network, a television channel founded by Oyakhilome in May 2020 from airing for the crime of spreading “potentially harmful statements” about the COVID-19 pandemic. The sanction was linked to the 5G
network conspiracy which was broadcasted by the LoveWorld’s Television Ministry on Satellite TV around the world.

The false claim that vaccines are linked to the introduction of 5G networks is a global conspiracy theory that is not based on any factual evidence. Indeed many of the countries which have been worst hit have no 5G network, and the idea that there is a link between phone masts and COVID-19 has been widely debunked, including Dr Simon Clarke, associate professor in cellular microbiology at the University of Reading assert the 5G network conspiracy is "complete rubbish." This was reported by BBC.

Religious Leaders and Pandemics: Two Parallel Lines

Religion and pandemics always go a different route, previous pandemics have proven that to be true.

An article titled "‘17, ‘18, ‘19: religion and science in three pandemics, 1817, 1918, and 2019" written by Howard Philips, published on 6th November 2020 by Cambridge University Press gave an in-depth analysis of the history of pandemics from a religious perspective. This article addresses the first and second cholera pandemics of 1817 to the 1830s, the Spanish flu pandemic of 1918–19, and COVID-19 in relation to religious responses.

The Cholera pandemic of 1817 was also misinterpreted by preachers of that era. In the article, Philip said “Both the Russian Orthodox Church and the Roman Catholic Church interpreted the cholera pandemic as an instrument of divine punishment for human misconduct. Prayers and sentiments of contrition and penance were urgently required to propitiate an offended God, proclaimed a Catholic priest in England, while French bishops spoke of it as a visitation from a God ‘justly irritated by our sins’.”

One hundred and one years later, there was the great pandemic of the Spanish Flu of 1918-1919, “most religions and a number of Africans still look up to the possibilities of offending their God” or deities.

The current COVID-19 pandemic has its fair share of religious interpretations and conspiracy theories as we have seen in the preceding paragraphs.

Influence of Nigerian Religious Leaders on Followers

Religious leaders hold a powerful influence on people as they shape their opinion and perspective of life. Nigerians are heavily religious. In a survey conducted by BBC in 2004, Nigeria was the most religious country in the world. Nigeria scored 100% for people that are “willing to die for their God or their beliefs.” Pew Research Centre survey titled “The Future of World Religions: Population Growth Projections, 2010-2050” show that there are 46.9% Christians, 51.1% Muslims and 2% are for other kinds of religion in Nigeria. These two surveys show that Nigerians are heavily religious and these further prove that religious leaders have more influence on the people compared to political and traditional leaders.
Many Nigerians would listen and believe the words of their religious leaders than those of political leaders due to the lack of trust between the people and political leaders. It has been known for generations that both religious and traditional leaders are highly respected and are held in high regards by their followers or communities because the people hold religion in high regards and also the credibility and connection of the religious leaders to the people at the grassroots levels in different communities.

Another reason why religious leaders hold a high amount of power and influence is that as of 2020, Nigeria had 99.05 million internet users. The internet penetration amounted to 46.6% of the population in 2020. Nigeria’s population is approximately 200 million, which means approximately 100 million Nigerians do not have access to the internet yet to source or verify information for themselves. This balance includes all age range. This further proves that religious leaders remain crucial in the transmission of information. The good news is that Nigeria’s internet penetration is projected to grow by 63% in 2025, people could source or verify information for themselves.

It is obvious that NGO’s and government agencies recognise the power and influence religious leaders have on people and that explains one of the reasons there are provisions to carry them along in influencing people’s behaviour and acceptance towards the vaccine.

**UN, WHO, Engage Religious Leaders on COVID-19**

The United Nations (UN) and its relevant agencies in their effort to accelerate the containment of the COVID-19 pandemic introduced a Resource Repository Template for Faith-based organization and Faith Leaders titled: Faith and COVID-19; Resource Repository.

The World Health Organisation (WHO) also did something similar. On the 7th of April, 2020 equally launched the Global Faith Strategy for COVID-19 Pandemic called: Practical Considerations and Recommendation for Religious Leaders and Faith-based communities in the context of COVID-19. The aim of providing these practical guidelines is to carry along religious leaders in the fight against the pandemic.

The UN, WHO and other agencies had made provisions to partner with religious leaders, yet some very influential religious leaders were not making the fight against COVID-19 easy for the agencies, government and most importantly the people. Instead, they go about spreading disinformation and conspiracy theories.

‘Preachers Should Desist From Spreading False Information about COVID-19 Vaccine’

Professor Oyewale Tomori, a former president Nigeria Academy of Sciences, a renowned virologist and Christian adherent, said claims by preachers that COVID-19 could change people into beasts are unfounded in The Bible. He said, “They should
desist from spreading such rumours and lies. They should remember what the Bible said about lies and liars in John 8 verse 44 (‘You’re from your father, the Devil, and all you want to do is please him. He was a killer from the very start. He couldn’t stand the truth because there wasn’t a shred of truth in him. When the Liar speaks, he makes it up out of his lying nature and fills the world with lies.’ Message Bible) and where liars shall end up is in Revelation 21 verse 8 (“But as for the cowards and unbelieving and abominable [who are devoid of character and personal integrity and practice or tolerate immorality], and murderers, and sorcerers [with intoxicating drugs], and idolaters and occultists [who practice and teach false religions], and all the liars [who knowingly deceive and twist truth], their part will be in the lake that blazes with fire and brimstone, which is the second death.” Amplified Bible).

He called on Nigerian Christians to check everything they hear before believing them, quoting another scripture, 1st John 4 verse 1: “Do not believe every spirit, but try the spirit if it is of God, because there are many false prophets.”

Preachers Wrong, Millions of Nigerians Vaccinated

No Nigerian who has received COVID-19 vaccine has turned into a vampire, contrary to the unfounded spiritual alarm raised by Pastor Chris Okotie. Not heeding the false warnings, Nigerians have trooped to vaccination centres for COVID-19 vaccines.

As of June 27, 2021 "2,241,662 eligible Nigerians have been vaccinated with the first dose while 1,155,810 of Nigerians vaccinated with the first dose have collected their second dose."- National Primary Health Care Development Agency (NPHCDA). Those that took the second dose represents 57.4% of the total that took the first dose, which over half of those that have taken the first dose.

Nigeria is awaiting a second shipment of almost 4 million doses of COVID-19 vaccines by August and plans to continue giving out first doses, which had been paused to reserve its supply for second doses.
A viral video shared on multiple social media platforms, including WhatsApp groups in Nigeria, claimed that the consumption of raw onions and garlic was capable of treating coronavirus (COVID-19).

Based on the unproven claim, the virus would die once the vegetables – onions and garlic – were consumed as smoothies.

The other interesting part of the claim was the advice to the Nigerian public to slice the onions or garlic and place them at the corners of individuals’ homes.

Interestingly, these were some of the several unproven claims shared a few months after the outbreak of COVID-19 out of desperation for a cure, yet they did not have any scientific backing or validation. Most Nigerians at home and abroad were
Bombarded with similar claims. Thus, sharing the claims especially on WhatsApp became new normal.

**WhatsApp Claim That Onion Prevents COVID-19 When Placed In Rooms**

Prominent people such as the traditional ruler Ooni of Ife, Adeyeye Enitan Ogunwusi, further made public statements on herbal alternatives that could supposedly fortify the people against COVID-19.

Apart from the first-class traditional ruler, a former Chairman of Nigeria’s Independent Electoral Commission (INEC) Maurice Iwu, a professor, also announced his herbal discovery against the disease. Besides, one other Ben Amodu, a doctor, claimed his herbs could cure throat cancer. He claimed that his herbal medicine could prevent the coronavirus disease. He is among a list of several others. Some of the claims have been removed by social media firms.

The Federal Government of Nigeria, a few months the outbreak of the virus, considered meeting practitioners of traditional (herbal) medicines, since there was no cure at that period. This was because different local concoctions against COVID-19 were being championed by various individuals and groups.

Director-General of the National Agency for Food, Drugs and Administration (NAFDAC) Mojisola Adeyeye, a professor, finally told the public of plans to consider some of the herbs for studies. That was in May, 2020. By September, the Nigerian government had inaugurated a Ministerial Committee on COVID-19 Herbal Remedies to provide a possible home-grown cure.

Meanwhile, since the disease outbreak in Wuhan, China, almost four million persons have died globally due to the pandemic. As of June 24, 2021, the World Health Organisation (WHO) said there were close to 180 million confirmed cases. Yet, the number has continued to rise amidst vaccine hesitancy.

This reporter reached out to NAFDAC to verify if any home-grown solution had eventually been developed and certified as a possible alternative, but no response was provided by the government agency.

The Deputy Director for Media and Public Relations at the National Institute for Pharmaceutical Research and Development (NIPRD) Ekwui Ubah could also not provide a response. Director-General of the institute Obi Adigwe asked this reporter to send a text message but as of the time of filing this report, no response was provided after repeated calls.

**Claim Verification through OSINT**

The ICIR was able to track how the WhatsApp message went viral on Twitter. Using Tweetdeck, which helps in real-time Twitter tracking, several persons who got a similar message on Twitter attributed the source to WhatsApp.
Combating COVID-19 Misinformation in Nigeria

“Please all fathers and mothers, go get your garlic and onions,” the original claim read in part.

“It is good and it kills the virus. It is good for protection,” the claim source said in a blend of Yoruba, a local language spoken typically by the Yoruba ethnic group, mostly resident in South-West Nigeria.

“Use a knife to cut it and put it in your room. If you have 10 rooms, put them in your 10 rooms. Put it in your living rooms, toilets, kitchen at the corners my brethren.

“Go and get your onions as many as possible. Get it and use it raw any day, anytime and any hour. Blend and use the water for protection,” the claimant stressed as she dramatically appealed to the public with strong self-conviction.”

False claim shared on Twitter says Onion could prevent COVID-19.

By March 23, 2020, the claim had found its way to Twitter users in the United Kingdom from Nigeria. Temmyturner @t3mmyturn3rr shared the information, saying her mother put an onion in the corner of every room in the house. She attributed her mother’s action to WhatsApp, emphasising that platform advised the mother to do so.

“This is the peak of the WhatsApp mother’s cult…” The Twitter user tweeted pictures of the sliced onions to validate her statement. The tweet garnered over 227,000 reactions with several other comments such as “WhatsApp must be stopped.” This came from a verified Twitter user @Cesar Vargas.

MissEllss @elishanicoie86 added to the thread that onion was often used during plagues to prevent disease spread. Yaw Sedi @Dat_Hoodguy also shared his experience of how he heard two women say COVID-19 could be “sucked out of the atmosphere when airborne by placing onions in each room of the house.”

Using Hoaxy, an Open Source Investigation Tool (OSINT), this reporter was able to analyse the flow of misinformation on Twitter regarding the use of garlic and onions for COVID-19 cure.
Based on the findings, the tweet originated from a Twitter user identified as Kim @NanaLuvsShoes. The handle joined the social media platform in January 2010 and has grown followers’ base to about 25,000 while following almost 24,000 persons.

From the tweets and retweets, the user seemed to be a supporter of former President of the United States Donald Trump. Trump is a Republican, and the former president was among those who shared false information on the pandemic.

American CNBC, in October 2020, reported how Trump initially described COVID-19 spread in the US as fake news that was hyped by media conspiracy.

A study by new Cornell University also named Trump as the biggest source of COVID-19 misinformation.

**How WhatsApp Is Pushing Misinformation**

Since the virus broke out in Wuhan China, in December 2019, social media, especially WhatsApp, has remained a major conveyance of misinformation. With a button, users of the platform could easily share unverified information considered important. While some of the information is deliberately fabricated for financial gain (disinformation) such as phishing, scams, others are shared ignorantly by users of the social media platform (misinformation).

For instance, at the peak of the disease spread in Nigeria, special messages were sent via the platform to lure the public. Few of those included claims that telecommunication networks were sharing free data as palliatives to support their subscribers.
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In related cases, social media users were enticed by supposed grants from prominent Nigerian businessmen and the Federal Government. Still, most of the viral claims were found to be false.

**WHO’S Position on the Consumption of Garlic to Prevent COVID-19**

Among the WHO’s myth busters, the global health organisation disproved the claim. While garlic was described “as healthy food that contains anti-microbial properties,” there is no evidence from the current outbreak that garlic has protected people from the new coronavirus.

Director of Department of Global Infectious Hazard Preparedness and a doctor at the WHO Sylvie Briand, in a video interview with Vismita Gypta-Smith of the WHO Communications Department, further dispelled the garlic claim among other unproven assertions on the pandemic.

She particularly warned against excess intake of garlic. “Some studies are studying it (consumption of garlic as COVID-19 cure) but again, we need to really cross-check the different studies before making any recommendation about garlic.”

**Medical Experts’ Opinion**

A Public Health Expert Nonso Umeh recognised the efficacy of the vegetables in immune-boosting against ailment such as flu but said they lacked scientific evidence as COVID-19 cure.

Umeh, who works with a partner organisation with Nigeria’s Federal Ministry of Health – Africa Resource Centre for Excellence in Supply Chain Management - affirmed the vaccines were developed to protect against a specific disease, stressing that conspiracy theories against vaccine dated back to ages.

“It does not cure COVID-19 but only boosts the immune system,” said Umeh. “If people believe that, it means every other similar vegetable such as ginger and ‘ugu’ can cure the disease.”

He expressed hope in change of public attitude once the public began to see benefits of the vaccine. He cited the Oral Polio Vaccine and Yellow Fever Vaccine as notable examples of shots initially rejected but later accepted.

An Assistant Research Professor at Arizona State University’s Biodesign Centre for Immunotherapy, Vaccines and Virotherapy, Jeffrey Langland believed that herbs that appeared to have worked against other infections must undergo testing if they could fight COVID-19. “This one is a little bit more of a dangerous virus,” he told Healthline, a website managed by a group of medical professionals in the United States.

But Professor of Virology Bola Oyefolu, in his opinion, said there were several herbs with potential to cure different ailments, apart from the use of vaccines. He said once people used certain herbs and it worked for them, it should be subjected to further scientific studies.
Though he said it would be too early to make an authoritative conclusion on potency of the fruit plant, he described garlic and onion as anti-microbial.

“I’m a virologist, and you know virology is under microbiology. So, the issue is there are several things you could use against viruses which we call ‘antiviral.’ There are lots of herbs and other things aside from vaccine.

“Long before now, our local people used different medications, combinations of different herbs to cure any kind of disease. Some of them, we may not have tried in the laboratory.”

Besides, he cited a plant known scientifically as Adenopus breviflorus (Christmas Melon), which he realised could be capable of preventing measles among infants. The plant is known as ‘Ogbenwa’ in Igbo, ‘Tagiri’ in Yoruba and ‘Tagiri Shuka’ in Hausa. He decided to share his personal experience to say local herbs were potential cures for certain ailments.

Growing up as a kid, he recalled that his aged father often picked the fruit plants and placed them at corners of the room to prevent measles infection. Having grown to become a virologist, he decided to subject the plants to test and got a substantial outcome through preliminary research.

“One day, I was working on a study on measles disease, and I remembered what the plant my dad normally used to prevent the disease spread. In preliminary research, I took the Itagiri to the laboratory to see if it would help. The majority of these herbs are not proven scientifically as I said but what I have done is what I am sharing.”

Narrating his experience, he said he cut the fruit into two, scooped off the seeds, separated them into three layers. “I matched the seeds, the little thin layer and the outermost layer separately. And tested it against the measles virus, and I found out that the outermost layer with green patches had a very high potency effect against measles virus in the laboratory.”

“I did some other chemical analysis to see further results. So, if I want to name it, I will call it Tagirin, but until then, the preliminary study showed that when placed in a room, the essential oil in the Itagiri caused inhibition of the measles virus to attach into the nostril.

“So because I worked on that, I can only explain the details of that, but for those who use garlic and onions, I can only speculate because I have not worked on it. There is a tendency in it but the potency may be exaggerated.”

Here and here are similar studies on the fruit plant. But, he concluded that for any medical study to gain meaningful recognition, it must have been published in high-impact journals.

However, as he admitted, based on the multiple findings in this report, there is no scientific evidence to validate that garlic and onion could prevent or cure COVID-19.
Combating COVID-19 Misinformation in Nigeria

DEBUNKING THE CLAIM THAT HEAT KILLS COVID-19 IN NIGERIA

BY ISHAYA IBRAHIM

When the Nigeria Centre for Disease Control (NCDC) reported new COVID-19 cases for June 13, 2021, to be seven, the majority of the feedback on the agency’s Facebook page where the announcement was made, mocked the number.

The reason is the false claim that COVID-19 in Nigeria is not real, with the hundreds of comments denying any existence of the pandemic in the country.

Incidentally, Nigeria has barely tested one per cent of its population. The NCDC director-general, Chikwe Ihekweazu, has also lamented that many states have not been testing enough, in a report published by the Premium Times of December 11, 2020.

The False Claims

The negative responses of Nigerians to the recent NCDC infectious data are consistent with a survey carried out by NOI Poll, a polling services firm in March 2020. The result of the poll showed that 26 per cent of Nigerians believe that they were immune to COVID-19.

Among the group feeling immune to COVID-19 are 40 per cent who say God is the source of their immunity. Another 30 per cent think being black confers on them a strong gene against COVID-19. At least 17 per cent believe that the country’s weather makes it impossible for COVID-19 to affect them. Eight per cent say they have taken strong herbs that won’t allow COVID-19 thrive in their body.

Narrowing On Hot Weather

The claim that hot weather kills COVID-19 is widespread in Nigeria, a reason facemasks and social distancing are considered unnecessary preventive measures against the pandemic.

The pandemic has caused the deaths of at least 3.8 million people in the world as of June 13, 2020. Nigeria’s share of the global death is about 2,000 people, a tiny fraction of the global mortality count. This may yet be another reason many citizens are feeling immune to the virus.

Some even insist that no Nigerian has died of the COVID-19. A Nollywood actor and comedian, John Okafor, popularly known as Mr Ibu, makes this claim in The Nation Newspaper of July 15, 2020. Many other news websites and blogs have amplified it, making it go viral.
“My brother, COVID-19 or 20 is not here, I don’t care. COVID whatever is not in Nigeria. We have hot weather here; the disease is scared of us just as we are scared of it so it can’t come here,” he said.

**Verifying the Claims**

The NCDC has said that the claim of hot weather killing COVID-19 is not backed by any scientific proof. “From the evidence so far, the virus causing COVID-19 can be transmitted in ALL AREAS, including areas with hot and humid weather,” says the NCDC on the FAQ section of its website.

A study on the Effects of temperature and humidity on the spread of COVID-19 by scientists in Brazil, published in PLUS ONE journal of September 18, 2020, found that while warm and wet climates may reduce the impact of COVID-19, it does not eliminate the virus.

“Based on a low level of evidence, the spread of COVID-19 seems to be lower in warm and wet climates. Furthermore, temperature and humidity alone do not explain most of the variability of the COVID-19 outbreak. Public isolation policies, herd immunity, migration patterns, population density, and cultural aspects might directly influence how the spread of this disease occurs,” the researchers say.

A virologist and Country Director, Avigo Health Care, Dr Femi Funso-Adebayo, also argues that while the Nigerian environment may present adverse condition for COVID-19 to spread easily, that alone does not kill the virus.

“Every virus has its specific mode of transmission. And for SARS COV2, which is referred to as COVID-19, it needs a particular environment that is enclosed to spread. If four people, for example, are in a vehicle that is enclosed and they put on an air-conditioner and one of them is infected, the chances of every other person catching or getting infected are higher, even with a nose mask. So, it is advisable that when you are in a vehicle, you roll down the windows,” he said.

Experts and scientific publications dismissing the claim that hot weather can’t halt COVID-19 have not stopped the online and offline spread of misinformation.

Twitter and Facebook search using keywords combination: ‘weather Nigeria COVID-19,’ throw up tons of claims that are not supported by any scientific proof.

Some claims are even mischievous, like the one by @plottedgarden on February 26, 2020, which presented what appears like an excerpt of a scientific paper on hot weather and COVID-19.

“Excerpt: Extremely hot temperatures may make it impossible for COVID-19 to take root in tropical African countries like Nigeria or Ghana…These diseases tend to spread best in cold weather & low humidity,” the tweet reads.

**Higher Death Rate**
The American based Center for Disease Control and Prevention (CDC) has said that older unvaccinated adults are more likely to be hospitalised or die from COVID-19, especially folks aged 60 years and above.

According to data from the World Population Prospects, the Population Division of the UN Department of Economic and Social Affairs, Nigeria recorded more deaths of adults over 60 years in the year 2020 than at any time in its history. 2020 was the year of the COVID-19 pandemic.

**Death Rate in Nigeria**

The data reveals that in the year 2020, the 60+ mortality rate rose the highest in Nigeria. The last count was in 2015, and the data shows a ratio of 22 per cent deaths per 100 population. In 2020, it jumped to 24 per cent per 100 population.

Deaths of prominent individuals and an unusually high number of burials were widely reported in the media in the early start of the pandemic in Nigeria.

For instance, within four months – April and August 2020, Chief of Staff to Nigeria’s President, Abba Kyari, and another close confidante of the President, Ismaila Isa Funtua, an ex-governor, Abiola Ajimobi, two senators; Buruji Kashamu and Bayo Oshinowo, were among those whose deaths were attributed to COVID-19.

In the Bayero University Kano (BUK), at least seven professors died between April and May 2020, three of the deaths occurred within 48-hours, reports the ThisDay Newspaper of April 27, 2020.

The poor also died. For instance, according to the Daily Trust report of April 21, 2020, graveyards that were recording less than five burials per day in Kano, suddenly started witnessing more than 20 burials. On one particular day, the newspaper reported burials of at least 150 people in three Kano cemeteries, an average of 50 burials per cemetery.

Nigeria’s Health Minister, Osagie Ehanire, confirmed that the higher deaths in Kano were COVID-19 related.

A public health consultant at the Lagos University Teaching Hospital (LUTH) who asked that her name not be mentioned because of a new directive by the government that they should stop granting interviews to journalists, explains why the deaths may have occurred in such large numbers.

“You notice that most of the people who died are elderly people. And we know that in the presence of underlying medical conditions like cancer, diabetes, hypertension, even HIV, the issue is that immunity has already crashed. It’s just like cough and catarrh, cough and catarrh are nothing. Its flu. But if your immunity is down, anybody that sneezes around you, you will get it. So, in the presence of a medically debilitating disease that is not properly managed, that already has rendered the person immune suppressed, COVID-19 can gain access and do harm,” she said.
Lessons from COVID-19 and Hygiene

The outbreak of COVID-19 has improved the hygienic habits of many Nigerians which Dr Funso-Adebayo said should become part of people’s lives.

He said: “The first time I went to Japan in 2005, I noticed that it was the culture to wear a facemask when you have the flu. So, even after SARS COV2, another virus is going to come. The new normal for us, washing your hands, putting on facemasks should continue. Your mask is preventing you from transmitting or infecting other people,” he said.

Lessons from COVID-19 and Misinformation

Health misinformation easily goes viral for the main reason that people want to stay healthy, says an Optometrist, Dr Amaka Madu. But it usually turns out to be more deadly than the problem they are trying to solve, she says.

She recalled one misinformation about Ginger and Gallic as a cure for COVID-19, which could become harmful to ulcer patients.

She recommends regularly sensitization of the people to always check with their doctor for medical advice.
Combating COVID-19 Misinformation in Nigeria

SPOTLIGHTING FEMI FANI-KAYODE, NIGERIA’S ANTI-VACCINATION CHAMPION WHO LATER TOOK THE JAB

BY KEMI BUSARI

Until March 20 when he suddenly announced that he had taken his first jab, Femi Fani-Kayode was at the forefront of the campaign in Nigeria against COVID-19 vaccines.

On March 30, a former Nigerian minister announced on Twitter that he had taken the COVID-19 vaccine. Strange news! For over a year since the virus was first detected in Nigeria, his name, Femi Fani-Kayode, rang a deterrent bell of anti-vaccination.

Apart from his many political jabs against the ruling party, fraud allegations and their resultant court cases, Mr Fani-Kayode had before that date, played a leading role in the league of COVID-19 vaccination opposers and confronters.

At one time, he described the vaccine as a ploy to create a new world order, at another he tagged vaccination an exercise that would result in the deaths of millions. To further dissuade his followers, he would tweet unconfirmed information and conspiracy theories being peddled against the virus.

A regular reference for journalists, Mr Fani-Kayode was once described by a fact-checker as one who makes “bogus statements, capitalising on his large social media followership to spur the spread of disinformation and misinformation.”

All reports on his conversion (those encountered in the course of research for this report) made references to his earlier comments on the virus but none made pragmatic...
efforts in measuring the former minister’s previous disparaging comments on his followers.

On Twitter, the announcement was greeted with mixed reactions. To some, it was only a matter of time, they knew all along he would be vaccinated for travel access. To others, mostly those who refused to be converted alongside him, another soldier in the fight against vaccination had deserted. A few questioned his advertent mislead of many followers.

The Numbers before Conversion

One of the first notable, misleading COVID-19-related tweets by Mr Fani-Kayode was on March 29, 2020, when he claimed that the virus was a ploy to create a new world order and get the United States President, Donald Trump, out of power. Elections in the U.S. were about seven months away then.

“One of the many objectives of the Illuminati & those that are behind the coronavirus pandemic & the emergence of a New World Order is to get @realDonaldTrump out of power in this year’s pres. election by sparking off a massive recession & crashing the American &world economy,” he tweeted.

The tweet as of Monday, June 14, had garnered 6,904 retweets, likes and comments and thousands of duplication across many platforms. Some fact-checking efforts were deployed to counter these claims but not long enough, Mr Fani-Kayode released two more fearsome tweets about COVID-19 vaccines.

Fani-Kayode’s tweet on April 30, 2020
On April 30, he warned Nigerians not to take vaccines which by then were in the trial stages. In doing so, he made three unfounded, totally false claims. Firstly, that vaccination would result in millions of deaths; secondly, that Nigeria was about to enact a law to make vaccination compulsory for all, and thirdly, that the vaccines are meant to depopulate the world.

The first of these three claims conform with the popular misconstrued comment of Robert Young, an alternative medicine practitioner, who at a meeting of a conspiracy theory group said that vaccination is a chemical warfare to depopulate the world. The video was widely shared by many but a fact-check revealed that the comment was made earlier in 2019, before the detection of COVID-19, in respect of the different vaccines given to children in the first six years. Despite the fact-checking efforts, Mr Fani-kayode still shared the video in January 2021.

Two days later, on May 2, Mr Fani-Kayode tweeted again, “@WHO are set to begin COVID-19 vaccine trials in our country. EVIL! Not only have our people been turned into Guinea pigs to test Gates’ killer vaccine but our leaders are also passing a law which will make the use of that evil vaccine compulsory. What a mess! I weep for Nigeria.”

Infograph Fani-Kayode’s tweets and their numbers
Some of his tweets may, at this period (with multiple vaccine roll out in many countries) come as laughing items, but they were sacred voices of caution when they were made. They were tweeted when a large part of Nigeria was on lockdown enforced to curtail the effect of the virus.

The lockdown notwithstanding, over 200 people, including Abba Kyari, the then Chief of Staff to the President of Nigeria, Muhammadu Buhari, had died of the virus; confirmed cases were in total of thousands; patients were treated in isolation centres with close monitoring; worse still, researches on the virus had not reached advanced stages, hence, conspiracy theories held sway. In short, it was a time of panic and tweets by Mr Fani-Kayode readily reinforced people’s fears and biases.

How then did a panic monger convert?

**The Conversion and The Dangers Inherent In Peddling Falsehood**

Against the nature of his comments, Mr Fani-Kayode announced on March 30, 2021, that he had taken a jab. “Despite my initially strong reservations I bowed to sound logic and superior reasoning and took my COVID-19 vaccine today,” he wrote in a thread of tweets.

He went further to explain the ‘sound logic’ and ‘superior reasoning’ to include persuasions from his political associates and the fact that his hero, Donald Trump, had taken it, despite his initial opposing stance.

As of the morning of Monday, June 14, his announcement tweets had a total of 1,173 likes, comments and retweets; a less than 10 per cent faction of interaction when compared to four of his falsehood spreading tweets examined in this piece.
Infographics Fani-Kayode’s false claims fact-checked

This confirms the concerns of some researchers who have discovered that a good percentage of people who come in contact with false information don’t care about the follow-up fact-checks. A recent survey by Zignal labs showed that 86 per cent of Americans who read news articles on social media do not always fact-check.

Not done, the ex-minister still used the opportunity of his vaccination to peddle falsehood about vaccines.

He wrote in the thread, “The COVID vaccines we are taking in Nigeria are not Bill Gates’ vaccines and neither are we being used as Guinea pigs. These ones are tried & tested, have already been approved & have been administered successfully throughout the world. This is the Oxford Azrazeneca brand.

“There is a world of difference between what we are being given in Nigeria & the exploratory vaccines that @WHO had wanted to test Africans with which we spoke against & resisted last year. Most importantly Bill Gates& his foundation have no connection with Oxford Azrazeneca.

“I would not touch anything Bill Gates with a barge pole for obvious reasons. Mark it.”

One notices that he recounted some of his earlier misinformation about the vaccines but not all that came in contact with the falsehood are impressed.

One of his followers replied sarcastically; “I praise your patriotism for agreeing to be one of our guinea pigs. Well done.” Another wrote; “nonsense” with rolling eyes emoji.
Perhaps this reply captures the question you might readily want to ask; “You got convinced by your sister and friend. What about the thousands you convinced and made to see the vaccine as devil products?”
A man in a video that went viral prescribed a salt solution as a cure for COVID-19. He said rinsing the nose and gargling salt water is the treatment.

He did not make reference to any clinical trials or structure for this treatment.

He, however, said it was recommended to him and his wife by a doctor when they tested positive for the COVID-19. And four days after using it, they got cured.

"I tested positive—me and my wife—for COVID-19. We called the doctor and told him this is what is happening and he said, 'No, it is not a deadly disease'. He said, 'What you should do: take some salt in a spoon and take a half glass of water, put the salt in the glass of water....’"

The man did not state who the doctor is, nor did he provide any verifiable evidence.

He, however, referenced a religious text where a prophet made use of a salt to cure or treat some water causing ailments.

The man also alleged that his daughter and granddaughter in the US, whom he recommended the treatment to, tested negative after a few days.

The same applied to his sister in Swaziland and a doctor’s mother in East London. All got cured after using his treatment.

In the 4 minutes and 43 seconds-long video, the man said he was prompted to share this remedy when his sister called him to take her to the hospital as she could not "breathe".

Instead, he recommended the solution to her, which she applied and within 30 minutes she got relief.

“And within two days, she was okay. She is back to work now,” he said.

**The Salt Solution**

According to him, the salt solution is done by adding a spoon of salt to a half glass of water for nose rinsing.

A similar solution is done for gargling, except, this time, the water has to be warm.

...but does it cure COVID-19?

The World Health Organisation (WHO) in its myth_busters section stated that saline (mixture of water and salt) does not cure the COVID-19.
The health body stated, “There is no evidence that regularly rinsing the nose with saline has protected people from infection with the new coronavirus.”

It, however, says, “There is some limited evidence that regularly rinsing the nose with saline can help people recover more quickly from the common cold. However, regularly rinsing the nose has not been shown to prevent respiratory infections.”

Furthermore, the MIT Medicals (Massachusetts Institute of Technology) in its coronavirus update also stated there was no evidence that gargling warm water with salt or a vinegar solution prevented infection with COVID-19.

A professor in Medical Microbiology and an expert in the management of infectious hazards, Adebola Olayinka when contacted in February and shown the video, explained that saline sprays as a medical treatment has been used for decades especially for children to reduce congestion on the nose.

"If someone has a blocked nose and there is mucus, putting the saline spray can relieve the person of the congestion", she noted.

As to this man's claim of it healing COVID-19, she said "I have my doubts".

She explained that people who have COVID-19 alongside cough and nasal congestions may get relief from the nasal infection if they use the saline spray. However, it does not mean that they have become COVID-19 negative.

"I think the danger is equating absence of symptoms to being cured of COVID-19. The symptoms might be relieved but that person is still infectious and is able to transmit the infection".

Other Misinformation around the Use of Salt
The MIT Medicals also added that this “cure” was popular during the spread of SARS, MERS, and Zika as well — and was equally useless then.

The use of salt was also prevalent in Nigeria during the 2014 Ebola outbreak. This led to fatal results, with many people hospitalised for salt poisoning almost more than with Ebola infection itself. The use of drinking and bathing with salt water was reported to have been started by a student as a prank.

A study published in 2019 about the 2014 misinformation found that 52 per cent of people who used salt water did it because they felt there was no harm in trying it, while 39 per cent said it was because they saw some health officials doing same.

**Study On Salt Solution And The Cure For Coronavirus**

A study led by Professor Aziz Sheikh and Dr Sandeep Ramalingam at the University of Edinburgh, known as the Edinburgh and Lothians Viral Intervention Study, or Elvis, recruited healthy adults within two days of them contracting a type of upper respiratory tract infection commonly known as a cold.

The control group treated the cold as they normally would. The other group was asked to gargle and rinse their nasal passages with a salt solution at will.

The researchers found that 95% of those who gargled with salt water and used nasal irrigation reduced their illness by 1.9 days, because the virus cleared faster, they were less likely to spread the common cold.

Therefore, the researchers are re-examining the study to check if its benefits may also extend to COVID-19 patients, and they are calling it the ELVIS COVID-19 Study.

A promotional video on the website reads, “COVID-19 causes fever, cough and other symptoms. The ELVIS COVID-19 study is to find out if you will get better quicker by rinsing the nose and gargling with salt water."

As at the time of this report the study is still ongoing and the call is still on for participants.
A search result of the video using google image reverse search tool.

Who Is Spreading The Misinformation?

In trying to determine the ‘message zero’, the first person to have shared it on WhatsApp was traced to February 2021, when it was shared by a retired director from the Nigerian civil service. However, the end-to-end encryption and privacy policies, coupled with limited time, made the attempt futile.

A search on the web using Invid fake news debunker, which broke the video into frames and the frames along with keywords “Salt cure COVID”, reversed searched using Google reverse image tool, produced nine results from six sources.

The videos were posted on Facebook and they were all pages. Three of the pages are dedicated to health, beauty & herbal remedy [Vicky Gold, Wholesale Alkaline Fruits,
vegetables & herbs, BeckytaTV], while one is a support page [Tell Tessys Inspirational Corner], another is a blogging page [Jenny's Talk Show] and the other [Enogie Ekunwe] was not stated. Further search also brought out another [Milly Beauty Products].

Using ‘whereisthatnumberfrom’, a web application lookup tool that helps users check the country and area of phone number, the phone numbers associated with the pages turned out to be from Germany [Inspiration], Ghana [wholesale] and Zambia [Milly Beauty].

Some of the pages have phone numbers associated with different countries.

This suggests that the video was circulated in multiple other countries aside Nigeria.

Five of the posts were made at different points in February while the sixth one was in June.

As at June 30, the latter has garnered over 18,000 views and 79 comments, generally thanking the poster. Only one comment stated to proceed with caution to avoid “aspiration pneumonia”.

Most of the pages posted it as some form of herbal remedy.

The use of herbal remedy and home-made remedy in Nigeria is not uncommon.
As the race to create vaccines for coronavirus is ongoing, multiple influential leaders in Nigeria and Africa are promoting herbal medicines and remedies.

One of Nigeria’s most influential traditional rulers, Ooni of Ife, Adeyeye Ogunwusi, in collaboration with an herbal company in February unveiled herbal drugs for the treatment of coronavirus.

The monarch said the Federal Government was aware of the drug and the National Agency for Food and Drug Administration and Control (NAFDAC) had approved it.

However, the drugs, Verozil, Bitter Leaf Capsule, Vision Pro and Rio Capsule, were not found on the NAFDAC registered product database as at the time of this report.

Furthermore, the agency said the herbal product Verozil, announced as a cure for COVID-19, was only an immune booster, and listed as such accordingly because it

The video as posted on different Facebook pages.
was yet to be found to be effective against the virus, as clinical trial evidence was yet to be provided.

The governor of Oyo State, Seyi Makinde, who was reported to have contracted COVID-19, a few days later came out to say he was negative. He stated that he consumed Vitamin C, carrots and black seed oil mixed with honey to boost his immune system to overcome the virus while in isolation.

Even though the governor stated it was an immune booster, this was interpreted in some quarters as cure for the virus.

**Nigeria’s Stand on Use of Herbal Drugs for COVID-19**

After receiving her vaccine injection, the Director-General of NAFDAC, Mojisola Adeyeye, told the press, “I believe in herbal medicine. Herbal medicine that is not backed up by research may be effective, but we don’t know.

“Especially for COVID-19 vaccine, herbal medicine has to be antiviral. It is not enough that it relieves cold, cough etc., it has to be antiviral.

“We have approved about 14 for listing, meaning they are safe to use, but how efficacious, it is when you do a clinical trial that you will know. Also, it is very costly to do clinical trials.

“Of course, we would have given them listing, but they will go further for a clinical trial. We are still expecting such. I will not be surprised if we have a herbal medicine that has antiviral against COVID-19.”

This is not peculiar to Nigeria alone. The Department of Traditional Chinese Medicine scholar, Zhejiang University School of Medicine, Yichang Yang, said clinical trials were needed before the approval of any herbal medicine.

“More evidence is required through controlled clinical trials to support the efficacy of these herbal drugs,” Yang said.

“Many traditional medicine practitioners believe that herbal remedies cannot be tested because they are tailored to each individual’s syndromes. This argument is simply not convincing,” he explained.
Combating COVID-19 Misinformation in Nigeria

COVID-19 AND MALARIA: DEMYSTIFYING THE DISSIMILARITIES

BY INYALI PETER

As at June 10, 2021, Nigeria had tested more than two million Coronavirus (COVID-19) samples with one hundred and sixty confirmed cases and more than two thousand death recorded, a number that continues to rise. Despite this, many Nigerians have continued to doubt the existence of the novel Coronavirus in the country, with insinuations that everything about the virus is politicized and an avenue for corrupt government officials to steal from public coffers. People with this school thought believe that what has been reported so far as COVID-19 is nothing but overhyped Malaria.

Although there've been no empirical evidence to support this claim, the disinformation which was first made public by Chief Raymond Dokpesi, Chairman of Daar Communication and re-echoed months later by Governor Yahaya Bello of Kogi State between May and August last year had been spreading like wildfire both on and offline in Nigeria.

Dokpesi and seven members of his family had contracted the virus and were admitted into the Abuja COVID-19 isolation Centre on the 1st of May 2020. Fortunately for him, 15 days later, the medical team were able to manage him and others to a point of successful discharge. However, instead of commending the efforts of the health workers, in his first interview after his discharge, he rather came out with the claim that what he suffered was malaria as there was no clear difference between the two diseases. He further challenged relevant authorities to educate him on the difference between the diseases claiming that throughout his stay in the isolation centre, he was managed with anti-Malarial drugs.

Bello on the other hand has been promoting different conspiracy theories about COVID-19 ranging from refusing to adhere to all standard COVID-19 prevention protocols, insisting it’s a hoax while describing the virus as an overhyped malaria and more recently, refusing to take the vaccine with the claim that, it was poisonous and designed to kill.

Despite Nigeria’s national Public Health Institute in charge of detection and response to infectious disease outbreaks, Nigeria Centre For Disease Control (NCDC) coming out with several campaigns, promoted in the social media with Twitter as primary channel as well as during the frequent briefing of the Presidential Steering Committee On COVID-19 (formally known as Presidential Taskforce on COVID-19) to counter them, the disinformation continued to generate debate in the country.

A twitter User, @Crusader even started a campaign last year with the hashtag, #EndCOVID-19scamnow" in support of Dokpesi’s position that the Nigerian
Combating COVID-19 Misinformation in Nigeria

government had been reporting Malaria cases as COVID-19. The tweet launching the campaign generated 78 retweets, 266 likes and 15 replies.

Recall that the first COVID-19 case in Nigeria was confirmed on the 27th of February 2020. It was imported into the country by an Italian businessman who flew in from Milan for a business meeting in Lagos, Nigeria's commercial capital. Since this period, the number has continued to increase and a lot of Nigerians, including prominent citizens like the Late Chief of Staff to the President, Alhaji Abba Kyari, former Governor of Oyo State, Abiodun Ajimobi, Sen. Buruji Kashamu and most recently, a popular activist and Spokesman of Yoruba apex socio-political group, Chief Yinka Odumankin have all died from the virus. Inspite this and other empirical evidences, the debate on whether it exists or not still making waves.

Samuel Ushie, a University Don who lives in Calabar in a chat explained why he supports the claim that COVID-19 is the same as Malaria.

According to him, "it all started with my wife. She was so sick, I was scared initially because she had all what they claim were symptoms of COVID-19 - loss of sense of smell, cough, fever and others. But after praying, I bought malaria drugs for her and she recovered. Few days later, I felt sick myself with the same symptoms. I went to the hospital, ran some tests but nothing came out negative. I had a little malaria which wasn't enough to cause the kind of symptoms felt. To be honest with you, I thought I was going to die because even my skin changed. But my wife gave me the malaria drugs she took and since then, I've regained myself. So, I believe that if at all there's COVID-19 in Nigeria, we're yet to discover it because what we've now may be another family of malaria which is yet to be discovered because if Malaria drugs can cure it, why is it given another name?", he queried.

Asked why they didn't test for COVID-19, he said: “I knew that there's no way we would have gone there and returned home. The fear of being kept in isolation centre for what we believe is Malaria scared us. See, we're Christians, even though some of our friends presumed what we suffered was COVID-19, we don't believe it and that's it. It can only be COVID-19 to people who believe it. For me and my household, we don't believe it exists. But we believe malaria does".

Also, a medical practitioner with the University of Calabar Teaching Hospital, Dr. Samuel Bitty said that even as a health expert, he believes that COVID-19 doesn't exist in Nigeria. He said that what people may call COVID-19 is nothing but acute malaria which most times also affects the brain.

"I will give you my honest opinion. I think what we've here is cerebral malaria. Cerebral malaria is part of a multi-organ disease, it causes fever, headache, even loss of sense of taste, etc. It can even cause severe acute respiratory syndrome. People may see it like COVID-19. For some time now, there is no accurate proof about COVID-19 in Nigeria", Dr. Bitty said.

From Bitty's opinion, it's clear that even some health professionals who are frontliners in the fight against COVID-19 believe that it is another form of Malaria and as such
are also helping in spreading the disinformation. However, findings have proven that COVID-19 does exist and it is not Malaria.

To understand the difference, it's important to understand what the two diseases mean.

**Facts**

According to World Health Organization, WHO, "COVID-19 is an infectious disease caused by a new strain of coronavirus (SARS-CoV-2). This new virus and disease were unknown before the outbreak in Wuhan, China, in December 2019 but were not traced to human".

Malaria on the other hand is described by WHO as a "preventable and treatable disease caused by plasmodium parasites that are transmitted to people through the bites of infected female Anopheles mosquitoes".

**Symptoms**

Similarly, although some Malaria symptoms like fever, headache, and chills which show up between 10-15 days of mosquito bites are also found in COVID-19 infected persons. Others like loss of sense of smell/taste, difficulty in breathing, diarrhoea, catarrh, fatigue, body pain and sore throat are not very common symptoms of malaria.

Malaria and COVID-19 also differ in terms of transmission. While malaria according to WHO is "transmitted through the bites of female Anopheles mosquitoes which are more than 400 species with around 30 as malaria vectors of major importance". COVID-19 according to NCDC on the other hand is spread from "infected people's mouth or nose in small liquid particles when they cough, sneeze, speak, sing or breathe".

NCDC further emphasized that the virus spreads mainly between people who are in close contact with each other, typically within 1 metre. "A person can be infected when aerosols or droplets containing the virus are inhaled or come directly into contact with the eyes, nose, or mouth". Malaria doesn't spread between people but by female mosquito bite.

**Prevention**

The NCDC has advised that to prevent the spread of COVID-19, people should wash their hands regularly with soap and running water, or an alcohol-based hand sanitizer, maintain social distancing from people coughing or sneezing, wear a face mask, cover nose and mouth with bent elbow or a tissue when coughing or sneezing. None of these preventive measures can work with malaria because the mode of transmission is through mosquito bite and not human.
The WHO World Malaria report indicates that Vector control, sleeping under treated mosquito nets, using insecticide are some of the measures that can be applied in the prevention of malaria.

**Diagnosis/Treatment**

According to United States Centre for Disease Control (CDC), malaria parasites can be identified by examining under the microscope a drop of the patient's blood, spread out as a “blood smear” on a microscope slide. Prior to examination, the specimen is stained (most often with the Giemsa stain) to give the parasites a distinctive appearance. It can be treated using antibacterial and antiparasitic medications such as Chloroquine phosphate, (Coartem), etc.

Nevertheless, there’s still doubt about the efficacy of some vaccines approved by WHO for prevention of COVID-19 infection. The National Agency for Food and Drug Administration and Control (NAFDAC) in Nigeria, has approved the Oxford AstraZeneca and Pfizer COVID-19 vaccines for the treatment of the virus in Nigeria.

Chief Medical Director of Omega Clinic and General Secretary, Association of General and Private Medical Practitioners of Nigeria (AGPMPN), Cross River State Chapter, Dr. Godwin Agbor clarified that: "COVID-19 is real. It's unfortunate that a lot of wrong information are in the social media space about COVID-19 from some people who may not be professional but disguising as one. The fact is that this strain of virus is relatively new to us and much more facts are yet to be presented about its genomics. Researches and more studies are currently underway to unravel the pathophysiology of the COVID-19 infection”.

He added that, “My candid opinion is that it is real and not overhyped Malaria as insinuated by many. It is a RNA virus that affects the respiratory system leading to a cascade of reactions from inflammation to even death. It has nothing to do with malaria which is a protozoa transmitted to man by the bite of its vector- mosquito. Though malaria presents as a non-specific systemic illness. It means that some signs and symptoms of malaria can be seen in COVID-19 infection. But they are not the same”.

Agbor added that the misinformation and disinformation about the virus is hampering to a large extent the fight against the pandemic in Sub-Saharan Africa, especially Nigeria. He advised that people should not take hook line and sinker, things they read on both electronic and print media but should verify from established authorities and professional bodies.

As the world continue to battle with virus, every responsible Nigerian is expected to take responsibility and play a part in winning the war against the virus by always passing the right information. One of such information that should remain in the lips of everybody is that as majority experts and established authorities have said, COVID-19 may present some symptoms that are similar to those of Malaria, it’s however distinct.
It is all about COVID-19.

Months down the line, I walk casually into the popular Mile 12 market in Lagos to purchase some foodstuff. But only a few people are wearing masks and the crowd, there as usual, streaming into different sections of the market.

“Imagine that you take a COVID-19 test and your result comes back positive. Would you tell your friends and family members or would you keep it to yourself? I asked the frozen food seller.

“Forget it my sister, there is no COVID-19 in Nigeria. I cannot even contract the virus; it is not my portion”, he tells me casually.

“I have never even seen anyone with the virus and I honestly think that they are making up the figures and I will not take that vaccine”, another customer said, eager to contribute to the conversation.

While the volume of information being shared about the virus is indeed overwhelming, it has culminated into a mix of viral posts, rumours, information distortion and fake news. Several widely-shared posts on social media claim that COVID-19 does not exist in the country as well as misleading posts on the vaccines and claims about the state of COVID-19 survivors.

On a daily basis, updates from the social media accounts of the Nigeria Centre for Disease Control turn to some kind of controversial banter about the existence of COVID-19 and other issues surrounding it. Tailored and advanced searches show that fear, anxiety and doubt are mostly associated with COVID-19.

Some of these posts and comments were analyzed in a bid to do a sentiment analysis and results showed that doubt about the existence of the virus is a major barrier in the fight against COVID-19.

It is this same sentiment that is shared by word of mouth across local communities.

There is a lot of scepticism about the existence of coronavirus and the vaccine in some quarters, despite the fact that the NCDC reports new infections daily.

As other variants of COVID-19 continue to emerge, many Nigerians continue to live in denial of its existence by disregarding safety guidelines and restrictions.

There are fears of a third wave of the pandemic in Nigeria and this apathy, if not tackled may threaten efforts to combat the virus, the Nigeria Centre for Disease Control (NCDC) has said.

“It is really sad that public distrust in government can extend to COVID-19 that has ravaged many people and even health workers worldwide and even in our own
country, Nigeria. There are so many “doubting Thomases”, but many who have had a close shave know that it is what it is— a highly infectious disease that could be very fatal especially in the face of co-morbidities” says the secretary of the Nigerian Medical Association in Lagos state, Dr. Ime Okon

The irony of this situation is the fact that while there is widespread disbelief and a set of conspiracy theories about the existence of COVID-19 and misleading information about the vaccine in Nigeria, stigmatisation of COVID-19 survivors fuelled by misinformation persists. This is because it is still a relatively new disease and its realities are constantly emerging.

According to the World Health Organisation, the fear of the unknown drives stigma about the disease and can cause people to hide their illness. Fear can also hold people back from seeking immediate health care or observing preventive measures.

De-Stigmatizing COVID-19 Survivors

At community level, a recurring pattern of fear occurs with a loss of trust in health services, in addition to limited access to health and safety information in poorer communities and stigmatising attitudes making people not want to associate with a survivor of COVID-19.

Cultural beliefs play a big role in the widespread fears due to high infection risk, lack or inadequate access to the right information. After a probably grueling experience with COVID-19, many survivors return to their families and communities and face stigmatisation and blame from their communities.

“I do not have problems with COVID-19 survivors but I hear that people who have recovered from COVID-19 virus can still transmit the virus so I would rather be safe than sorry”, a colleague tells me.

But the truth is that he has never met a COVID-19 patient or a COVID-19 survivor so he probably can’t predict how he would react if he meets either. Surviving COVID-19 in Nigeria is different strokes for different folks. While some find it easy to re-integrate into the society, others are struggling mainly because of misinformation.

“I thought I was going to die when I contracted the virus but after recovering from COVID-19, I still felt weak and dizzy but I wasn’t stigmatized at all maybe because I am a public figure and I didn’t hide my COVID-19 exposure. I even tweeted about it. No one really treated me badly post-COVID-19”, he said.

Months ago, Tamuno Sample* tested positive for COVID-19 and he made his status known to his colleagues.

“I experienced some form of stigmatization when I resumed at work after recovery. Many of my colleagues made it certain to keep a safe distance from me. They probably thought I was still infectious and I had to share my latest negative result to get them settled”, he said.
While Hamzat Lawal and Tamuno Sample* may have their own cases easy, it is the other side of the coin for Amaka Okorie* who tested positive for the virus in February 2021. She has since recovered but is still battling with its effects months later.

“I am COVID-19 negative but I get tired easily, I cough sometimes, I still can’t smell anything, my complexion is darker and I forget things rather easily. People avoid me because they think that I can still transmit the virus to them. This is really taking a toll on my mental health”.

Amaka Okorie* is no longer infectious but she is experiencing “Long COVID”, which refers to a condition where people continue to experience persistent symptoms of COVID-19 for longer than usual after initially contracting the virus.

She is now finding solace in many online support groups till she returns to her previous state of health as many people do not seem to understand Long COVID.

**Is Long COVID Contagious?**

According to the U.S. Centers for Disease Control, once a person has COVID-19 symptoms, he or she is typically, no longer contagious, 10 days after the symptoms began. This is applicable to mild cases of the disease. Those who are immunocompromised may be contagious for up to 20 days.

The World Health Organisation corroborates this, saying that infected people appear to be most contagious two days before they develop symptoms but people who develop severe disease can be infectious for longer.

“Once the PCR test is negative, it means that there is no more virus that can be transmitted. The so-called “Long COVID” refers to the damage done to different organs and symptoms from the inflammatory effects of the disease caused by the virus” says Dr. Alero Roberts, the second vice chairman of the Association of Public Health Physicians and Senior Lecturer and a consultant at the Lagos University teaching Hospital (LUTH).

“After confirmatory tests come back negative, a survivor is no longer infectious. A survivor can only be infectious if he or she is re-infected with the disease, an epidemiologist, Dr. Oladapo Asiyanbi said.

In order to understand some of the examples of stigma reported by COVID survivors, a questionnaire was administered to 10 survivors in a Facebook support group.

All ten of them reported that they were avoided by others and that they were discriminated against at their places of work or living. Eight respondents were called names while seven of the ten respondents were blamed for getting or spreading the virus. Six respondents claimed that their experience with coronavirus was undermined by others and two respondents reported hostility by medical staff.

So what are some of the negative perceptions that exist about COVID-19 survivors?
Eti-Osa local government area of Lagos state was one of the hotspots for COVID-19 during the early days. I conducted a research on the perceptions about COVID-19 survivors among 50 respondents in this local government.

40 out of the 50 respondents feel that recovered COVID-19 patients did not take adequate preventive measures. 41 of the 50 respondents also feel that COVID-19 survivors can still transmit the virus.

Many COVID-19 survivors including those experiencing long COVID are struggling, and may need psycho-social support.

“Instead of celebrating the win over coronavirus, survivors begin to think, why did I contract this virus in the first instance? It is a negative feeling that could take them down and bring down their morale. Anything that affects the three most important states of our mental health- psychological, emotional and social states, should not be encouraged. Stigmatisation affects each and every of those three states”, Kunle Pelemo a mental health expert said.

As with HIV/AIDS and Ebola, the stigma associated with COVID-19 falls back to misinformation and tackling it can only make the war against COVID-19 better.

While the number of COVID-19 survivors is expected to rise, raising awareness on the plight of survivors, correcting false impressions about the virus, vaccines and promoting stigma reduction can help fight misinformation and encourage people to take precautions, empathize and treat survivors with respect and dignity.

*Names were changed*
Combating COVID-19 Misinformation in Nigeria

HOW MISINFORMATION AND INSECURITY AFFECT COVID-19 VACCINE RECEPTION IN BORNO STATE

BY JACK VINCENT FIDELIS

IN 2019, the last day of December heralded not just a new year, 2020, but the emergence of the novel Coronavirus Disease (COVID-19) in Wuhan, China. The spread of the resultant pandemic to virtually all parts of the known world has had social and economic consequences for governments and people in the global north and south. The need to expedite action in combating the scourge became apparent as scientists took to their labs in search of the desired antidote to remedy the malady. Good reason the manufacture, distribution and use of vaccines to prevent infection couldn’t have come at a better time.

The first case of COVID-19 was confirmed in Nigeria on the 27th of February, 2020, and less than two months later, the first case in Borno was reported on the 18th of April.

Before this time, residents in the largely embattled region were apprehensive. The pandemic, they feared, would only aggravate the security challenges they have had to contend with since the second half of 2009 when Boko Haram insurgency redefined the communal existence of the people including their access to basic healthcare.

COVID-19, undoubtedly, disrupted a way of life that was already marred by the consequences of violent extremism in the region. The imposition of a total lockdown by the government, for instance, to prevent the spread of the disease meant that the people, especially petty traders, couldn’t go out to fend for themselves while it lasted, even though a large number of poor people depended on these petty businesses for their livelihood.

Initial Compliance to COVID-19 Regulations

The fear of contracting the disease and the need to prevent the spread of COVID-19 made people, in the early days, adhere to safety regulations like the proper wearing of face masks, hand-washing with soap and use of sanitizer, adherence to social distancing and so on.

Subsequently, however, in a press release by the Borno State COVID-19 Response Committee on the 13th of May, 2020, the indefinite suspension of lockdown in Maiduguri was announced after residents had observed the exercise for an initial 14-day total lockdown period which started from the 22nd of April. The decision, according to the document, was reached because of significant progress made in the fight against the dreaded disease and the stringent measures taken by the government which, within the time under review, had yielded the desired results. The interpretation the people made of this could, at best, be different from what the government intended. This is because social distancing and the proper use of face
masks and other safety guidelines were flouted almost immediately, as the excitement died down with the passage of time and the lived experiences of the people, thereby giving way, in the process, to disillusionment and a plethora of doubts and conspiracy theories.

International news reports were replete with scary death tolls from COVID-19 in America, Asia, Europe and sundry places. The people made mental comparisons of what transpired in those places and the reality in their own backyard and some of them concluded, albeit erroneously, that the disease was either fake or yet to actually get to the country.

Since the first confirmed case of coronavirus in Borno State in April, 2020, according to the Nigeria Centre for Disease Control, the number of lab confirmed cases is 1,337, the number of cases on admission is 99; number of discharged cases is 1,200, while the number of deaths from COVID-19 within that time was 38 (http://COVID19.ncdc.gov/).

**Misinformation and Conspiracies Still Drive Vaccine Hesitancy**

Opinions sampled from respondents in Maiduguri, Jere and Konduga Local Government Areas of the state show that the figures are minimal in comparison to other parts of the world with larger figures.

Over a decade before the advent of COVID-19, anti-west sentiment in parts of Northern Nigeria was quite pervasive.

An attitude responsible for the proliferation of children crippled by wild polio virus because their parents, religious and opinion leaders thought polio vaccine could lead to sterility and depopulation.

A 2013 article titled, ‘Listening to the rumours: What the northern Nigeria polio vaccine boycott can tell us ten years on’, showed between July 2003 and August 2004, five states in Northern Nigeria - Bauchi, Kaduna, Kano, Niger and Zamfara, suspended the administration of the oral polio vaccine.

The boycott proved a huge setback for polio eradication and polio incidence in Nigeria jumped from 202 in 2002 to 1143 in 2006.

Isaac Ghinai, a researcher on public health, epidemiology, global health and infectious diseases said there has been a particularly serious and well documented set of vaccine refusals in Nigeria due to misinformation, conspiracy theories buoyed by religion and ethnicity.

“One of the justifications given for the boycott was the belief that Oral Polio Vaccine spread HIV and caused sterility in Muslim girls. An understanding of the religious elements at play, which, in Northern Nigeria, are intrinsically interwoven with ethnic identity, is therefore key to understanding the power this accusation had”, He said.
True to type, the same sentiment is still alive and responsible for the doubts and conspiracy theories trailing the existence of COVID-19 and the need to accept and receive vaccines manufactured to effectively prevent its spread.

**‘Why We Won’t Take COVID-19 Vaccine’**

A random sampling of opinions during interviews with respondents gave an insight to the havoc misinformation about COVID-19 vaccine is capable of wreaking, especially in societies that have been battling with insurgency.

How the misinformation is generated and disseminated is quite opaque, but not unconnected with grapevine and conspiracy theories that are akin to the ones on polio over a decade ago.

“I will not receive the COVID-19 vaccine because I was told that whoever receives it will not live beyond 50 years on Earth”, Jidda Saleh, a 32-year-old farmer from Jere Local Government Area of Borno State told this researcher. *(Note: This misinformation has been debunked by WHO and many fact-checkers)*

Sadly, many people like Malam Jidda in his Haddamari community of Jere Local Government Area believe this to be true.

Because opinion leaders in this part of Nigeria wield enormous influence, their words are revered. If the misinformation is coming from them, the damage can only be imagined.

In Maiduguri, Ahmed Umar, a 28 years old student, pointed out, quite boldly: “I’ll not receive the vaccine because I saw qualified medical doctors on YouTube discrediting the vaccine. If white medical doctors could insist that the vaccine is a fraud, who am I to say it’s not?”

Another respondent, Agnes Dauda, a primary school teacher said: When COVID-19 was reported in Maiduguri in the early days, patients on admission at the University of Maiduguri Teaching Hospital were branded as sufferers of the disease by the hospital management when in fact they were suffering from unrelated health challenges.”

In Konduga local government area, Abbas Grema Konduga, a 43 year-old farmer said: “we live in a very hot place; COVID-19 cannot survive here”.

Like many others in his immediate community, Malam Abbas obviously believed the fallacy. This kind of misinformation is undoubtedly the cog in the wheel of achieving the desired vaccination necessary for preventing the spread of the disease.

**Vaccination Underway In Phases**

Thankfully, no amount of doubt, conspiracy theory or misinformation has been able to prevent relevant stakeholders from distributing the vaccine to people that are willing to get vaccinated in the state.
Atilio Rivera, an INTERSOS doctor, has been carrying out COVID-19 awareness and vaccination activities in Borno State in three phases. The first one is intended for health workers and front-line workers, and the most-at-risk groups of the population - the elderly and people with specific diseases.

As at 15th April, 2021, 75,000 doses have arrived in the state for the first phase. These doses have been divided into two parts respectively, 50% for the first and 50% for the second dose.

The relative success recorded by government and partners like INTERSOS notwithstanding, misinformation has been a major setback for positive response to COVID-19 vaccination.

In Borno State, religious and opinion leaders can influence the decision of the masses to accept the vaccine.

If they are targeted to change narratives or set desired agendas, the end result can lead to massive acceptance of the vaccine which will lead to the general well-being of the people.
Combating COVID-19 Misinformation in Nigeria

BETWEEN PULPIT CONSPIRACY AND COVID-19 VACCINE

BY JENNIFER UGWA

In a world overrun with fake news and conspiracy theories, the outbreak of the COVID-19 virus ushered in a wave of global fear and doubt, especially about the coronavirus vaccine. In this report, Jennifer Ugwa writes on how religious leaders' perspective of the vaccine sways pentecostalist acceptance of the jab.

FOR the second time that cold Sunday morning in her sparsely decorated sitting room in Iba Estate, Ojo Lagos Nigeria, Ngozi Obidike, 46, a devoted member of the Assemblies of God Church, emphatically reiterated that she was not going to take the COVID-19 vaccine. Her pastor’s sermons about the jab were not positive, but neither was it encouraging.

“Have you not heard what they (Pastors) have said about it? Anybody who takes it does so at their risks is part of the sign of end-time,” she said.

Obidike has made her choice and joins the rapidly-increasing number of Pentecostalists, who say the vaccine contradicts their religious beliefs.

Just ahead of China’s big Lunar New Year festival in 2020, health experts announced the outbreak of COVID-19, a novel virus similar to the Severe Acute Respiratory Syndrome (SARs) that led to the death of nearly 800 persons globally between 2002 and 2003.

The virus origin is yet to be identified, but it was reported to have first jumped from animal to human in Huanan seafood market in Wuhan, Central China. With 3.5 million deaths, preventive measures and vaccines are the world’s main defence against the virus, however, conspiracy theories, unverified information has created aversion for the shots even before the arrival of the first COVAX doses in Nigeria.

“What will happen to those who have already taken the vaccines? What will happen to them in five years? Normally these things(vaccines) will be tested for 10 years.

“Those that are giving you the vaccine do not plan for you to ever again have a normal life. Forget it. The plan is for you to never have a normal life. And this is not a conspiracy theory.”

These were the words of popular televangelists, Pastor Chris Oyakhilome, founder of LoveWorld Incorporated — also known as Christ Embassy — in a live cable broadcast preached in 2020 during the early stages of the outbreak.

Oyakhilome claims the virus is illusory and the Polymerase Chain Reaction(PCR) test is a fraudulent means to fulfil an inoculation ruse by world governments that will upturn the normalcy of life and Christian activities.

With a population of over 200 million and deep religious roots, where 45.9 per cent of the populace are Christians, 35.3 per cent as Pentecostalists or non-Catholics, the
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position of religious leaders on some issues often constitute the basis for some citizens' decision-making.

For an unorthodox (?), Pentecostal megachurch like Christ Embassy with over 300 branches in Nigeria and an approximate 13 million members globally, the position of the Oyakhilome quickly became a footing for scepticism and distrust for the vaccine.

In Lagos, Sandra Enyinna, who attends Christ Embassy church, said she “won’t take the vaccine for as long as it is not compulsory”.

“If you listen to pastor Chris’s sermons, he said these things with facts, he has proof and who are we to question how he got them,” she says.

Enyinna, who also acknowledges the possibility of the existence of the virus, said she got “healed” when she contracted the virus by using herbal remedies.

“I have a lot of objections about that vaccines. Why are they not creating vaccines for sickness like HapatitisB and all of a sudden COVID-19 came, and they already have a vaccine for it and are making it compulsory for people to take,” she said.

A random search using COVID as a keyword on Yookos, an online social networking platform owned by Oyakhilome exclusively for church members but later expanded to allow public access, revealed over 35 trending hashtags on the App like #COVIDfiasco #COVID19debacle #COVIDscam #notovacine #chippedvaccine.

Public discussions on Yookos about the virus and vaccine reveal antipathy for the jab and the coronavirus.

“As far as I am concerned it’s (COVID-19) dead when the Man of God declared by the Spirit last year March 27 global day of prayer,” said Tifaglory, a user on Yookos

Another user identified as ‘ikoso’ shared a 2011 edition of The Sovereign Independent, a dissolved newspaper alleged to have published controversial opinion pieces and conspiracy theories that were reshared under other trends in support of this belief.

Perhaps, if the disposition of this pentecostal assembly about the vaccine on Yookos is determined via popular opinions and video contents, a majority—if not all—members of the church may never accept the COVID-19 jab.

Oyakhilome’s sermons on COVID-19 have been fined and criticised and may even rank top on the list of disputed religious leaders opinions of the vaccine, however, he is not the only member of the clergy who believes there is a sinister motive to COVID-19.

Christopher Okotie is another influential televangelist and pastor who claims there are conspiracy agenda underfoot and says Bill Gates, co-founder of Microsoft Corporation, is “the protagonist of everything (Coronavirus) we see today.”
In a 15-minute video on Youtube, which he titled: The COVID-19 Mystery, Okotie claimed the vaccine’s introduction is “an attempt to copy the pattern of the communion” by the propagators of evil.

The video has over 1759 views.

**Expert Perspectives**

Conspiracy theories and doubts on the origin of the virus aside, rapid development and side effects of the vaccines are also reasons for the apprehension of believers in pentecostal circles who spoke to this journalist.

In a phone interview, Bola Oyefulo, a Professor of virology with the Department of Microbiology at Lagos State University, said the distrust for the vaccine is not unfounded as new variants indicate that the virus epitope or antigenic determinant predictions are incomplete.

“There is more to this than the eye can see, and I don't understand why they are producing the vaccine and making it mandatory for people to take it,” said Oyefulo.

“It is not the best to roll out a vaccine that is not totally protective. A vaccine should be all-encompassing in respect to what the pathogen could be.”

The virologist believes that the production of the vaccines is fuel by international political propaganda.

Meanwhile, Doctor Tobin Ekaette, Consultant Public Health physician Irrua Specialist Teaching Hospital, Edo State, said popularly held opinions about the use of the vaccine and virus to usher in a "new world order" is unfounded and “very terrible information”

"I understand that these developments could be scary for the layman but it is about striking a balance between withholding and saving lives," she said.

Ekaette noted that under the emergency use authorisation, positive phases of laboratory results had proven the efficacy of the vaccine.

"The vaccine is still going through phase three — marketing evaluation — but nonstop research is still be carried out every day.

While some popularly held misconceptions about the Coronavirus and the vaccines have been debunked, unfortunately, three months after Nigeria received the first dose of the vaccine, citizens’ apathy still stalls the acceptance of the vaccine in the country.
DOES COVID-19 VACCINE CAUSE INFERTILITY IN MEN AND WOMEN?

JUSTINA ASISHANA

Freezing your sperm before taking a vaccine sounds scary, but do you really have to? The question came up recently in a health engagement in Niger state regarding the COVID-19 vaccine. A lot of questions were asked about how sure the facilitator, who is a Health Educator, that after taking the COVID-19 vaccine, one would be able to give birth.

This question was echoed by other participants. The Facilitator, who is the Niger state Immunization Officer, Abubakar Kpantu said that he and his staff have been having such questions by those who are eligible to take the vaccine saying that it is one of the causes of COVID-19 vaccine hesitancy in the state.

Some pictures were going around on WhatsApp asking men to freeze their sperm and women to freeze their eggs before embarking on receiving the COVID-19 vaccine.

"We're evaluating the sperm parameters and quality before the vaccine and after the vaccine. From the biology of the COVID vaccine we believe it shouldn't affect fertility but we want to do the study to make sure that man who want to have kids in the future to assure them it's safe to go ahead and get the vaccine," Ramasamy said.

Study participants must have a fertility evaluation before receiving the vaccine.

To protect fertility, some men may want to consider freezing their sperm prior to vaccination.

Verification

Using the Google Reversed Image, it was shown that the picture was a screenshot taken from some articles while further search showed that it may have first be written by local10.com in its article titled 'Study investigates effects of COVID-19 vaccine on male fertility on December 20, 2020, with bylines of Kristi Krueger, Anchor/Health Reporter and Kathleen Corso, Special Projects Producer.
Google Reverse Image Search is a part of Google search that allows one to search the internet using images instead of writing words. By sharing a specific image with your search engine, it will go on to find others like it.

In the article referred above, it was stated that The University of Miami was investigating the possible effects of the coronavirus vaccine on male fertility and advised participants to have a fertility evaluation before receiving the vaccine.

It concluded with these words, "To protect fertility, some men may want to consider freezing their sperm before vaccination." It is weird they are talking about ‘the vaccine’ in this article.

Digging deeper and going online using Tweetdeck and Who Posted What, there were trends of posts that retweeted and shared the articles and some people may have screenshot it to start sharing on WhatsApp.

One of the tweets seen with handle michellemalkin who is a syndicated writer and vaccine sceptic showed that her tweet was retweeted 8,226 times with quote tweets of 2,001 times. But why the post which was tweeted in 2020 and the article written in 2020 is still relevant and shared recently in 2021 showed that anti-vaxxers may want to dissuade people from taking the vaccine, a situation which is already been seen to be causing vaccine hesitancy.

This is because in 2020 ‘the COVID-19 vaccine’ was still in its trial/early phase but now, there is a much larger body of data on the fertility and the vaccine: majority of which points that basically, there is no impact on fertility, and even pregnant women are advised to take the vaccines.

Using Hoaxy to view the network of misinformation about the flow of the information in the last seven days, it was seen that majority of the posts tweeted and retweeted were by governments and the country's centre for diseases control explaining that the vaccine does not affect fertility in men and women.

Where Did The Infertility Myth Originated From?

In 2020, a former vice president of Pfizer, Michael Yeadon alongside some other person's wrote a petition to Europe's medicines regulator demanding that the COVID-19 vaccine clinical trials should be stopped. They speculated that the vaccines could cause infertility in women.

Further search showed that their speculations were without evidence but because Yeadon was not just anyone but a former vice president of Pfizer which is one of the organizations coming out with the vaccine, social media spread the unverified claims that COVID-19 vaccine causes female infertility and this started the flow of misinformation that the vaccines infertility.

It was observed that what gave Yeadon credibility about his claim was the fact that he worked at Pfizer.
Expert's View

The Medical Director and Chief consultant Obstetrician and Gynecologist of Queens Specialist Hospital, Dr Martins Oche Ejembi explained that vaccines are supposed to provide immunity against one or several diseases and in the COVID-19 vaccine, the vaccine is supposed to provide immunity against the COVID-19 virus.

According to him, the COVID-19 virus itself can affect the fertility of both male and female explaining that in the male, it affects the testicles, causes sperm problems in terms of movement, morphology, swimming ability and ability to fertilize.

"So also with the women, COVID-19 vaccine affects the ovaries where the eggs are produced. In a way, acute infection of COVID-19 can lead to infertility in both men and women because the egg is part of the process that reproduces for the women and the sperm for the man. And when they come together, they form a zygote which transforms into a baby. So when all these organs involved in reproduction are affected, it affects fertility.

For the COVID-19 vaccine, Ejembi said, "The vaccine is supposed to prevent serious infection when taken. It is supposed to help stop the progress of COVID-19 in the body. We know that the virus itself can in a way attack fertility. COVID-19 studies have shown that COVID-19 has been seen in vagina fluids, in semen and it travels fast to the reproductive organs, so we know that at that level, it can affect fertility organs but the vaccine which is supposed to contra or to fight the virus itself cannot be said to be causing infertility."

The Obstetrician and Gynecologist further said that studies on the COVID-19 vaccine show that, the vaccine has no immediate effect on fertility adding that "It is, however, too early for us to be able to say that the vaccine affects fertility. The rumours going that the vaccine is meant to reduce our population is far from the truth. For now, we don't know what the long term effect of the vaccine would be on reproductivity."

Ejembi further said that studies are being done to see if the vaccines can affect the reproductive organs and cause infertility adding that, "Only when the time comes that we will be able to ascribe that the vaccine is the cause of this problem or that problem. Studies are being done to see how it will affect fertility and reproductive organs. But for what is known scientifically now, the vaccine will not cause infertility but the virus will."

What Other Authorities Say

According to the Center for Disease Control (CDC) in the advice section regarding the COVID-19 and Pregnancy, titled "People who would like to have a baby", it read, "If you are trying to become pregnant now or want to get pregnant in the future, you can receive a COVID-19 vaccine. There is currently no evidence that any vaccines,
including COVID-19 vaccines, cause fertility problems—problems trying to get pregnant.

"CDC does not recommend routine pregnancy testing before COVID-19 vaccination. If you are trying to become pregnant, you do not need to avoid pregnancy after receiving a COVID-19 vaccine. Like with all vaccines, scientists are studying COVID-19 vaccines carefully for side effects now and will report findings as they become available - Centre for Disease Control and Prevention."

Although there is no information regarding the COVID-19 vaccine affecting fertility or infertility in the Frequency Asked Questions (FAQs) on the website of the Nigeria Center for Disease Control (NCDC) or the National Primary Healthcare Development Agency (NPHCDA), there was information regarding pregnant women using the vaccine in NPHCDA.

The Agency in its website stated that "Available data on vaccination of pregnant women are insufficient to assess vaccine efficacy or vaccine-associated risks in pregnancy. However, the vaccine is not a live virus vaccine, the mRNA does not enter the nucleus of the cell and is degraded quickly.

"In the interim, WHO does not recommend vaccination in pregnancy, unless the benefit of vaccinating a pregnant woman outweighs the potential vaccine risks, such as in health workers at high risk of exposure and those pregnant women with comorbidities placing them in a high-risk group for severe COVID-19. Pregnant women should consult their Doctors."

**Fact-Check**

Freezing your sperm before taking a vaccine sounds scary, and if this was true, you’d be wary of taking the vaccine if you wanted to have kids, but you don’t need to do this because there is no proof to show that COVID-19 vaccines cause infertility in men and women.

Studies are still underway to show the long term effect of the vaccine on fertility but Studies have further shown that COVID-19 can cause Infertility and the vaccine which is supposed to mitigate the effect of the virus should be seen to address this situation.

Therefore, there is no need to freeze your sperm before taking COVID-19 vaccine as the claim that COVID-19 vaccines infertility is Misleading and tends to cause Vaccine Hesitancy.
Combating COVID-19 Misinformation in Nigeria

HOW MISINFORMATION DRIVES LOW UPTAKE OF COVID-19 VACCINES IN NIGERIA

BY KELECHUKWU IRUOMA

Chiamaka Ani was at the Uruan local government secretariat of the National Youth Service Corps (NYSC) in Akwa Ibom State in South-South Nigeria when health workers from the National Primary Health Care Development Agency (NPHCDA) arrived to administer the Coronavirus disease (COVID-19) vaccines on corps members.

Upon seeing the health workers, Ani, who is a member of NYSC, a program established by the federal government to involve Nigerian graduates in nation-building and the development of Nigeria, became afraid.

“I did not take [the vaccine] because I was confused,” the 23-year-old said.

“I never had anyone explain to me what the vaccine was all about and if there were any side effects after receiving it,” she said, stressing some of the COVID-19 vaccine misinformation she received on social media discouraged her. “I saw some conspiracy theories on WhatsApp status, Facebook and Instagram about the vaccine.”

COVID-19 is an illness caused by the acute respiratory syndrome coronavirus 2 (SARS-CoV-2), which was first identified in the city of Wuhan, China, and reported to the World Health Organization (WHO) in December 2019.

Nigeria confirmed its first case on February 27, 2020. The virus was later declared a pandemic by the World Health Organization (WHO) on March 11, 2020, as the number of cases and deaths continued to increase globally.

Scientists began to team up with pharmaceutical companies to develop vaccines that would reduce the spread of the virus. Vaccines have been identified as the best method of preventing and controlling viral diseases. According to WHO, there are vaccines developed to protect people from at least 20 diseases.

There was, however, a breakthrough in the development of vaccines, which were distributed to countries, including Nigeria to vaccinate their population.

But Nigerians, especially those in rural communities, are not willing to take the COVID-19 vaccine due to misinformation, leaving them susceptible to the virus.

More than 170 million people have been infected with the virus globally as of June 4, according to WHO, of which 3 million people have been confirmed dead as of June 2.

In Nigeria, about 166,000 people have been infected with the virus and 2,000 people have died, according to the Nigeria Centre for Disease Control (NCDC).
In March 2021, Nigeria received 3.94 million doses of the COVID-19 vaccine developed by the University of Oxford and aimed at vaccinating 20% of the population.

The Nigerian government said it planned to vaccinate 40% of its total population in 2021, with an additional 30% in 2022 and aimed to vaccinate at least 70% of the country’s population.

The vaccines were immediately distributed to various states with the NPHCDA assigned the responsibility to vaccinate Nigerians, starting with frontline healthcare workers.

“I will not be willing to receive the vaccine because I don't really have factual reasons [I should],” Ani said. “A lot of people perceive the vaccine to be substandard. People do not know if the vaccine is the right one.”

**How COVID-19 Misinformation Spreads**

Misinformation has been spreading across social media platforms such as Instagram, Facebook, and Whatsapp about how harmful the vaccine is when taken.

There was misinformation that the Messenger RNA vaccines developed for COVID-19 changes the DNA.

Many people said they are afraid to take the vaccine because they did not believe in the existence of COVID-19 being present in Nigeria.

“I won’t take [the vaccine] because I do not believe in the virus,” said Judith Ohakwe. “I do not believe we have it here [in Nigeria].

Ohakwe said she received several messages on Twitter, Facebook, and WhatsApp, making her not believe in the virus being present in Nigeria.

“The messages were mostly voice notes shared to me privately and on WhatsApp groups I belonged to. I saw several Facebook posts,” Ohakwe said, stressing she no longer has access to the messages.

She received several conspiracy theories that influenced her decision to not believe the existence of the COVID-19.

“You might not necessarily believe in it [conspiracy theory] but it has a way of creating fear in you,” she said.

“Since I will still be alive, even though I will not take the vaccine, there is no point. Let me live my normal life. If death comes, I will die.”

The lack of trust in the Nigerian government has been referenced to be a significant factor discouraging Nigerians from taking the vaccine.
“I do not believe that the Nigerian government will be so compassionate to give us the vaccine [for free], considering what is happening presently in the country. Nigeria does not love its citizens to give us vaccines,” Ohakwe continues.

“I know that Buhari does not like us, I do not believe anything that comes from the administration. Had it been we had a good president that we believe in, if he says anything, we will believe him. Because we have someone like Buhari, I do not believe in vaccines.”

This is not the first time Nigerians have refused vaccines to reduce the spread of disease. The Kick Polio out of Africa Campaign led to the rejection of polio vaccination in northern Nigeria following misinformation by northern leaders that the vaccine was contaminated with antifertility agents (estradiol hormone), HIV, and cancerous agents.

This brought the immunization campaign to a halt as leaders called on parents not to allow their children to be immunized. It took more years for the government to debunk the misinformation, additional funding, and strategies to produce oral polio vaccines that were later accepted.

In 2017, misinformation about the Nigerian army injecting children with vaccines that inflict monkeypox spread in southeast Nigeria, disrupting the immunization programme of the Nigerian Armed Forces.

**Implications Of COVID-19 Misinformation**

Onyebuchi Onovo, an epidemiologist and technical assistant to the Presidential Steering Committee on COVID-19 said the spread of misinformation, which has influenced the people to reject the vaccines, would prolong the fight against COVID-19 in Nigeria.

“Vaccines are lifesavers and it has been proven to be so over time,” he said. “The low uptake of the vaccine means that the vaccine will continue to linger or continue to be within the population.”

He said one of the best strategies of addressing COVID-19 misinformation is giving out credible information at the right time and through the right sources, which included the government, religious leaders, and traditional rulers.

“These are people at the local levels who have presence and influence. If a traditional ruler comes out to say that these vaccines are safe and I encourage you to receive the vaccine, of course, the majority of the followers will receive them. The same with a religious leader.

Ani says unless she is well enlightened and sensitized, she will not take the vaccine, adding that there is a lack of awareness on the part of the government and health workers.
“The mistake they [health workers] made was to send the vaccine to people without enlightening them and telling those more about the vaccine,” she said. “I feel there should be proper awareness about getting people convinced before bringing the vaccines to the rural areas.”
Pastor Enoch Adeboye, a respected cleric in Nigeria created a major concern for officials promoting adherence to global health protocols and public vaccination against the coronavirus when he publicly endorsed the activities of Yahaya Bello, a sitting governor in Kogi state, North Central Nigeria.

The pastor who visited the Governor late last month at the Government House in Lokoja, the Kogi State capital, said the actions of Yahaya Bello towards COVID-19 show that the Governor “is a man of faith,” but conversely, the Governor has on several occasions engaged in misinformation campaigns and dangerous claims about COVID-19 and the vaccines.

We reproduce some of those claims here and fact-check them.

**Claim 1**

In a video shared on the messaging app, WhatsApp, and microblogging site, Twitter, Yahaya Bello repeatedly downplayed the effect of COVID-19, calling it a “common flu.” The Governor further claims that “90% of the noise about COVID is around political and financial...gains and the remaining 10% is common flu known as cold.”

Bello encourages people with known COVID-19 symptoms like cold and catarrh to “take garlic”, a claim that is continuously being shared to this day.

**VERIFICATION:** In debunking the Governor’s claim that garlic cures COVID-19, we first confirm the authenticity of the video by running a reverse video search using inVID, an online video verification tool. The search takes us to the official Facebook page of the Governor. The video now has about seventy thousand views, with about seven hundred comments and more than two thousand reactions.

Having verified the authenticity of the video, we begin debunking the claims by entering the keywords ‘garlic+COVID+WHO’ into Google’s search engine. Our search takes us to the website of the World Health Organization (WHO).

Addressing the claim on the organization’s ‘Science in 5’ campaign run on WHO’s website, Dr. Sylvie Briand, Director Department of Global Infectious Hazard Preparedness of the WHO said;

“So far we have no evidence that garlic is a treatment for this disease. Some studies are studying it but again we need to crosscheck the different studies before making any recommendation about garlic. What is for sure is that the abuse of garlic is not good.” She said
Combating COVID-19 Misinformation in Nigeria

COVID Not Just Political Noise

COVID-19 has so far shown itself to be more than just “political and economic” noise—it has caused ruins and shut down nations and economies.

On the human side of things, The WHO coronavirus dashboard shows almost 170 million confirmed infections (as of 30th May 2021) and more than 3 million deaths (as of 27th May 2021). Also, data from the Nigerian Center for Disease Control (NCDC) shows that Nigeria has recorded about 166 thousand confirmed cases and a little over two thousand deaths.

The virus has also claimed notable politicians and businessmen in Nigeria, including Abba Kyari, the then Chief of Staff to President Muhamadu Buhari, who Bello mentions in the video, Senator Abiola Ajimobi, former Governor of Oyo State, Waheb Adegbenro, the Commissioner for Health in Ondo State amongst others.

Claim 2

The Kogi State Governor is seen in a widely circulated video claiming that the COVID-19 vaccine is being used to introduce diseases that will kill people. Governor Bello in the video discourages citizens and residents of his state from taking the vaccine.

His words; “They want to use the vaccines to introduce the disease that will kill you and us. God forbid!”

Bello who is a graduate of Accounting further questioned the swiftness with which the COVID-19 vaccine was produced.

“These vaccines are being produced in less than one year of COVID-19. There is no vaccine yet for HIV, malaria, cancer, and for headache,” he said amidst a crowd of his supporters.

VERIFICATION: The video is sourced from the YouTube page of the popular Nigeria news platform, Sahara Reporters. Bello seems to be addressing a crowd of supporters in what looks like a political rally.

As to his claim on the vaccine causing illness, checks on the website of the Center for Disease Control, CDC, the United States health protection agency, that his claims are false. The CDC insists approved COVID-19 vaccines are safe and that it helps “our bodies develop immunity to the virus that causes COVID-19 without us having to get the illness.” Although some persons who got the virus might develop feverish symptoms, the CDC explains that it is a sign that the body is now building immunity for the virus.

Why So Fast And How?

Entering the query ‘Why was the COVID vaccine developed so quickly?’ on the google search engine will bring up many results, including a University of Chicago news explainer of how they managed to have a vaccine in such a short period. Researchers
from the university explained that a combination of hugely available resources and previous research on the previous research in the One MERS vaccine (MVA-MERS-S) played a part in making the COVID-19 vaccine.

The CDC insists that all COVID-19 approved vaccines followed the process for the development of vaccines.
Erabor is an evangelical Pentecostal Christian living in Lekki, an affluent suburb in Lagos for the widely travelled, well-educated upper-middle-class Nigerians.

She does not trust the speed with which they produced these vaccines. "And these mRNA/DNA vaccines that change a person's DNA nucleus are a "no-no", she says.

She adds she will not be taking any vaccine made from aborted fetal tissues. But, she need not worry, vaccines cannot alter DNA because it does not function that way.

These claims are false, and only a few of the misleading information about COVID-19 vaccines found in social media communities. No matter how many times they debunked these, they continue to inform vaccine choices.

Nigerians are at risk of the dangers of false information as they are from the virus. Like most of the world, the country is experiencing an infodemic.

Even as COVID-19 vaccination campaigns are ongoing, false information on these vaccines spread even faster. These sources of false information are often people within social networks of trust. They are family and friends or influencers on whom they rely.

For many Nigerians, it is the religious leader. For Christian evangelicals, it is the pastor, the overseer, the man of God.

When these pastors misinform on vaccines or other issues on health and well-being, their followers consider it factual.

This hesitancy for COVID-19 vaccines is because of false narratives and misinformation about the vaccine, especially by influential evangelical Pentecostal pastors. Some of these pastors spread disinformation, not only from the pulpit but through social media. In videos and recorded sermons distributed on closed groups like WhatsApp or even open groups on Facebook. Some of their claims have become hashtags and memes on Twitter.

Yet, no matter how ridiculous the claim might be, their followers believe them and decide on these vaccines from what their pastors preach.

Professor Ajala, a medical anthropologist from the University of Ibadan, speaks of an intersection between religion and health advocacy. He says that many of the doctrines of religion favour well-being, with strong implications for the religious because they see their religion as an emotional and tangible resource. And when the science around health interventions are unclear or misinformed, people find comfort and hope in religion.
Some estimates have Nigerians almost evenly split between Christianity and Islam, making religious leaders powerful influencers.

In late March, the country sent some vaccines to Ghana and Togo to avoid them expiring. These vaccines supplied had a short shelf life. AstraZeneca vaccines, for instance, could be stored in the refrigerator for six months, but on arrival to Nigeria, it already cost months of storage.

Since Nigerians were reluctant to take these vaccines, it served better to send them to other countries.

Nigeria is collaborating with other African countries and international agencies with others for vaccine delivery by the end of July. The aim is to ensure their goal of vaccinating 20% of the population.

Osagie Enahire, Nigeria’s Minister of Health, says they are working with COVAX and the West African Alliance (WAHO) to get enough vaccines to vaccinate approximately 40 million people this year. There is also a partnership agreement with the African Vaccination Acquisition Task Team organised by the African Union, to secure these vaccines at a lower rate. It only works if African nations can source for these vaccines together as a collective.

However, there is a challenge, Nigerians are hesitant about the vaccine.

Data from the National Primary Health Care Development Agency (NPHCDA), in charge of vaccination campaigns in Nigeria, says that only half (50%) of the population are willing to get vaccinated. But we need to vaccinate at least 70% to achieve herd immunity.

You can see the influence of evangelical Pentecostal Christianity in Nigeria as you walk along any street in urban areas. Take Lagos, for example, there’s a church in almost every street, and the crusades cause so much traffic that Lagos is uninhabitable than usual.
Pastors Chris Okotie, David Oyedepo and Chris Oyakhilome are mega pastors that top the list of super-spreaders of disinformation around the vaccine.

Chris Okotie, the founder of the Household of God Church International Ministries said the COVID-19 vaccine will turn people into vampires. In a video he shared on WhatsApp, which eventually went viral, he claimed to prove, in inexplicable equations, that the names of the members of the Gates family (Bill Gates, his wife and son) show a relationship between the family, COVID-19 and the antichrist.

He also believed that wearing a mask in the church creates a barrier between God and man.

Pastor Chris Okotie is a lawyer and a popular musician in the 80s. He is not a qualified scientist. Yet, his followers believe him.

Okotie is not the only pastor employing equations with no meaning to prove conspiracy theories.

These pastors have millions of followers and vast information networks to spread misinformation and disinformation around the COVID-19 vaccine.

These men are neither scientists nor epidemiologists, so why do people believe them as authorities on COVID-19 vaccines?

Another famous pastor peddling COVID-19 disinformation is Chris Oyakhilome, the charismatic leader and founder of Christ Embassy Church who believes that pastors who support the vaccine betray their faith in God’s healing power.

In the months of lockdown in Nigeria, he went viral for a sermon that blamed the virus on the new world order, the antichrist and the false claim that the 5G network causes the COVID-19 virus and the vaccine injects trackable nanochips into humans, making them cyborgs.

It reads of the vivid imagination of a child obsessed with movies and believes it is all true.

He continued spreading disinformation on COVID-19 between April to September as Nigeria’s COVID-19 cases rose.

On the 5 April 2020. He published his video on 5G technology on his YouTube channel. A month later, it had 148,000 views.

But it was not well-received by non-members.

In his defence, his followers started the hashtag #IStandWithPastorChris on Twitter.

Experts say that people ascribe a prophetic quality to movies when something happens in reality that can echo a film plot. The case of art becomes life. It explains renewed interest in the 2011 pandemic film Contagion in the early months of the pandemic.
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Oyakhilome is a charismatic televangelist and a firm believer in the new world order, an ideology that a cruel, one-world government will exist by the end of times to end freedom, democracy and Christianity, the world as we know it will be over.

This government will also brand unbelievers or negligent Christians with the “mark of the beast”.

Oyakhilome owns a media enterprise that includes a very effective digital media team and a social media app, Yookos.

As 2020 rolled by with the possibility of breakthrough vaccines and social media censoring, he began spreading conspiracy theories about the vaccine within his digital media space and discussions about mis- and disinformation around the vaccine spread unchecked on Yookos.

He accused pastors and Christians who accepted the vaccine of losing faith in God’s healing power.

**Open Source Investigation (OSINT)**

It is important to see the network of support that confirms Oyakhilome's position on the virus and his theories about it. So I checked.

First, through advanced searches on Google, Yandex and Twitter, then through Hoaxy, a fact-checking and visualization program.

Using Twitter advanced search, I traced tweets and patterns of Christ Embassy members on two different hashtags they supported, the #IStandWithPastorChris and #NotoVaccineForWork.

Some accounts have a large following from 10000 to 98000.

What many of these accounts have in common is their descriptive bio. They also share these keywords, LoveWorld, Righteous, First Flight Gang, First Flight Ready or some other variation of First Flight. I learned First Flight means Rapture. So First Flight Ready is Rapture Ready.

For this investigation, I spoke with a young Christ Embassy pastor who permitted me to use his comments on Twitter, but he declined to comment on his role as a pastor within the church.

Pshegs, on Twitter, is a dedicated anti-vaxxer, anti-COVID vaccine at least, and he is a super-spreader of misinformation and disinformation on COVID-19 and COVID-19 vaccines.

During our brief chat via WhatsApp, I mentioned that Pastor Chris's theories about the vaccine were false and considered misinformation and disinformation.

He disagreed, saying that "It is misinformation to conclusively assume that his points are mis / disinformation, especially when there is abundant information out there, and several flip-
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flopping from WHO (most recent, Social Distancing). Let me know when you have any debates around the corner. I’ll sit on science to debate this, outside Christianity. Thanks and enjoy the rest of your day!”

Hoaxy diagram showing connections to pshegs twitter account

A study of social media engagements on Facebook, Twitter and YouTube shows that replies to posts, shares, likes and retweets by Christ Embassy Church or Pastor Chris’s account are predominantly by church members all over the world. It tells of an information echo chamber and bubble created within the digital Christ Embassy community where information, authentic or not, supports their shared beliefs.

What then is a bubble and echo chamber? We often use these terms in a digital investigation to understand the process of information in a community.

An echo chamber is an environment where you only experience information that reflects and reinforces your own. You are in a bubble when you find you interact and share ideas and information only with people who have the same views as you do. It encourages confirmation bias and spreads misinformation which twists our perception until we cannot consider contrary opinions or even discuss complicated topics.

These pastors are not without social influences, and just like their followers, they also exist in a bubble. I analyzed Twitter and Facebook postings and engagements of Oyakhilome and Oyedepo, two preachers famous for prosperity gospel sermons and miracle healing. Using Hoaxy, I found connections to famous American televangelists who preach prosperity gospel sermons and miracle healing like Kenneth Copeland, Benny Hinn and Paula White-Cain. These pastors hold similar religious views to anti-coronavirus vaccine pastors in Nigeria.
Kenneth Copeland claimed to heal COVID-19 patients through the television and criticized pastors who moved their services online for safety. When he moved online, he and Paula White advised their followers to keep the cash offerings and donations coming.

Paul White-Cain was former President Trump's spiritual advisor. She went viral for her passionate public prayer calling on African Angels to intercede for Trump in the past US election.

In March, Pastor Chris and Benny Hinn held a global day of prayer against coronavirus. Benny Hinn had wrongly predicted that the death toll for the virus will peak at 5000 and phase out.

*Deaths by COVID-19 have surpassed 3million worldwide.*
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Olatunji Oluide, a public health professional in Lagos, says that church leaders are valuable and necessary to dismiss myths around the COVID-19 vaccine. Without the help of religious leaders, many will hesitate or refuse to take the vaccine. He is part of the team monitoring the effects of misinformation/disinformation on vaccination efforts in the state.

The World Health Organisation says that the more vaccinated people in a community, the quicker that community achieves herd immunity.

Herd immunity is the idea that vaccination can control the spread of a virus. Vaccines teach our body to recognize and fight viruses and germs to keep us from getting sick from them in the future.

**Fact-Check**

mRNA exists in all living organisms. There’s a simple description of the mRNA on GAVI’s website. The mRNA is strands of genetic codes that instruct our cells to make proteins our body needs to function. But it is not the same as DNA. They have different chemical structures, like water and oil, it’s impossible to mix with our DNA or even change it. Besides, our body gets rid of it after 72 hours, by then its work is done.

GAVI is the vaccine alliance working to make sure that even the world’s poorest countries get vaccinated.

It may seem worrisome on the surface that this vaccine technology was approved so quickly when we are just getting to know about it, but in reality, there have been many studies of DNA and mRNA vaccines in humans and animals.

They published the first report of a successful mRNA test in 1990 when mRNA injected into mice produced the required protein. Scientists behind Moderna have been working on this technology for 15 years, hoping to vaccinate against the Nipah virus, then came COVID-19.

Vaccines like Pfizer/BioNtech and Moderna use messenger RNA or mRNA technology.

**COVID-19 Vaccines**

As it stands, vaccines are the only way to keep us safe. There are a few vaccines approved by WHO for emergency use for COVID-19. You can find a list of these vaccines on their website.

The AstraZeneca-Oxford vaccine administered in the country already, and Johnson & Johnson vaccine use viral vector technology in production. This is a method of vaccine production where the vaccine is created using a virus (vector) that has been made safe for humans.

They produced the AstraZeneca vaccine by inserting a tiny piece of genetic code from the COVID-19 virus into a deactivated adenovirus. The code tells our cells to make a
Combating COVID-19 Misinformation in Nigeria

single protein of the COVID-19 virus which the immune system recognizes and produces antibodies to attack the virus if we ever come in contact with it.

Vaccines must be safe and efficient to prevent disease and infection. They pass through different phases to determine if the vaccine is safe and capable of preventing diseases or infection or both.

First, the preclinical phase or animal testing phase, if this is successful, they move on to three clinical trials. They conduct the first phase of the trials with a small sample size of fewer than 100 people. If this is successful, then phase 2, increasing the sample size to 100-1000, and if there is a breakthrough, the sample size increases to the tens of thousands for phase 3.

There are several other steps involved in this but, if all goes well and there is a pandemic, they get approved for emergency use authorization.

In Nigeria, before they administer vaccines to the public, NAFDAC, Nigeria’s drug and food agency, must license it. Licensing takes 120 working days.

In an interview with Channels Television, Moji Adeyeye, the NAFDAC Director-General said WHO must declare vaccines outside Nigeria safe for use before they consider it for NAFDAC approval.

For this to happen smoothly and efficiently, WHO presents NAFDAC with enough data to decide for Emergency use authorization.

Not all evangelical Pentecostal pastors are anti-vaccine. Pastors like Paul Adefarasin, Senior Pastor of House on the Rock churches. He suffered a loss to coronavirus and preaches in the church and on social media on vaccine acceptance. Tony Rapu, a trained doctor and senior pastor of the House of Freedom whose workers organised a COVID-19 awareness campaign educating traders on safety protocols while distributing face shields and face masks.

Religious leaders who are pro-COVID vaccines inspire pro-vaccine followers.

Or at the least, people who develop the -wait and see- approach. These people wait to see how the vaccine affects their family, friends, and neighbours.

If they judge the outcome positively, they get vaccinated too.

The Pentecostal Fellowship of Nigeria, the national body that oversees Pentecostal churches in the country, encourages vaccine acceptance and safety protocols. In February, it held a virtual conference on COVID-19.

According to their Facebook page, it was to encourage prayers and faith in these times. Showing that you can listen to science while holding on to your faith.

One does not negate the other. Besides, religious faith promotes well-being.
CAN EATING BANANAS PREVENT COVID-19 INFECTION?

BY OPEYEMI KEHINDE

A video circulating on multiple WhatsApp groups in Nigeria, which claims that eating a “Banana a day keeps the coronavirus away,” has been found to be doctored with false claims.

The video, which was made in form of a news broadcast clip, recommends that eating a banana a day can help prevent humans from being infected with the novel coronavirus (COVID-19).

For over 15 months, the video has been in circulation on various social media platforms including TikTok, YouTube, Facebook and until recently Twitter and WhatsApp platforms in Nigeria.

The video, which has been forwarded several times on WhatsApp between May 2021 and June 2021, was traced to a March 15, 2020 post on Facebook here using reverse image search. It has been viewed over 2,700 times on the Facebook page and now circulates widely on WhatsApp.

It’s one of the several videos spreading misinformation about the COVID-19 pandemic which has claimed over 3.8 million deaths with about 176 million confirmed cases globally as of 15th June, 2021, according to the World Health Organisation (WHO). These numbers continue to rise daily.

Since the outbreak of the disease in December 2019, many social media platforms, especially WhatsApp chat groups and Facebook have become vehicle for spread of misinformation, disinformation and conspiracy theories about the COVID-19.

For instance, if you use WhatsApp regularly, you might have received some viral texts, images or videos asking you to forward it to as many people as possible.

Some of such viral WhatsApp videos or texts include those which claimed that drinking palm oil or hot water, tea, several times daily can cure COVID-19, or that mRNA COVID-19 vaccines can reduce lifespan, or that the Nigerian government is giving out COVID-19 survival funds etc. These, among others, have been debunked by the ICIR’s FactCheckHub.

**The Banana Claim**

The claim reads:

“Bananas are one of the most popular fruits worldwide, such as Vitamin C. All of these support health. People who follow a high fibre diet have a lower risk of cardiovascular disease. Bananas contain water and fibre, both of which promote regularity and encourage digestive health.

“Research made by scientists from the University of Queensland in Australia have proven that bananas improve your immune system due to the super source of Vitamins B-6 and helps prevent coronavirus. Having a banana a day keeps the coronavirus away.”

A screenshot of the viral WhatsApp video showing the false claim.

The claim was attributed to researchers from Australia’s University of Queensland adding that they discovered that bananas can help prevent COVID-19 infection.
Same video, same claim but many edited versions

The 58-second video which shows a news report by the Australian Broadcasting Commission (ABC), with the same banana claim, has been edited severally especially by a TikTok user, @dil_ka_raja2020 and YouTuber to include these texts inscriptions: “Bananas can beat this virus, Must Watch”; “Banana a day keeps the Coronavirus away.” He has over 12,000 followers with over 167,000 likes on his TikTok page.

Also, an edited 27-second version of the video posted from Pakistan on YouTube on 14th March, 2020 has also been viewed 318 times.

A screenshot of the fake video when analysed using an OSINT tool – InVid

OSINT to The Rescue?

In verifying this video, this reporter utilised the Open Source Intelligence (OSINT) tools to unravel the spread of this misinformation and authenticate the sources of the visuals put together in making the video.

Using keywords such as banana, COVID-19, this reporter used Hoaxy® to visualise the spread of the information on Twitter, as shown below:
The data shows that texts containing the keywords have appeared in 465 tweets between 12th November, 2020 and 26th May, 2021, majorly from a Twitter user, @mb4hope. But the Twitter handle has been suspended and it is unclear why the social media platform did that.

Similarly, this reporter used the Fake news debunker (image/video verification plugin) by InVID & WeVerify to analyse the visuals’ keyframes and contexts as well as its reverse image search tool to identify the sources of the various clips/images merged together in making the video.

*Keyframes analyses of the video using the Fake news debunker plugin by InVid.*
The InVid tool helps journalists to verify contents posted on social media especially when verifying videos and images.

Findings show that the video contains several footages from at least four different sources.

The first footage in the video was truly from an ABC news clip which reported that researchers from Australia’s Queensland University are about to create a vaccine for the COVID-19. It was aired in January 2020.

Following a Google Reverse Image Search of this footage after extracting the keyframes using InVid – one of the OSINT tools, this reporter found the ABC news clip titled: “Race is on as Australian researchers rush to make coronavirus vaccine” on its official YouTube channel.

This reporter also discovered that the opening keyframes of the ABC News’ YouTube video (as shown on the LEFT screenshot) is similar to the first keyframe of the viral WhatsApp video (as shown on the RIGHT image). See the comparison of the two videos below as circled in red lines:

However, there is nowhere in the three-minute 39-second ABC News (Australia) video where it made reference to bananas beating or preventing the COVID-19.

The Associated Press (AP) had earlier reached out via email to a University of Queensland spokesperson who confirmed that “the video is fake and said they strongly recommend people do not share it.”

Similarly, a Queensland University scientist, Dr. Keith Chappell, who discusses the university’s efforts to develop a vaccine against the novel coronavirus in the ABC News video had also told the AFP that the banana claim video “is definitely NOT true.”

In addition, video footage from the eighth to tenth seconds of the misleading WhatsApp video was seen on the Shutterstock videos website, using Reverse Image Search – another OSINT tool.
Further findings show that the footages from the twelfth to twenty-third seconds of the viral video were extracted from a YouTube clip made by Herbs Cures titled: “Health Benefits of Banana” and uploaded online on March 1, 2020.

Also, the ‘Herbs cures’ logo can be seen in the viral video. The ‘Herbs Cures’ video only listed benefits of bananas and did not claim that bananas can prevent COVID-19 in the four minutes, thirty-eight seconds video.

Additional analysis also shows that the footages from the twenty-fourth to thirty-first seconds of the viral video were extracted from a news video published by the Wall Street Journal (WSJ) in February 2020 titled: “How Scientists Are Trying to Develop a Coronavirus Vaccine.”

The four minutes, seventh seconds WSJ video did not claim that bananas can beat or prevent COVID-19.

Moreover, the claim has been debunked by other fact-checking and media organisations here, here, here, here, here, here and here.

Can Any Food Or Fruit Prevent One From Being Infected With COVID-19?

No! According to WHO, “there is no single food that will prevent you from catching COVID-19”, but bananas do have nutritional values.

Although the global health body has a nutrition fact-sheet for healthy diet that protect against malnutrition and noncommunicable diseases (NCDs) such as diabetes, heart disease, stroke and cancer, it said there’s none that can protect against COVID-19.
Scientists also advised that maintaining good nutritional status can help boost one’s immune system against COVID-19, adding that there’s no evidence any food or supplement prevents infection or spread of the disease.

“Bananas are a fine fruit and garlic is a fine vegetable. But no. There are no clinical trials to suggest they have anti-coronavirus activity. Vitamin-C is not even a fruit or a vegetable,” says Dr. Faheem Younus, an infectious diseases expert from the University of Maryland, United States.

However, here are WHO-recommended steps to prevent the spread of the COVID-19.

Conclusion

The claim is FALSE! There is no credible evidence that eating bananas can beat or prevent COVID-19 infection.

The viral WhatsApp video was doctored from two news reports by the ABC News and WSJ respectively, as well as other video footages, to include references to bananas.
COVID-19 VACCINE: RELIGIOUS PERSPECTIVES AND ITS IMPACT ON VACCINE HESITANCY

BY SEKYEN DADIK

In a video premiered on YouTube through Apokalupsis Channel on 12 July, 2020, titled ‘The Mystery of Corona’, Reverend Chris Okotie said taking the COVID-19 vaccine means going into an agreement with Satan and the vaccine will make the recipient become a vampire.

Christopher Oghenebrorie Okotie is a Nigerian televangelist and the pastor of the Household of God Church International Ministries, a Pentecostal congregation in Lagos since February 1987.

The full video, which had 374,322 views as at 2 June 2021, had transcripts and videos shared on different mediums, it read in part:

“The vaccine on the other hand, brings the liquid to you, just like the blood, and it is injected into you. So, it is received into you, because, when you drink the wine, it goes into your system, so that when you consume the GMO’s, and you receive the vaccine, you bring the body and blood together; so to speak, just as it is in communion; the body of Jesus Christ and His blood. That’s what replicates that pattern.

“So, what Bill Gates is doing under the auspices of the United Nations, is to make sure that you receive the food …

So, when you eat the genetically modified organisms…… and you take the vaccine, you’ve entered into communion with Satan, with Lucifer, and that communion involves blood……and the only place that you can find blood, is another human being. So, one of the things that the vaccine will make you do, is to become a ‘vampire’, who needs to drink blood for sustenance”.

“…. because the drugs inside this vaccine, will make you a zombie; you are a walking cadaver, you’re neither dead nor alive, so, you can be controlled by the power of Satan … Zombified, so he can control you”

A fact checked report by Niyi Oyedeji on FactCheckHub shows the claim by Okotie is false.

Niyi quoted the World Health Organization (WHO), thus: “vaccines train and prepare the body’s natural defence, otherwise known as the immune system, to recognise and fight any targeted virus or bacteria, vaccines are a critical new tool in the battle against COVID-19 and it is hugely encouraging to see so many vaccines proving successful and going into development.”
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Though side effects such as fever, fatigue, headache, muscle pain, chills, diarrhoea, and pain at the injection site have been recorded according to WHO, becoming a vampire is not one of them, he noted.

Findings

An open source intelligence search to unravel the flow of misinformation network on COVID-19 online using Hoaxy; an application that visualizes the spread of information on Twitter, revealed a tweet by EyesOnQ titled: We Don’t Need No Stinking Vaccine for COVID-19. Though the account has been suspended, it has over one thousand retweets as at June 2, 2021. The search also revealed that the article referred to in the tweet was published on Zero Hedge website on Friday, Jun 12, 2020 and had the by-line of Tyler Durden but Authored by Jeff Harris via The Ron Paul Institute for Peace & Prosperity.

A further search on the by-line and website through Wikipedia revealed Zero Hedge in-house content is posted under the pseudonym "Tyler Durden" for Daniel Ivandjiiski; the founder and main editor and it is associated with conspiracy theories and fringe belief.

Impact

Nigeria is a religious country with devout followers having a tendency to adhere to teachings and positions of religious leaders. Historically, vaccine hesitancy as a result of religious stands was experienced during the Polio campaign vaccines, as many
clerics especially in northern Nigeria influenced their followers from administering Polio Immunization to their children.

Comments that followed Okotie’s Video show that a number of people are making decisions based on his position. One of the comments by Parenting Unusual with 43 likes reads: “This depth of revelation is explosive to the deliverance of mankind. Thank you immensely pastor for speaking out. Let’s be spiritually sensitive”.

Another by: Amaechi Obinna reads “This is a serious revaluation of COVID -19 from Pastor Chris Okotie. Thanks for this information with Biblical information and statistics”.

However, Isaac Edward Usman, a Medical Microbiologist and COVID-19 taskforce Epidemiology and surveillance officer with Kaduna state ministry of health countered the believes that the virus is not real and postulations that the vaccine was going to alter DNA, or make one impotent.

“On the issue of vaccine, there have been a lot of theories over the virus and vaccine. Some felt it was going to change their DNA, some felt it will make them impotent; while some believe the virus does not even exist why take the vaccine. There were a lot of postulations going around social media and news, there were also series of discussion by different groups, videos on social media even from western world against the vaccine.

“They must understand that the virus is real, actually, corona virus has been in existence for a long time but this particular strain named COVID-19 of the corona virus family is a novel virus and prevention is better than cure, so we have to be very careful and take all measures to avoid contracting the virus, including vaccines because it is real!”
Conclusion

Corona Virus is real and being vaccinated remains one of the ways of curbing the pandemic. Though there are side effects in some recipients, taking the vaccine does not make the recipient a Vampire or a Zombie.

WHO has assured the public that it is working tirelessly with partners to develop, manufacture and deploy safe and effective vaccines.

In tackling Vaccine Hesitancy, it must be noted that: “Safe and effective vaccines are a game-changing tool but it’s not vaccines that will stop the pandemic, its vaccination” WHO.
Tomi’s appetite mirrors one that was at a needy junction, judging by how she dipped the morsel of hot amala – a yam flour meal popular in South-western Nigeria – into the plate of soup and guided it into her mouth.

The choice of amala with a combination of gbegiri and ewedu is a no-brainer for the young lady, it is one of her favourite meals, she informed me. The 25-year-old also shared with me, “I can eat amala and ewedu throughout the day, now that I know that ewedu can cure Coronavirus,” this was at the time when the COVID-19 virus was in its second wave in Nigeria.

I asked her where she heard that Ewedu could cure the deadly virus that had claimed about 1,300 lives in Nigeria as at first day of 2021, she replied, “I saw it on one WhatsApp group where I am a member, the admin posted it there,’ but she could not remember when she saw the timeline of when the post was shared on the group. At the time when I was interrogating her, the server had already brought my meal order, so I shifted concentration to the plate of fried rice before me but the thought of when Ewedu became a cure for Coronavirus never left my mind.

**What Is Ewedu?**

The green leaves which belongs to the Corchorus olitorius species and called Jute mallow in English is commonly used as a vegetable in Middle Eastern, North African, East African and West African countries. In South-western Nigeria, it known as *ewedu*, Egyptian and Tunisian call it *molokhiya*, well-known in Kenya as *murere, murenda, or*
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*apo*th in several regions while Sierra-Leoneans identify it as *kren-kre* or *kraint kraint* but you can still find it in Liberia where locals call it *palaver sauce* and in The Gambia, it is referred to as *kereng-kereng*.

Jute leaves is prepared using traditional recipes and eaten in several ways across these two continents but the constant about it, it is rich in several nutrients such as folate, beta-carotene, iron, calcium and vitamin C, according to research published by two food scientists in 2010.

**Origin of the Claim**

The claim went viral on Facebook, Twitter and WhatsApp with an article published by ARAB TIMES on April 6, 2020 which stated that scientific studies have proven that molokhia leaves contain flavonoid that helps zinc to enter into the virus-infected cell and prevents the reproduction mechanism of its RNA genetic material to stop the virus from reproducing inside the body.

*Source: The Wayback Machine*

Dr Fahd Al-Najjar, a consultant for Internal Medicine and the Digestive System at the Thunyan Al-Ghanem Center at the Amiri Hospital in Kuwait was identified as the researcher who made the scientific breakthrough reported by Al-Rai Daily.
On WhatsApp, it was shared as a JPG image containing the wordings, “In short, Krain krain has flavonoid that aids the absorption of zinc in the body. Zinc can enter the virus infected cells and stop corona virus from reproducing. Good news. Eat African! Ewedu,” with the short link article title, “‘Molokhia leaves help curb reproduction of coronavirus’ – ARAB TIMES – KUWAIT NEWS.”

Tracing the Internet History of the Claim

AN #OSINT search through Facebook post using graph tips search revealed zero search result, however, a Google reverse image search of the image used in the article revealed several outcomes, showing that the post about Molokhia leaves being a cure for Coronavirus first appeared on the social media platform on May 10, 2020 on a public group called United States of Nigeria which had about 1,850 members, the post had four (4) reactions, one (1) comment and eleven (11) shares.
On that same date, the image was also posted on another public group titled **TALAKAWA’S PARLIAMENT (TP)** which had over 2,900 members but had zero engagement.

Source: Facebook/Adevision2015
The same image was shared on January 22, 2021 by one, Ade Eye Clinic but had zero engagement.

Source: Hoaxy

Using the Hoaxy search engine tool for Twitter, it was discovered that 281 users on the microblogging platform had tweeted or retweeted something about ‘ewedu COVID-19 nigeria’ and ‘molokhia COVID-19 nigeria’ between June 2020 and July 2021.

Source: Hoaxy
Also, use of same tool with keyword variation ‘molokhia coronavirus nigeria’ and ‘ewedu COVID-19 nigeria’ revealed that over 950 users had used the platform between June 2020 and April 2021 to share same information on the disease and vegetable.

Source: Instagram

On Instagram, a traditional search was conducted using #ewedu which had over and #molokhia had over 7,100 posts, however, only two users bldafricancookhouse and plantainflour.chic posted the image on their pages in 2021.
Verifying The Claim

According to home scientists, Molokhia is the powerhouse of nutrition as the research conducted by food scientists, Bhawana Dayal and Singh Neetu in 2015 revealed that a 100 g of molokhia leaves contained Carotene 10,000 μg, Calcium 500mg, Potassium 650mg, Iron 3.8mg, Vitamin B1 0.24mg, and Vitamin B2 0.76mg. The food scientists also confirmed that molokhia leaves as a nutritional component that includes fibre, potassium, iron, calcium, magnesium, phosphorous, selenium, niacin and vitamin C, E, K, B6, and A.

Also, a research conducted by a group of academies and presented at a home economics conference in 2018 also tested for nutritional content in 100g of molokhia leaves powder, the result showed that it contained niacin 898mg, vitamin B6 204mg, pyridoxin 137mg, folic acid 226mg, vitamin B12 496mg, vitamin A 145mg, vitamin C 79mg, vitamin D 13mg and vitamin E 0.42mg.

But, the viral claim stated that molokhia leaves contain flavonoid.

What is Flavonoid?

According to a group of Brazil chemists who wrote a book chapter on plant properties where flavonoids were described as low molecular weight polyphenols that are usually brightly coloured as a result of their absorptions of UV light and most commonly associated to antioxidant properties.

As seen in the table above, the phenolic compounds tested for in Molokhia leaves showed that there are elements of polyphenol and phenolic compounds inside it.
What Are The Benefits Of Molokhia Leaves?

Early researchers have identified molokhia leaves and other vegetables with the nutrients like flavonoids and antioxidants are protective against several life-threatening diseases, particularly cardiovascular sickness and certain types of cancer. In 1990, a research paper published in peer-reviewed journal, FEBS Letters stated that food-derived flavonoids such as the flavonols quercetin, kaempferol and myricetin reduces cancer risk, recall that Molokhia leaves have a presence of flavonols quercetin as mentioned in the viral article.

A recent study conducted by a group of Korean food technologist and published in a peer-reviewed journal in April 2021 examined molokhia leaves to see if it possessed health benefits that can improve intestinal health and the immune system. The results showed that the plant has immune-enhancing activity as it revealed high bone marrow cell multiplying activity and produced immunoglobulin A and cytokines when it was tested.

Does Molokhia Leaves Cure Coronavirus?

Molokhia leaves being identified as a cure for COVID-19 through the viral claim stems from the press statement released by the World Health Organization (WHO) on May 4, 2020 which welcomes innovations around the world including repurposing drugs, traditional medicines and developing new therapies in the search for potential treatments for COVID-19.

But, WHO maintained that establishing the efficacy and safety of these traditional medicines through rigorous clinical trials is critical and would be partnering with countries and research institutions to test selected traditional medicine products for clinical efficacy and safety for COVID-19 treatment.

However, a search of peer-reviewed journals did not turn up any recent publication – letter, journal or research – on molokhia leaves being a viable cure for Coronavirus.

The researcher also reached out to the Communications Manager of the WHO Regional Office for Africa to get comments on the state of testing for traditional medicines and list of herbal plants that have been considered but did not get any reply from the office.

But, when the researcher asked Dr. Laz Ude Eze, a health policy expert, if the presence of certain nutrients in molokhia leaves prevent reproduction mechanism of COVID-19 RNA in the body stated that, “even if the nutrients in molokhia improves intestinal health and the immune system, it does not automatically translate to affecting the multiplication or duplication of the COVID-19 RNA virus.”

Conclusion

Available evidence from medical professionals and food technologists revealed that molokhia has nutritional components that can improve intestinal health and boost
human immune system no supporting research to show that it can cure or prevent COVID-19. Hence, the viral claim is MISLEADING and FALSE.
FACT CHECK: DO COVID-19 HAMPER FERTILITY IN UNMARRIED WOMEN?

BY ADEOLA OGUNLADE

“I heard that COVID-19 vaccine affect the fertility of unmarried women and is something to really worry about especially for some of us who still want to give birth to children”.

Titi Akosa, is asking the question, at a training workshop for people involved in the vaccine rollout in Lagos. She got the information from a women’s group on social media.

Even though she works as a frontline worker for the Lagos health ministry, a false claim she fears would lead to vaccine hesitancy among unmarried women in the state.

The Workshop focused on the First Phase of Oxford AstraZeneca COVID-19 Vaccination programme and was put together for civil societies and media practitioners by the Lagos Civil Society Coalition Against COVID-19.

Records from the Lagos State the Ministry of Health COVID-19 Vaccine Analysis show that as at 22nd May, 2021, over 318,000 people have been vaccinated so far, according to estimates. The number of female who came out to receive the vaccines are 158,279 with males constituting 159,637.

To combat the novel COVID-19 virus that has ravaged the world in the last 16 months, the World Health Organisation (WHO) in December 2020 rolled out its first set of approved vaccines in parts of the world. As laudable and timely as the emergence of COVID-19 vaccines is, it has equally been undermined by so much misinformation among which is that it effects conception in women which is a concern for both unmarried women and married women who don’t yet have or plan to have more children.

How Then Did This Misinformation Originate And How Widespread Has It Become?

YANDEX fact checking tool shows different articles and pictures about the effect of the vaccines on women’s health. Different sources wrote for and against the claims with various pieces of evidence to buttress their positions.

Wikpedia.com, noted that false claims have also been made that a vaccinated person can “shed” spike proteins, which allegedly causes menstrual irregularities or other harmful effects on the reproductive health of unvaccinated women who are in proximity to them. These claims have been cited by the Centner Academy, a private pre-school in Miami, Florida, USA which removed vaccinated teachers from its classrooms and has refused to hire vaccinated teachers in the future. It was also on the basis of this false claim that some businesses in the United States of America have banned customers who are vaccinated from entering their facilities.
Further, a GMA Health Alert video posted on Yahoo.com by Dr. Sarah Humeen stated that some women have noticed temporary changes in their menstrual cycles after taking it COVID-19 vaccine, yet the evidence on the impact of COVID-19 on women’s reproductive health is far from definitive. According to Dr. Humeen, “with nearly 30% of U.S. adults fully vaccinated, scientists and doctors still don’t know why — or even if — vaccines might impact menstruation. However, they’re listening to women’s experiences, and calling for more studies to unpack any potential link. And, experts agree these changes are likely to be temporary, and there is no reason for women to worry about fertility”.

It should be noted that the majority of the articles and pictures posted on the Yandex cite were from medical personnel, governments and the country’s centre for diseases control explaining that the vaccine does not affect fertility in men and women.

Using the Yandex search engine, it appears that the misinformation about the link between COVID-19 and infertility in women may have originated from an article by Lance D. Johnson in Naturalnews.com. The article published on December 10, 2020 quoted Dr. Michael Yeadon, former President of the pharmaceutical giant, Pfizer to have said that ‘Pfizer’s vaccine studies are based on FRAUD and puts lives in danger; a claim reinforced (in same article?) by German lung specialist, Dr. Wolfang Wodarg.

To prove their claims, the two doctors filed an urgent application with the European Medicine Agency, the regulatory agency for biomedical practice and research in Europe warning in particular that while the BioNtech/Pfizer vaccine’s efficacy toward spike proteins of SARS-CoV-2 is a real measurement of immune reaction, it will also cause autoimmune issues as well, including the destruction of the female reproductive system.

The BioNtech/Pfizer vaccine they argue will produce temporary antibodies to coronavirus by attacking the spike’s syncytin-homologous proteins. By the 22nd of December, 2020, the petition written by the duo to the European Medicine Agency on beforeitsnews.com has been supported by at least 80,000 people across the world.

In a response by the European Medicine Agency (EMA) published on its website on the 6th of January, 2021 stated that EMA has recommended the approval of additional manufacturing and filling lines at Pfizer’s vaccine manufacturing site in Puurs, Belgium. The recommendation by the Agency’s Committee for Human Medicines (CHMP) is expected to have a significant and immediate impact on the supply of Comirnaty, the COVID-19 vaccine developed by BioNTech and Pfizer, in the European Union.

Based on the review of the data submitted by BioNTech Manufacturing GmbH, EMA’s decision reaffirms that the Puurs facility is capable of consistently producing high-quality vaccines and enables Pfizer/BioNTech to increase the volumes of vaccines produced at this site.
Its stated further that the EU has a comprehensive safety monitoring and risk management (pharmacovigilance) system, which ensures measures are in place for: providing advice to minimise risk; reporting suspected side effects; conducting studies after authorisation; detecting any potential side effects; conducting rigorous scientific assessments of all safety data and introducing any necessary mitigating actions early on.

As Titi Akosa noted earlier, there is growing concern within Nigeria’s medical and public health community about the web of misinformation regarding the harmful effects of COVID-19 vaccines, in particular, its link to infertility in women.

In an interview with this reporter, Consultant Obstetrician and Gynaecologist Dr. Samuel Oluwatosin Adu, he explained that there is no conclusive medical evidence he is aware of at this time that COVID-19 vaccine adversely affects the reproductive health of any woman or man of reproductive age.

He however noted that since COVID-19 vaccines have only been out for a few months, we cannot completely rule out any adverse effects which ongoing and future scientific studies may uncover. But at present, according to him, there is no evidence of direct correlation between COVID-19 vaccines and infertility; unlike with such Hematological disorders like blood clots where preliminary evidence exist with the administration of some vaccines but only in very small percentages of those who received the vaccine, many of which were traced to underlying medical conditions.

As Dr. Adu explained, “Infertility is the inability of a couple to conceive in regular penetrating capacity without any barrier within a year. So, we have not gotten to the one year mark that can cause infertility but there are other studies of hormonal profile of a woman who have gotten the vaccine. Are there abnormalities in their hormones? All these are still under study’.

Going forward, Dr. Adu stressed the need for a comprehensive database of everyone who has received the vaccine to help track any adverse effects on them.

According to him, “we should be documenting all of them so we can come with the right information. It is too early to say whether the vaccine affects people and how. Up until now, safety in fertility has been assured theoretically. There may be other side effects such as pain in the hand, swelling, headache, fever and the most dreaded is the blood clot. The link between COVID-19 vaccine and infertility is rumour; there is no scientific data to support that.

Yet, this has not stopped the rumour from spreading with anti-vaxxers often evading checks by prominent social media platforms to spread the misinformation. The list of possible side effects regularly communicated by health professionals to vaccine takers include fever, headache and sore arm for a day or two. Changes in menstrual cycle and side effects related to infertility are not included.

In a tweet by the c COVID-19 Vaccination Update stated that the 1st and second dose — June 2nd 2021, in 36 States + the FCT. 1,961,883 eligible Nigerians have been vaccinated with first dose while 148,258 of Nigerians but whether this misinformation
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has affected young women’s participation of the vaccination programme remains unclear.

In an effort to establish the impact of the misinformation on the link between COVID-19 vaccine and infertility, The Nation Newspaper, between May 15-25, 2021, carried out a mini-survey of residents of parts Lagos State. The survey of 20 unmarried women sought to ascertain their understanding of COVID-19, their perception about COVID-19 vaccines, their willingness to take the vaccine and whether the rumour around the vaccines link with infertility in women would influence their decision to get the shot. The young women surveyed are between the ages of 18 to 35 years and were drawn from three local government Areas in Lagos State – Ketu, Bariga and Alimosho.

According to the findings of the survey, when asked whether they are aware of the existence of COVID-19, 19 ((95%) out of the 20 recipients responded that they are aware and that they got the information through various social media platforms. 1 (5%) among the recipient said that she does not believe it exists.

17 People who make up 85% of the recipients of the survey said that they are aware that COVID19 vaccine exists. 3 (15%) persons answer that they are not aware that the vaccine exist.

However, 10 (50%) out of the 20 recipients of this survey are not ready to be vaccinated even when the present COVID-19 variants in India, Turkey and South Africa is worrisome globally.

The survey also indicated that 16 (80%) out of the 20 recipients responded that they are not aware of the rumour that the COVID19 vaccine affect the fertility of women of reproductive age. Only 4 (20) responded that they are aware of the rumour.

On whether the rumour about the COVID19 vaccines having a negative effect on the fertility of unmarried women is an issue to look at as 10 (50%) out of 20 recipients says yes, “the rumour can affect their chances of taking the vaccine while 4 (20) persons said that it will not affect their chances of taking the vaccine. 5 persons (25%) of the recipients of this survey are unsure and from their response, other factors may influence their choice of whether or not to take the vaccine.

It is clear the rumor is not the driving force of vaccine hesitancy among the women surveyed. It is evidence that although the women are aware of the existence of COVID19 in Nigeria, they are not willing to receive the vaccine. I believe that a more comprehensive data survey among a sizeable number of young women on why they are not interested in receiving the vaccines is imperative. The problem might be lack of trust in the government, or there is a communication gap in the COVID19 programme in Nigeria.
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PROJECT TESTIMONIALS

On the context

“I think we only really see the tip of the iceberg in terms of what is trackable - on social media, Facebook, Twitter…as a lot is being spread by WhatsApp groups and local communities”

– ARN Participant

On the ARN Training:

“Doing it all on zoom was also tricky, as you miss out on that spontaneous assistance that can be offered to people”

– ARN Participant

On ARN Achievements:

“The objectives set out by the ARN were achieved as we have a network of journalists now that can do verification and the stories they publish are of very high standard”

– ARN Participant

On ARN Complementing Participants’ Motivations:

“Before the program, I wasn’t keen on going the extra mile to verify information - but now I am. I want people to know the truth. Information is power”

– ARN Participant

On Importance of the ARN programme:

“Very important. To be able to identify fake news, and with the stories we have written, many of us have been able to do that”

– ARN Participant
On Skills Learnt:

“There was this video that trended weeks back, of students running away from the COVID-19 vaccine...but the video had existed since 2018...and in my training, I was able to...use the video to trace the origin and also map out every single person who posted that video on twitter”

— ARN Participant

“The tools from ARN have really helped me to grow in my research and writing. My experience has been great. I only knew the basics of fact checking when I joined, but now I know a lot more”

— ARN Participant

On ARN Mentoring:

“The OSINT mentors really helped out, to understand how to use network analysis in my work and how to bring it into my research and then of course editorial guidance, from my national mentor”

— ARN Participant
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PROJECT CONSULTANTS

Mentors

- **ARTHUR-MARTINS AGINAM, PH.D** is a Nigerian (Abuja-based) Communication and democratic governance specialist. Dr. Aginam earned a Bachelor of Arts (B.A.) Degree from the University of Nigeria, Nsukka; a Master of Arts (M.A.) in *Strategic and Public Affairs Communication* from University of Leeds, England (on British Chevening Scholarship) and a Doctor of Philosophy (PhD) in *Global Communications and Development (with a focus on Communication, Democratization and Governance in sub-Saharan Africa)* from Simon Fraser University, Vancouver, British Columbia, Canada. Dr. Aginam belongs to several international professional organizations and currently lectures in the Department of Mass Communication, Baze University, Abuja, Nigeria.

- **DAVID AJIKOBI (@Pantaphobious)** joined Africa Check as Nigeria editor in November 2016. He has more than a decade of experience across different media platforms. He was one of the pioneer News Editors/Producers at 99.3 Nigeria Info, 96.9 Cool FM and 95.1 Wazobia FM in Lagos. Earlier in his career, he was metro editor at NEXT Newspaper (234next.com) published by African-born Pulitzer Prize winner, Dele Olojede. David has a masters degree in media and communications from the Pan Atlantic University, Lagos.

- **OBIORA CHUKWUMBA, PHD** (Media Arts), University of Abuja is co-founder of HumAngle Media (www.humangle.ng). He began his journalism career with African Concord, a publication of the Concord Press of Nigeria, which he eventually rose through the ranks to edit before joining TELL magazine as Senior editor. He co-founded Insider Weekly, a news magazine, later moving away from the newsroom to the Federal Public Service when he joined the National Film & Video Censors Board.

- **RALIAT AHMED-YUSUF** is the Managing Editor, LEADERSHIP Newspapers .A graduate of Chemistry/ Biochemistry from Federal University of Technology, Akure. She holds a PGD in journalism from Nigeria Institute of Journalism, Abuja.

- **IYAJI STELLA OJOCHIDE** is a journalist with many years of experience. She worked with the broadcast media, before moving to the Print. She has reported the Judiciary, Business, Police and National Assembly (Senate). Apart from holding a First Degree and Master’s Degree in English Language, she has undergone several trainings in journalism. She is currently the Managing Editor of Daily Trust
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Newspaper, the biggest newspaper in Northern Nigeria, comprising 19 states. It is also widely read across the country. She had earlier served as News Editor, Deputy Editor, Daily Trust on Sunday and Deputy Editor of Daily Trust (the daily edition).

THEOPHILUS ABBAH, PHD holds a PhD in English, with specialization in Forensic Linguistics. His doctoral thesis is on the language of terrorism, with emphasis on the rhetorical strategies of Boko Haram and major terrorist organizations – Al-Qaeda, ISIS, Al-Shaabab, and The Taliban. An award-winning investigative journalist, Abbah has a rich career in Journalism. He rose from Reporter to Assistant Editor at The Punch newspaper. He was later appointed to the position of Editor of Daily Trust on Sunday, Managing Editor of Daily Trust, and now Programme Director of Daily Trust Foundation. Abbah specializes in investigating ‘Language Crimes’ through forensic examination of documents for forgery, impersonation, deception, falsehood and fraud. He is the author of Lost in the Wind, a novel shortlisted for Association of Nigerian Authors (ANA) award in Prose Fiction in 2012.

TUNDE MUSIBAU AKANNI, PHD is a journalist, media scholar and development expert with experiential assets in diverse communications practice and scholarship. An alumnus of Ilorin, Columbia, Leicester and Ibadan Universities as well as the Institute of Social Studies, Den Haag, Netherlands, he was, at various times, among others, a Distinguished British Chevening Scholar and a Netherlands NUFFIC awardee. Akanni sits on a number of boards including those of the Premium Times Centre for Investigative for Journalism, PTCIJ; Ethics and Leadership Academy, Lagos; as well as Dubawa, which is Nigeria’s first international indigenous which fact-checking organization. Robustly published locally and internationally as a scholar and media analyst, he is currently an Associate Professor of Journalism at the School of Communication of the Lagos State University where he doubles as the pioneer Director of Digital Media Research Centre, DMRC.

Legal Advisers

ABDUL MAHMUD is a Nigerian lawyer, social critic, columnist, human rights advocate, knowledge worker, essayist, poet, former Students' union leader and activist. He is currently the President, Public Interest Lawyers League (PILL), a body of professional and independent group of lawyers committed to the promotion and enforcement of the rights of vulnerable and minority groups, deepening of democracy and governance and the expansion of public interest law. He is a third-generation Nigerian poet whose works appear under the nom de
guerre, Obemata. Some of his poems have also been translated into Polish, Lithuanian and French languages”.

**MBASEKEI MARTIN OBONO** is a lawyer and human rights advocate. He studied law from the University of Buckingham, he was later called to the Nigerian Bar after completing his law school. He holds an executive certificate from Harvard Kennedy School of Govt, he is a Fellow at the Columbia University, New York. He is on the advisory board of Amnesty International Nigeria. His litigation experience spans national courts in Nigeria and regional courts like ECOWAS Court of Justice, African Court on Human and Peoples rights. He has consulted for numerous international organizations and governments including Ghana and The Gambia.

**Medical Advisers**

**DR. LAZ UDE EZE** is a medical doctor, health communications specialist and sustainable development consultant. He has excellent expertise in health systems strengthening, health policy advocacy, health information management, and health financing. Over the years, he worked in public and private health, research and development organizations in Nigeria, United States and Togo. He has worked as a consultant to many health projects in West Africa. Laz is the Convener of the #MakeOurHospitalWork Campaign, Chief Executive of Talk Health Real Media Limited, Publisher of talkhealth9ja.com – Nigeria’s 1st Pidgin English health blog.

**DR. ADU SAMUEL OLUWATOSIN** is a highly skilled medical doctor with significant years of experience in managed care in Nigeria as a regional manager and medical advisor of one of the leading HMOs in Nigeria. He possesses excellent leadership, team-working, communication, organizational, and presentation skills. As a talented Medical Advisor, he has supervised various medical research and trainings with the focus to provide excellent patient care and meticulous research.

**Participants**

**ADEOLA OGUNLADE** is a development journalist with The Nation newspaper. He is also content documentalists, fixer, media campaign advisor and a fellow of Media Advocate Group, Action Aid, Nigeria. In 2006, he founded Youth Advocate for Change (YAFC) with a firm commitment toward empowering youngsters with the right values and helping them to harness their innate skills for a productive and profitable venture. He also serves as the Programme Coordinator with African Foundation for Peace and Love Initiatives.
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ADAMU JAMILU is a journalist he writes who writes in both English and the Hausa Languages. He attended Ahmadu Bello University Zaria 2006-2009. He has a B.A. in Local Government and Development Studies. He is married with a child.

BAMAS VICTORIA is a multimedia journalist with over 10 years’ experience which has seen her reporting from across different states in Nigeria as well as counties like India, Ethiopia, Ghana, Togo, and Benin Republic. She worked as a Reporter, and Content Editor for Daily Trust newspaper titles and is currently the Team Lead and Editor of the The FactCheckHub. She can be reached on twitter @BamasVictoria

NELLY KALU is a journalist working in broadcast, digital, fact-checking and media advocacy. Her work spotlights gender, social, political, and economic issues. She is known to have tough conversations on under-reported issues on radio and television. While working with RNW Media, The Netherlands, she served as moderator of the Love Matters Naija online advocacy platform focused on LGBTQ rights, sexual health, safe sex practices and informed choices. Her 2020 TEDx talk on The Distant Reality of Feminism and Gender Equality addressed gender inequalities in media and governance in Nigeria.

ALIYU DAHIRU ALIYU is an independent researcher, a fact-checker and the head of Radicalisation and Extremism Desk at HumAngle, an African conflict and humanitarian crises reporting platform. He previously worked with CDD West Africa as a research programs officer on countering misinformation and disinformation project and CITAD on hate speech project. He was 2020 Dubawa fact-checking fellow and Africacheck fact-ambassador. His works were also published by CNN and BBC Hausa.

INYALI PETER OGAR is a Nigerian from Cross River State. He holds Master and Bachelor degrees in Mass Communication from Cross River University of Technology (now University of Cross River). Inyali is a journalist, social crusader and Publisher of online news site, Fearless Reports. He’s also a pioneer Lecturer in the department Mass Communication, University of Calabar, Calabar. He’s a member of the revered Nigerian Institute of Public Relations, NIPR, Africa Council of Communication Education, ACCE, amongst others. He’s currently a Media Consultant to the Honourable Minister of State, Power. He has held several positions.
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Jennifer Ugwa is an alumna of the University of Nigeria Nsukka. She is a freelance investigative reporter and storyteller. She has written stories on rights violations, business, corporate tax evasions, environment/climate justice. Jennifer was selected by Finance Uncovered, a United Kingdom-based journalism organisation, to track illicit finance flow and tax evasions by multinationals and individuals across borders. She is a recipient of several journalism fellowships like the Code for Africa Wanadata reporting fellowship, Money-trail journalism project by JournalismEu, Institute for War and Peace Reporting COVID-19 Fact-Checking programme, amongst others. Jennifer is based in Abuja.

David Arome is a public health professional and health reporter with over five years' experience working in the non-profit sector. David holds a bachelor degree in science laboratory Tech and master degree in public health. David has undergone several trainings in health reporting, journalism, leadership, research and publication of research articles. David Arome conducts interview, write report, transcription of interviews, facilitate trainings and publish research articles. David is actively involved in health advocacy, women and girls right and community engagement.

Emiene Odaudu-Erameh is a journalist who is passionate about issues that concern women’s rights and social justice. She is a women’s rights advocate and approaches any assignment with the gender lens and telling stories about the resilience of women. She is a Report Women Fellow and has recently undertaken a new challenge which is editing a women focused online magazine, allwomen.com.ng.

Ishaya Ibrahim’s journalism career spans 12 years beginning with the Newswatch magazine, and now TheNiche, an online newspaper. He has investigated and published stories on wide range of subjects, including education, environment, defence and business.

Jack Vincent Fidelis is a journalist with 14 years of successful experience in print and broadcast journalism. He is an alumnus of the Department of Mass Communication, University of Maiduguri. Jack is into creative writing, he’s a published poet and a bookworm.

Justina Asishana is a data and investigative Journalist who is passionate about data, human interest issues, investigations and governance. Currently the Niger state correspondent for The Nation Newspaper. Justina tries to look at
various ways of telling gender balanced stories using solutions lens with an infusion of data in her reportage. Justina has done a lot of investigative reporting for her media organization, The Nation Newspaper and with grants received from other media organizations including the International Center for Investigative Reporting, and the Wole Soyinka Center for Investigative Journalism.

KEMI BUSARI has over the past years demonstrated a robust commitment to journalism through his challenging adventures to tell human keen stories. Widely recognized locally and internationally, Kemi’s works have generated massive impact, instigated public discussions and driven policy changes in Nigeria. Bringing on board his strong newsroom background, Kemi joined Dubawa in July 2020 and has since been at the fore of the battle against misinformation in public interest. Kemi holds a master’s degree in Communication Studies, with a distinction, from Vrije Universiteit Brussels and a bachelor’s degree in Political Science from the Obafemi Awolowo University, Nigeria. He can be reached @kemi_busari.

DAMILOLA OJETUNDE works as the Head of Data Unit at the International Centre for Investigative Reporting (ICIR) where he supervises data collection, verification and validation processes and also enforce data cleaning and Extract, Transform, and Load (ETL) standards & processes in the organisation. When The ICIR eventually decided to be publishing more data-driven stories in 2019, Damilola became more instrumental to the organisation’s early success. He combined his work as Data Analyst together with training other staff members. He has written over 100 data-driven stories himself apart from helping other reporters to crunch and visualise data.

OGAR MONDAY is a graduate of Political Science from the University of Calabar, Unical, he has been working as a journalist reporting communities and underreported stories in Nigeria within the last 5 years.

OLAKUNLE MOHAMMED is a journalist, researcher, and fact-checker passionate about development, education and fact-checking. His reports and analysis on development, economy, education, and public policy have been featured on An24 News and Ominira Initiative. Olakunle is the co-founder of News Verifier Africa (N-VA), a platform dedicated to fact-checking misinformation and disinformation in Africa. His fact-check portfolio includes verifying statements and claims made by political figures and religious leaders.
SEKYEN MANASSEH DADIK is a trained journalist and the Deputy Executive Director of Africa Media Development Foundation. She had worked full time as a journalist in Nigeria before delving into Media Development work. Sekyen has been involved in training of journalists in Nigeria on Development Journalism, Investigative journalism and Peace Journalism among others. She holds a Master of Science Degree in Conflict Management and Peace Studies and a Bachelor of Arts Degree in Mass Communication. Sekyen is a Member of the Network of Nigerian Facilitators, United State Institute of Peace, and also a Member of IWPR’s Africa Resilience Network (ARN) programme.

TEMITOPE BADEMOSI is a journalist with a passion for writing creative and persuasive stories. She is also versed in community reporting and grassroots development topics.

YAKUBU SALISU is a Kano based journalist, Northwest Nigeria, with seven years working experience in journalism. He is a graduate of Ahmadu Bello University, Zaria and also has a post graduate Diploma in Mass Communication with a Masters in Mass Communication in view.
TRANSLATIONS

This book is available in the following languages:


A COMpendium OF SELECTED STORIES FROM THE ARN PROJECT

About the Compendium
Combating Covid-19 misinformation in Nigeria. A compendium of selected stories from the ARN Project is a unique collection of selected fact-checking stories that have debunked some critical misinformation around Covid 19 in Nigeria. The 20 journalists (10 males and 10 females) have written their stories using all the skills acquired through training, mentoring, field research.

It is a compendium of lessons that underscores the value of lifelong training and mentoring as a learning opportunity.