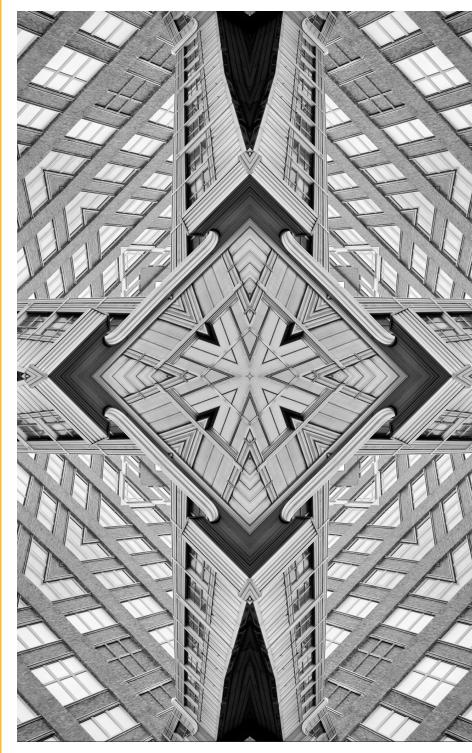


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## The Weaponisation of Disease Outbreaks Saurabh Todi

### Abstract

This brief examines how fear and anxiety during a disease outbreak can be exploited by state and non-state actors to further their political, strategic, or ideological agendas. Such fear, compounded by religious and cultural strife, or unfamiliarity with sociocultural beliefs can provide fertile ground for the spread of misinformation from malicious actors. The brief illustrates these patterns using examples where information had been weaponised during an outbreak, such as those of HIV/AIDS, Ebola, Polio, and COVID-19. he weaponisation of information during outbreaks of disease can impact large populations and its effects persist for a long time. Broadly defined, the 'weaponisation' of a disease outbreak refers to the exploitation of such health crises by state and non-state actors to achieve their political, religious, or geostrategic agenda. This may take many forms, depending on local, regional, and global factors that include the vested interests of those who are weaponising the outbreak.

Some of the strategies may include wielding disinformation to serve as propaganda against adversaries, use of violence to deny access to medical care, and spread of misinformation to generate political mileage. Conducting an analysis of how an outbreak has been in the past weaponised, can help create an understanding of how these tactics are often deployed and, consequently, how they can be arrested.

> 'Weaponising'a disease outbreak refers to the exploitation of such health crises by state and nonstate actors to achieve a political, religious, or ideological agenda.

Introduction •

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#### The Spread of HIV/AIDS

One of the more successful disinformation<sup>a</sup> campaigns in modern times is related to the emergence of the Human Immunodeficiency Virus (HIV) that causes AIDS, or the Acquired Immunodeficiency Syndrome (AIDS). Although first identified in 1981, HIV is thought to have emerged between 1884 and 1924 in central and western Africa.<sup>1</sup> Researchers estimate that the virus began spreading around Africa in the late 1950s and slowly spread across the globe due to increasing urbanisation, travel, the practice of having multiple sexual partners, and intravenous drug use.

In 1983, an Indian newspaper, *The Patriot* published an anonymous letter purportedly from an American scientist claiming that AIDS was the result of a US bioweapons research programme.<sup>2</sup> Subsequently, the KGB (the Soviet intelligence agency, or Committee for State Security) initiated propaganda measures as part of its "Operation Denver"<sup>b</sup> to amplify this assertion to promote anti-Americanism.<sup>3</sup> This claim was further bolstered when a retired biophysicist from East Germany, Jakob Segal concluded in a report that HIV was likely created at the US Army facility in Fort Detrick, Maryland.<sup>4</sup> Although Segal's report was soon discredited by scientists from both the West and USSR, its use in propaganda continued.

Building on these two sources, left-leaning and communist-sympathetic newspapers and magazines in various countries further claimed that the virus was being used as a tool to target minority populations within the US and across the globe.<sup>5</sup> Media outlets both from Western and non-aligned countries<sup>c</sup> picked up Segal's report and the story received widespread coverage.<sup>6,7,8</sup> In Asia, in April 1987, the official Indian armed forces journal, *Sainik Samachar* published an article that reiterated the false connection between HIV and Fort Detrick.<sup>9</sup>

The USSR in 1987 ended the disinformation campaign, as part of efforts to improve relations with the West.<sup>10</sup> Many years later, however, the narratives persisted amongst the target communities. In a 2008 survey of patients who were on antiretroviral treatment in Los Angeles in California, 42 percent of

a 'Disinformation' is false or misleading information that is spread deliberately to deceive. It often begins as harmless rumours, but start gaining legitimacy as the media, politicians, and other sectors use them to further their agenda. It could be understood as a more subtle form of propaganda.

b "Operation Denver" and "Operation Infektion" are both used to refer to the same operation and they have been used interchangeably in several of the primary sources used by this author.

c During the Cold War, nations that were not formally aligned with or against any major power bloc were referred as non-aligned countries.

them believed that AIDS was created by the US government to "control" the African-American population.<sup>11</sup> Similarly, a 2009 survey of young adults in Cape Town in South Africa, found that 16 percent of Black respondents agreed with the statements, "AIDS was invented to kill black people," and, "AIDS was created by scientists in America."<sup>12</sup> Indeed, although such "conspiracy" theories tend to lose their acceptance over time, they can persist amongst a smaller but vocal section of the population and therefore continue to pose a challenge.

At least initially, deep distrust of the government was exploited to ensure that the rumours were not dismissed by the people as being outside the realm of possibility. The AIDS epidemic was disproportionately affecting the homosexual and African-American communities in the US—they did not outrightly reject the rumours about HIV having originated in a US laboratory due to past experiences of medical malpractices committed against them.

Ten years before HIV/AIDS was discovered in the US, the Tuskegee experiments were revealed: African-American farm workers were intentionally exposed to syphilis in order to study the effect of penicillin on the bacteria.<sup>13</sup> A US Congressional report in 1977 had found that the Central Intelligence Agency (CIA) tested the psychedelic drug Lysergic acid diethylamide, popularly known as LSD, on uninformed people.<sup>14</sup> Moreover, the US government failed to move swiftly enough to stop the spread of HIV/AIDS; this contributed to the lack of trust from the gay community.

Similarly, the colonial legacy, and racism, was still around. As AIDS spread worldwide and took a greater toll on Africans, the notion of a conspiracy against them became more deeply entrenched in the continent; this was exploited by the KGB to promote anti-American sentiment.<sup>15</sup>

#### **Polio Vaccines**

The global effort to eradicate polio has failed to achieve its goal in Pakistan, Afghanistan and until recently, Nigeria, due to the spread of rumours and deliberate misinformation<sup>d</sup> about the polio vaccine in these countries.

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d 'Misinformation' is false, inaccurate, or misleading information that is communicated, whether or not to deceive. It incites fear and suspicion. Such rumors often become progressively difficult to counter, especially if they are built around pre-existing biases of the target population.

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In the initial years following the 2001 US-led invasion of Afghanistan and the 2003 Iraq War, Muslim communities developed an impression that there was a religious crusade by Christian, 'Western' countries against Islam.<sup>16</sup> This was exploited by militant groups and religious extremist groups in some Muslimmajority countries of Africa and Asia to further their ideological agendas. The polio vaccine was one of the things around which they built certain narratives: these groups spread rumours that the polio vaccine contained ingredients that are *haram*, or prohibited in Islam—pig fat, for instance. They also projected polio vaccination as a conspiracy by Americans to make Muslims infertile, and thereby, reduce their population. These claims were readily accepted in the underdeveloped regions of Afghanistan, Pakistan, and Nigeria—often far from the reach of healthcare professionals, and where terrorists and religious clerics exercised considerable influence.

The view of the immunisation drive against polio being an "anti-Muslim" pogrom was granted legitimacy after a physician, Ibrahim Datti Ahmed who headed the Nigerian Supreme Council of Shariah (SCSN) declared that polio vaccines were "corrupted and tainted by evildoers from America and their Western allies."<sup>17</sup> In 2003, under the influence of Dr Ahmed and the SCSN, the governor of the Kano state in Northern Nigeria suspended polio vaccination campaigns for about a year due to the same rumours that Muslim communities were being sterilised using polio vaccine campaigns as a front.<sup>18</sup>

This fear of polio vaccines had ripple effects in India—home to the third largest Muslim population in the world. The Indian state of Uttar Pradesh, in particular, became the epicentre of hesitancy amongst its large Muslimminority population. Indian Muslims similarly viewed polio vaccination drives as a government agenda to systematically reduce the minority population; they believed that the vaccine had "questionable and religiously offensive" content in its formulation.<sup>19</sup> Such rumours changed polio vaccination from a public-health issue to a socio-religious one, setting back polio eradication efforts. Made-Ur seases. പ arratives Real Di

Yet, the use of misinformation to further an agenda is not limited to religious fundamentalists. Political, ethnic, and religious strife allows disease outbreaks to be exploited for varied forms of political mileage. Muslim-majority residents of northern Nigeria had become wary of the US since the initiation of wars in Afghanistan and Iraq which they saw as an attack on Islam.<sup>20</sup> In the 2003 Nigerian presidential election, Olusegun Obasanjo, a Christian from southern Nigeria, defeated Muhammadu Buhari, a Muslim from the northern region. The election results made local Muslim politicians and religious officials apprehensive about the motivation of both the Nigerian federal government (then led by a Christian) and the Global Polio Eradication Initiative (GEPI) which was receiving huge funding from organisations based in the West, including the US.

Moreover, missteps by governments can inadvertently lend credibility to rumours. Soon after al-Qaeda leader Osama Bin Laden was found and killed by US armed forces in Pakistan in 2011, terrorist organisations operating in Pakistan and Afghanistan stopped cooperating with local healthcare workers. An investigation by *The Guardian* newspaper revealed that American spies had posed as vaccinators to get close to Bin Laden's home and collect information that aided the military operation that killed him.<sup>21</sup> Militant groups began assaulting healthcare workers in their areas of influence and prevented them from administering the polio vaccine. Efforts to eradicate the disease in Afghanistan and Pakistan have therefore been set back by several years and they remain the only countries in the world with wild poliovirus type 1 (WPV1) still in circulation.

This is not to say that there has not been cooperation at all between governments, healthcare workers, and local populations, especially in fighting misinformation. In 2004, the World Health Organization (WHO) and the United Nations Children's Emergency Fund (UNICEF) held a meeting in Nigeria with more than 150 Muslim clerics and tribal chiefs from neighbouring countries such as Chad, Cameroon, Niger, Togo, Benin, and Burkina Faso. The objective was to address vaccine skepticism due to religious and safety concerns, while discussing ways to push the polio immunisation campaign.<sup>22</sup>

In India, too, similar outreach efforts have been undertaken, including educating and training madrasa teachers<sup>e</sup> to counter misinformation, and using religious leaders to build trust in the vaccine. These efforts significantly reduced the hesitancy amongst Indian Muslims about the polio vaccine.<sup>23</sup> Indeed, polio immunisation campaigns gradually picked up pace and India was finally declared free of polio in 2014. Nigeria would achieve this feat in 2020.

In Pakistan, the consequences of the spying operations to hunt Bin Laden were soon addressed by the director of the US Central Intelligence Agency (CIA). The agency instituted a new policy in 2013 that barred the use of vaccination programmes, including recruitment of vaccination workers, for spying operations.<sup>24</sup> Little has changed on the ground, however, and health workers are still being targeted by militants. In Pakistan, a terrorist group called Tehreek-e-Taliban Pakistan (TTP) shot over 100 on-duty polio workers between 2012 and 2017.<sup>25</sup>

#### The Ebola Epidemic

Ebola is a viral haemorrhagic fever in humans and other primates caused by infection with a group of viruses within the genus Ebolavirus. It was first identified in 1976 near the Ebola River in what is now the Democratic Republic of Congo (DRC) and has since become endemic to several other West African countries such as Guinea, Sierra Leone, and Liberia. One of the most severe outbreaks of Ebola was reported in 2018 in the DRC, where outbreaks of the fever have been frequent. Widespread misinformation and an overall lack of trust in the government have made the people suspicious of public health initiatives; ethnic conflict compounds the situation by making it difficult for healthcare workers to do their work in a safe environment.<sup>26</sup>

One can hardly blame the communities for not having trust in the national DRC government; after all, certain political leaders have used the Ebola epidemic for their own gain. For one, using an episodic outbreak as an excuse, the national electoral commission (CENI) postponed the voting for the 2018 presidential elections in some cities of North Kivu province. Critics, however, noted that electoral campaigning had been previously allowed in those cities despite the outbreak; they alleged that the commission decided to defer voting

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e Madrasa is a general term for Islamic schools.

to give the incumbent more time as those cities were expected to vote for the opposition. This fueled suspicion about the motives of the government and hampered the Ebola vaccination efforts in North Kivu. There were reports of healthcare workers being attacked,<sup>27</sup> especially those associated with international organisations such as WHO and Medecins Sans Frontieres (MSF, Doctors Without Borders).

Despite the availability of a highly effective vaccine and drugs to reduce deaths, healthcare workers have struggled to gain the cooperation of people in affected communities. Misinformation and rumours about "foreigners experimenting on locals, taking organs, and filling the bodies with concrete" and Ebola being a mere fabrication have further fueled suspicion and panic.<sup>28</sup> There are reports that politicians have used fear of voter disenfranchisement to instigate people against the local government and that militias are hired as mercenaries to settle political scores at the expense of the local population.<sup>29</sup>

The spread of HIV, polio vaccination campaigns, and the Ebola outbreak have all been weaponised by varied interests.

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HO declared COVID-19 a global pandemic on 11 March 2020. There was widespread misinformation, especially during the initial months of the pandemic, on unknowns such as the origin of the SARS-CoV-2 virus that causes COVID-19, what the illness exactly does to one's body, and the effective treatment, if any. Economic anxiety caused by prolonged lockdowns added to the public's fear and uncertainty, and the situation was ripe for disinformation.

This includes theories on the origin of SARS-CoV-2. Although there is still no clarity on how the virus emerged, there are two leading hypotheses: that the virus naturally jumped from an animal host to infect humans; and that the virus accidently leaked into the environment from a virology laboratory in Wuhan that was engaged in research on coronaviruses. In the absence of scientific consensus in favour of either theory, these hypotheses have given birth to rumours, conspiracy theories, and disinformation campaigns.

Since the start of the COVID-19 pandemic, China has sought to evade difficult questions related to the origin of the virus. The Chinese government barred scientists working on coronaviruses from working with or sharing any new information with their colleagues outside China.<sup>30</sup> Presumably to deflect domestic and international criticism of China's initial pandemic response, officials have promoted conspiracy theories of their own. Chinese Foreign Ministry spokesperson, Zhao Lijian, claimed that the members of the US Army contingent that visited Wuhan in October 2019 may have introduced the virus into the city.<sup>31</sup> Other Chinese officials have said that the virus may have been engineered at the US Army facility in Fort Detrick and called for an investigation into the facility.<sup>32</sup> Whenever international pressure for a fair and independent investigation into the origin of SARS-CoV-2 virus heightens, these theories are amplified by Chinese state media.<sup>33</sup> These have found broad support from the Chinese public.<sup>34</sup>

China has also been accused of weaponising aid and relief materials during the COVID-19 pandemic to further its geopolitical aims: for instance, it threatened to withhold COVID-19 vaccine shipment to Ukraine if it supports a UN Human Rights Council (UNHRC) motion demanding scrutiny of China's Xinjiang policy, and Ukraine did withdraw its support from the resolution;<sup>35</sup> according to Taiwan, China offered vaccines to Paraguay, on the condition that it will establish diplomatic ties with it and sever ties with Taiwan;<sup>36</sup> European

The Covid-19 Experience Union officials accused China of presenting itself as the only actor capable of delivering assistance to European countries by aggressively pushing false messages aimed at furthering the divide within the European Union;<sup>37</sup> and China has also been accused of trying to coerce Taiwan in a position where it may be forced to buy vaccines from a Chinese manufacturer instead of sourcing directly from foreign vaccine manufacturers.<sup>38</sup>

There are other examples of countries using the COVID-19 pandemic to further their geopolitical agenda: the EU and the US have accused Russia and China of promoting covert online campaigns that amplify unfounded links between Western vaccines and deaths, while promoting Russian and Chinese vaccines;<sup>39</sup> Russia has blamed the West for attempts to discredit its domestically manufactured vaccine and for deliberately delaying its approval for use in Europe;<sup>40</sup> and China has accused the Western media of creating misleading narratives about China-made vaccines that seek to undermine confidence in them.<sup>41</sup>

The COVID-19 pandemic has also provided an opportunity to non-state actors, including political parties, to deploy misinformation tactics. Antivaccination groups are highlighting reports of "adverse event following immunisation" (AEFIs), especially in countries like the US where the issue of vaccination has become deeply politicised.<sup>42</sup> AEFIs are an expected occurrence post-vaccination and are not unique to COVID-19 vaccines. Those who experience AEFIs usually report discomfort in the site of the jab, or mild fever lasting a day or two.<sup>43</sup> Anti-vaccination groups have sought to amplify the rare cases of severe AEFIs as a regular occurrence, thus misleading the public and fuelling vaccine hesitancy.

In the United States, several politicians, including former president Donald Trump have fanned anti-China sentiment which have led to a rise in racist and xenophobic attacks against people of East Asian origin in the US.<sup>44</sup> Earlier in the pandemic, when there was not enough evidence to even hypothesise on the origin of SARS-CoV-2, many US politicians including the then US Secretary of State attacked China as responsible for the virus.<sup>45</sup>

In India, certain sectors of society sought to vilify Muslims as "Covid spreaders" when an event organised by a Muslim religious sect and attended by thousands became an infection cluster during the initial weeks of the pandemic.<sup>46</sup> A member of parliament (MP) from the ruling party referred to

The Covid-19 Experience the event as a planned "Corona Jihad",<sup>47</sup> while another MP said members of the religious sect should be treated like terrorists.<sup>48</sup> Vaccine hesitancy in the country has also been fuelled by a popular yoga guru called Baba Ramdev, when he used the words "stupid science" to refer to allopathy, falsely alleged that thousands of doctors had died despite taking the vaccine, and tried to position Ayurveda<sup>f</sup> as an alternative to vaccines.<sup>49</sup>

> Economic anxiety caused by prolonged lockdowns added to the public's fear and uncertainty with COVID-19; the situation was ripe for disinformation.

The Covid-19 Experience

f Ayurveda is the alternative, non-allopathic system of medicine that originated in India and is widely practiced in India and Nepal.

mong several examples where natural outbreaks were "weaponised", misinformation and disinformation efforts seem to primarily exploit the lack of trust between the people and their government, unique socio-cultural factors, and the absence of credible information to push their narrative. Policymakers and law enforcement officials need to develop targeted strategies to reduce the impact of such attempts. Every disease outbreak and its sociopolitical challenges might be unique, but broad counter strategies may still be needed. As shown by the successes of Nigeria and India in becoming poliofree, engaging community members and religious leaders can help build trust and inspire confidence of vulnerable communities in public health initiatives, especially in rural areas. Collaboration between tribal leaders and health officials in West African nations also led to a welcome change in the Ebola prevention protocol which tried to balance people's socio-cultural sensitivities and the need for science-informed containment measures.<sup>50</sup>

The rise of social media and relatively cheaper internet access has made information dissemination simpler and faster than ever before. Widespread use of instant messaging applications makes it easier to exploit fear during a time of crisis such as an active disease outbreak. It is essential to develop mechanisms that can detect these efforts well before they start gaining credibility. Counterstrategies may include working with social media companies to weed out fake accounts and bots from their platforms and reduce the prevalence of inflammatory content. Similarly, media organisations can help educate the public on how to access reputable sources and identify fake news.

Misinformation can also be countered by easily accessible and factual information. Often, in a situation of fear and panic, such as during an outbreak, paucity of reliable information can inadvertently push people to gravitate towards misinformation. Governments, international organisations, and nongovernment groups should strive for making information accessible through as many means of communication and in as many languages as possible.

At the time of writing this brief, the COVID-19 pandemic continued to exact a heavy toll on lives and livelihoods, aided by the emergence of new and highly infectious variants. Although the availability of vaccines has been able to reduce the global fatality rate, equitable access to these vaccines remains a challenge. According to estimates, it may take several months to years for countries around the world to reach comfortable levels of vaccination coverage. Therefore, uncertainty associated with the risk of new COVID-19 variants, prolonged economic stress due to frequent lockdowns, and vaccine inequity continue to provide a fertile ground for the spread of misinformation.



n efforts to weed out harmful and false information, it is important to ensure that the democratic and open aspect of the internet is not compromised.<sup>51</sup> As the recent censorship attempts on questions around COVID-19's origin suggest,<sup>52</sup> the biggest challenge is to find the right balance between the need to preserve freedom of speech and expression, responsibility to respect the scientific process, and the urgency to prevent spread of misinformation.

Finding such a balance is a difficult task. Facilitating active engagement between governments, technology companies, and civil society will be a good place to start.

Conclusion

**Saurabh Todi** tracks emerging technologies, non-proliferation issues, and the emerging geopolitical dynamics between India, China, and the US.



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Endnotes



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20, Rouse Avenue Institutional Area, New Delhi - 110 002, INDIA **Ph.:** +91-11-35332000. **Fax:** +91-11-35332005 E-mail: contactus@orfonline.org Website: www.orfonline.org