

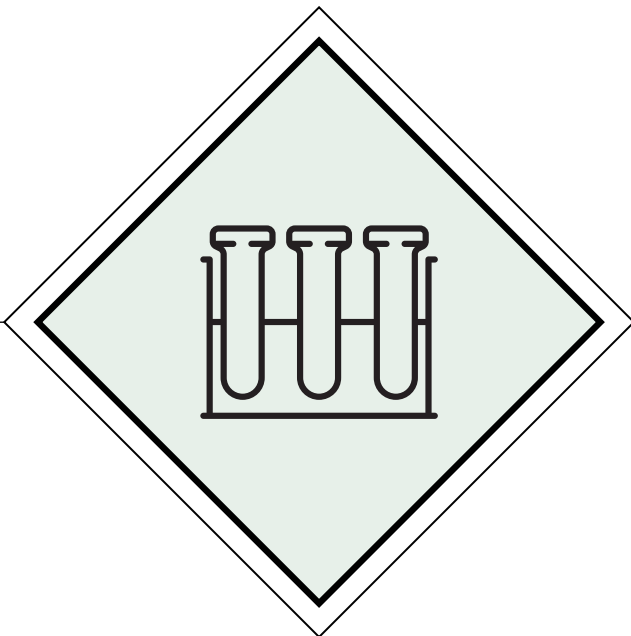
THE MATRYOSHKA WAR



The Global Architecture of Biological Disinformation 2026



1.1



Executive Summary: The Matryoshka War in Three Regions

Across Africa, Southeast Asia and Latin America, very different outbreaks, laboratories and political systems have been drawn into a single strategic narrative: that foreign-supported biosecurity and public-health cooperation conceals hostile geopolitical intent.

Ebola units in West Africa, agricultural laboratories in the Philippines, influenza and dengue surveillance in Indonesia and Peru, and even anthrax rumours on the Hispaniola border have all been absorbed into the same storyworld. These are not isolated conspiracies. They are regional expressions of a single global narrative of biological disinformation.

At the core of this narrative sits the foundational claim that the United States and other members of the Global Partnership Against the Spread of Weapons and Materials of Mass Destruction (GP) lead a covert, militarised global network of biological laboratories operating under the cover of public-health cooperation. This claim is promoted and codified primarily by Russian security institutions and state-

aligned media, where it is afforded the status of geopolitical “common sense” within Russian and Russian-allied information environments. It does not need to be persuaded in each location; it only needs to be available as a frame through which disease, laboratories and foreign cooperation and assistance in biological and public health domains are interpreted.

This report advances the “Matryoshka Model”, named after the Russian wooden dolls placed one inside another, where each outer figure contains a smaller version within it. The metaphor conveys how the foundational ‘biolabs’ narrative operates through nested, iterative layers of messaging, that incorporate and reformulate regional politics and anxieties to cement the core disinformation narrative via adapted regional expressions.

Across all three regions, the same nested structure operates. At the outer tier, state-level disinformation supplies meaning. At the middle tier, domestic politics, activism or crisis response translate that meaning into locally resonant claims. At the innermost tier, fear, memory and vulnerability make those claims feel true.

These layers reinforce one another cyclically: local anxiety is transformed through various architectures into internationally consequential “evidence”, which in turn validates original claims.

1.2

Executive Summary: The Matryoshka War in Three Regions (continued)

The result is a self-sustaining information system in which global health security infrastructure is made legible as a geopolitical threat. Laboratories do not need to be secret to be suspect. Outbreaks do not need to be unnatural to be weaponised. Once inside the Matryoshka, health security becomes a strategic asset for manipulation.

In Africa, the Matryoshka is powered by outbreak trauma and colonial memory. Ebola, Lassa fever and COVID-19 generated fear, grief and mistrust of foreign medical actors. Laboratories such as Kenema, Goma and KEMRI became emotionally charged symbols of external power operating amid suffering. Local rumours about experimentation or exploitation were then harvested by Russian state actors as proof that Africans themselves reject Western biosecurity.



AFRICA

In ASEAN, the Matryoshka feeds on storylines centred on dual-use science, food security and sovereignty. Laboratories that sit at the intersection of agriculture, disease and defence such as NAMRU-2, RADDL and AFRIMS are structurally ambiguous. Domestic political actors, nationalist blocs and fringe networks reinterpret these sites through anxieties of militarisation and economic vulnerability. Russian actors have then elevated these local disputes into regional evidence of a global US biolab network.



ASEAN

In Latin America, the Matryoshka is sustained by histories of intervention, ideological activism and border insecurity. Activist and quasi-academic networks embedded NAMRU-SOUTH within anti-imperialist narratives, which were later incorporated into Russian geopolitical messaging. Meanwhile, even fleeting outbreak rumours such as the anthrax scare on the Haiti–Dominican Republic border have drawn on the same bioterror frame, showing how deeply embedded the global narrative has become.



LATIN AMERICA

The real danger suggested by these cross-regional case studies is that biological disinformation does not spread simply because people reject science. It spreads because science now sits at the centre of global power confrontations. The infrastructure designed to protect populations from biological threats—laboratories, genomes, surveillance networks and health systems—has become the terrain upon which geopolitical conflicts are being fought.

A Global Narrative, Local Targets

The foundational biolabs narrative does not operate in one place. Across Africa, Southeast Asia and Latin America, the same story surfaces, adapted to local history, fear and politics, but always serving the same strategic purpose.



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NESTED LIES

How the Biolab
Narrative Takes Hold

Background: Biological Security as an Information Battlespace

For decades, biological weapons have occupied a sensitive place in international security discourse. Unlike nuclear or conventional arms, biological agents are invisible, ambiguous, and deeply entangled with public health and scientific cooperation.

This makes biological security exceptionally vulnerable to narrative manipulation and uniquely susceptible to geopolitical exploitation, and has enabled it to be strategically exploited through a foundational narrative that US cooperative threat reduction (CTR) and international biorisk management assistance programmes disguise a global biological weapons network under the cover of public-health research.

Since at least the mid-2010s, and with particular intensity following Russia’s full-scale invasion of Ukraine in February 2022, this foundational narrative has been systematically weaponised by Russian state institutions and aligned actors. The campaign reached an international crescendo in the summer and autumn of 2022, when Russia invoked Article V of the Biological Weapons Convention (BWC)

and convened a Formal Consultative Meeting (FCM). There, Russian officials presented more than 300 pages of alleged “evidence” seized from Ukrainian laboratories, claiming the United States and Ukraine were running an offensive biological weapons programme in violation of the treaty.

Although the United States and Ukraine were the immediate targets, this narrative was never geographically confined.

Similar allegations had appeared prior to the full-scale invasion but following it they rapidly proliferated beyond the theatre of the former-Soviet Union. Africa, the Asia-Pacific, Eastern Europe, and Latin America rapidly became interconnected theatres of a single information war, bound together by the same underlying story, adapted to local political and historical

anxieties. What has varied is not the core claim, which has demonstrated remarkable narrative durability. Instead, alterations in form have been demonstrated in its local expression, its interpretative significance, and its subsequent incorporation into political action and social effects.

This report is based on a mixed-methods approach combining qualitative fieldwork with systematic digital collection across Africa, Southeast Asia and Latin America. Case studies were first identified and contextualised through in-person focus groups and interviews, then supplemented with targeted collection and analysis of social-media content, state-linked media and open-source online materials.

2.2



Background: The Matryoshka Model

The report advances a “Matryoshka Model” to understand disinformation. The Model takes its name from the Russian nesting dolls placed one inside another, where each outer figure contains a smaller version within it.

In the same way, biological disinformation operates through layered narrative shells: a single foundational claim is wrapped in diplomatic, media and local stories that adapt it to different political and cultural contexts while still preserving its core meaning. Each doll corresponds to a tier of narrative production and amplification. Together they form an iterative system that translates nebulous geopolitical claims into tangible political and social outcomes. At the centre of every doll runs the foundational biolab narrative which claims that biological cooperation and assistance from Global Partnership states—especially through the US and its CTR programmes, DTRA and USAID laboratories—masks or conceals military-biological activity. Because this narrative is deliberately broad and ambiguous, it can be continuously reinterpreted, allowing actors at every tier to adapt it to their own agendas.

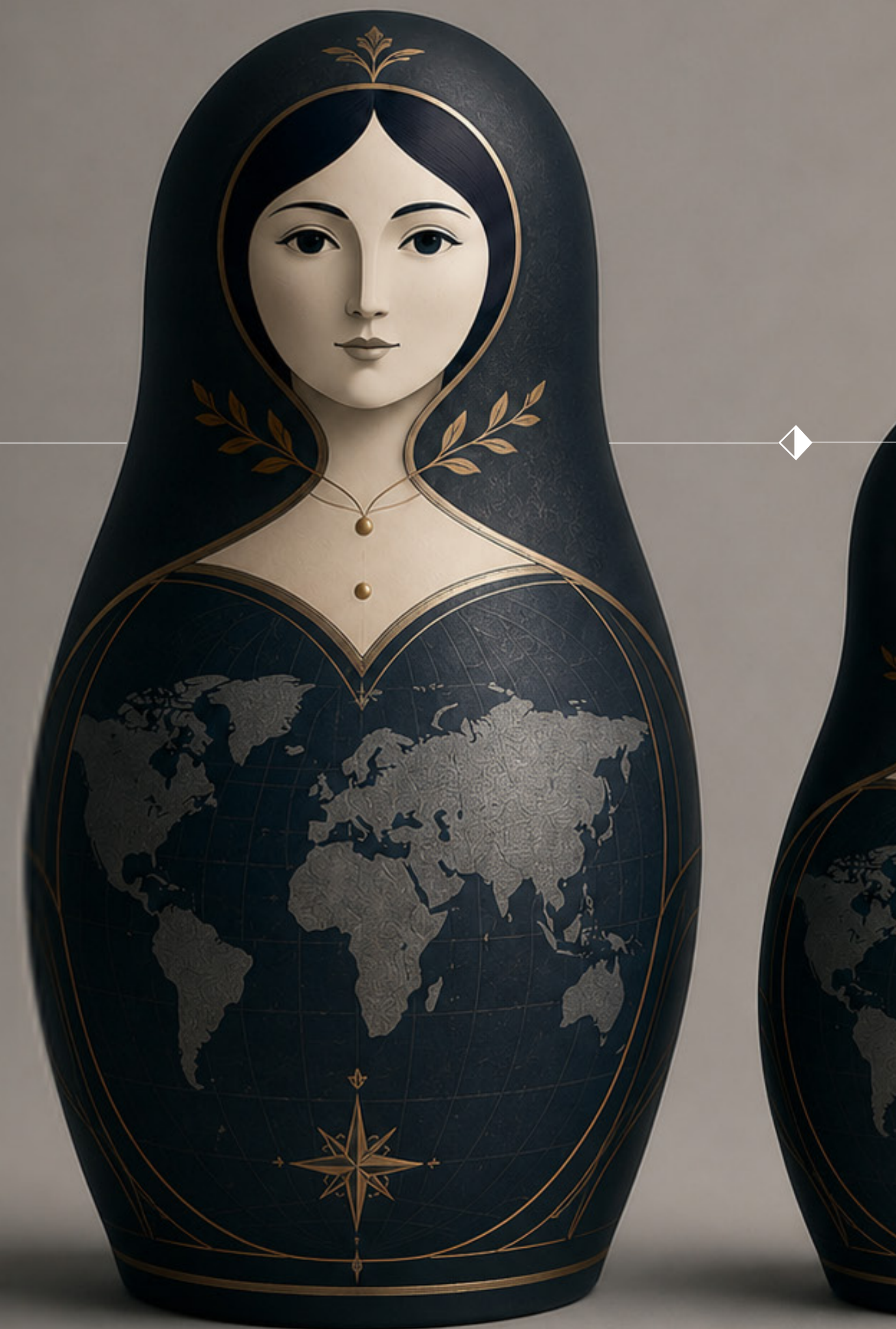
2.3

The Largest Dolls: Multilateral Legitimisation

The outermost dolls represents multilateral disarmament fora, primarily the UN Security Council and the Biological Weapons Convention (BWC). Here, Russia, and, to some extents, China, act as agenda-setting powers, where their statements and documentary material embed the foundational narrative into formal diplomatic language. By invoking treaty mechanisms, Russia reframes strategic disinformation as a legal and technical dispute.

This tier performs two crucial functions. The first is setting a precedent. By raising allegations inside treaty frameworks, Russia makes them appear procedurally legitimate. The second is providing enough ambiguity, through framing claims as “concerns,” “questions,” and “unexplained activities” to allow wide interpretive space. The BWC thus becomes both a megaphone and a shield where disinformation gains authority and where its mechanisms are used to both advance and counter re-emerging allegations.

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2.4



The Middle Dolls: State Production and Strategic Framing

Inside the multilateral shell sit the Ministries of Defence (MODs) and Ministries of Foreign Affairs (MFAs) of aggressor states—the industrial architects of narrative proliferation. For the ‘biolabs’ narrative, it is primarily the Russian MOD and its Radiation, Chemical, and Biological Protection Troops (Ru: PХБЗ, En transliteration: RKhBZ, En translation: RCBД [CBRN]) whose regular briefings by prominent figures such as Lt-Gen Igor Kirillov (2022–2023) and Maj-Gen Aleksei Rtishchev (2024–2025) deliver highly detailed and technical-sounding briefings alleging US biological warfare

networks across Africa, Asia and Eastern Europe. These briefings introduce named US institutions, alleged African and Asian lab locations, and individual scientists and contractors. This specificity gives the foundational narrative technical texture, making it appear investigatory rather than conspiratorial. The Russian MFA reinforces this framing through its spokespersons such as Maria Zakharova. Parliamentary figures, such as Konstantin Kosachev and Oleg Ozerov, echo the claims in diplomatic and media settings, thereby translating military-technical allegations into political and legal grievances.

Smaller dolls are composed of state-aligned and proxy media. For the ‘biolabs’ narrative, these consist primarily of TASS, RIA Novosti, Sputnik, RT, TV Zvezda, and local versions such as Sputnik Africa, African Initiative and Africa Tsargrad, along with Telegram and X networks linked to Russian embassies. MOD briefings are typically reproduced almost verbatim within hours, then repackaged for local audiences in English, French, Arabic and other regional languages. This tier transforms elite claims into consumable stories, and the foundational narrative is transformed into: “US labs in Nigeria,” “Monkeypox experiments in Kenya,” “Relocated Ukrainian biolabs in South Africa,” and similar locally resonant storylines.

2.5



The Smallest Dolls: Local Actors and Interpretive Flexibility

The innermost dolls represent domestic political and media ecosystems. This is where narratives gain power through local meaning-making, following their own logic within cultural, historical and ideological contexts. Key local validators in Africa, for example, include Philip Njemanze (Nigeria), Yves Ekoue Amaïso (Côte d’Ivoire), Dr Ntsikelelo Breakfast (South Africa) and online communities such as Nairaland. These actors reinterpret Russian claims through logics of colonial memory, vaccine distrust,

sovereignty anxieties and elite corruption. In this context key words and phrases are adapted into symbolic synonyms; “DTRA” becomes “Western medical imperialism,” and “biosurveillance” becomes “experiments on Africans.” These interpretations are not imposed externally, instead they are co-constructed by both sources and proliferators, and their local specificity affords credibility within local information ecosystems.

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2.6

Cyclical Reinforcement

The true power of the Matryoshka model lies in iterative feedback loops, or what can be termed “proof-of-concept recycling”. Examples of this in practice have shown that events such as a laboratory closure following a set of allegations may lead to the collapse of cooperative partnerships, following which protests may erupt or governments may demand investigations into the original

cooperative agreements. These kinds of occurrences have been cited by the Russian MOD and MFA as evidence that something sinister existed, and these claims are then refined and repurposed as “evidence” into subsequent allegations targeting other settings. In short, local consequences validate the foundational narrative at the top, which then fuels further amplification downward.

Strategic Implications

This architecture produces three dangerous effects:

- ◆ Erosion of the BWC. By saturating treaty mechanisms with allegations, Russia turns arms control into a battlefield, undermining trust in verification and compliance.
- ◆ Weaponisation of Public Health. WHO inspections, outbreak response, and biosurveillance are reframed as hostile acts.
- ◆ Narrative Sovereignty Capture. States become trapped: defending cooperation can appear as if accepting culpability, while disengaging risks real public-health harm.

The Matryoshka Model reveals that biological disinformation is not a linear propaganda campaign but an iterative narrative ecosystem. From Geneva to Telegram, from Russian generals to African influencers, every tier adds meaning, legitimacy and momentum to the same foundational story. Biological security, once a domain of cooperation, is now a nested information war, one doll inside another, each shaping the next.

2.7

THE MATRYOSHKA MODEL





AFRICA

A Sustained Theatre
for State-Linked
Biological Disinformation

3.1

Africa: A Sustained Theatre for State-Linked Biological Disinformation

International cooperation has been critical to building Africa’s public health and biosecurity infrastructure.

Surveillance partnerships, laboratory upgrades, genomic sequencing efforts and epidemic-response training, all of which have been prominently supported by Global Partnership states, have strengthened outbreak detection and response across West, Central and East Africa. Yet these same collaborations have become recurrent targets of strategic biological disinformation.

Across Africa, biological disinformation has become a persistent and expanding feature of the information environment, thriving in digital and analogue spaces alike as social media platforms, messaging apps and community networks rapidly amplify rumours and falsehoods. Documented disinformation campaigns targeting African publics

exploit deep legacies of inequitable scientific exchange, political fault lines and rising internet connectivity to cast health security cooperation as exploitative or harmful, undermining trust in outbreak responses and routine health interventions. These dynamics are compounded by evolving foreign influence operations and algorithm-driven echo chambers that mix sensationalist content with local anxieties.

Facilities such as the Kenema Government Hospital in Sierra Leone, the Rodolphe Mérieux Laboratory in Goma, and the Kenya Medical Research Institute (KEMRI) have repeatedly and falsely been portrayed as covert Western biological weapons laboratories. These claims rarely rest on evidence but instead

draw plausibility from asymmetries in global scientific cooperation, longstanding suspicions of external influence and the enduring legacy of colonial medical abuse, which are then mobilised to give the narratives local credibility.



Africa: A Sustained Theatre for State-Linked Biological Disinformation (continued)

The narratives operate through a Matryoshka-style, tiered architecture with direct implications for biological arms control. In the smallest, innermost tier, community-level fears, which are often rooted in previous outbreak and understandable medical mistrust, generate rumours that are emotionally resonant and highly adaptive. These bottom-up narratives do not originate in isolation but are interpreted through the foundational biolab frame circulating at higher levels. At the intermediate tier, national-level actors, including journalists, political intermediaries and activist networks, rearticulate and politicise these claims, embedding them in domestic debates about sovereignty, corruption and foreign influence.

At the outermost tier, international state-linked messaging, most prominently from Russian defence and foreign-policy actors, codifies and legitimises these localised stories by integrating them into a broader geopolitical narrative of clandestine US military-biological activities. High-level narratives provide interpretive authority, national discourse supplies political meaning, and local rumours generate the emotive “evidence” that sustains the system.

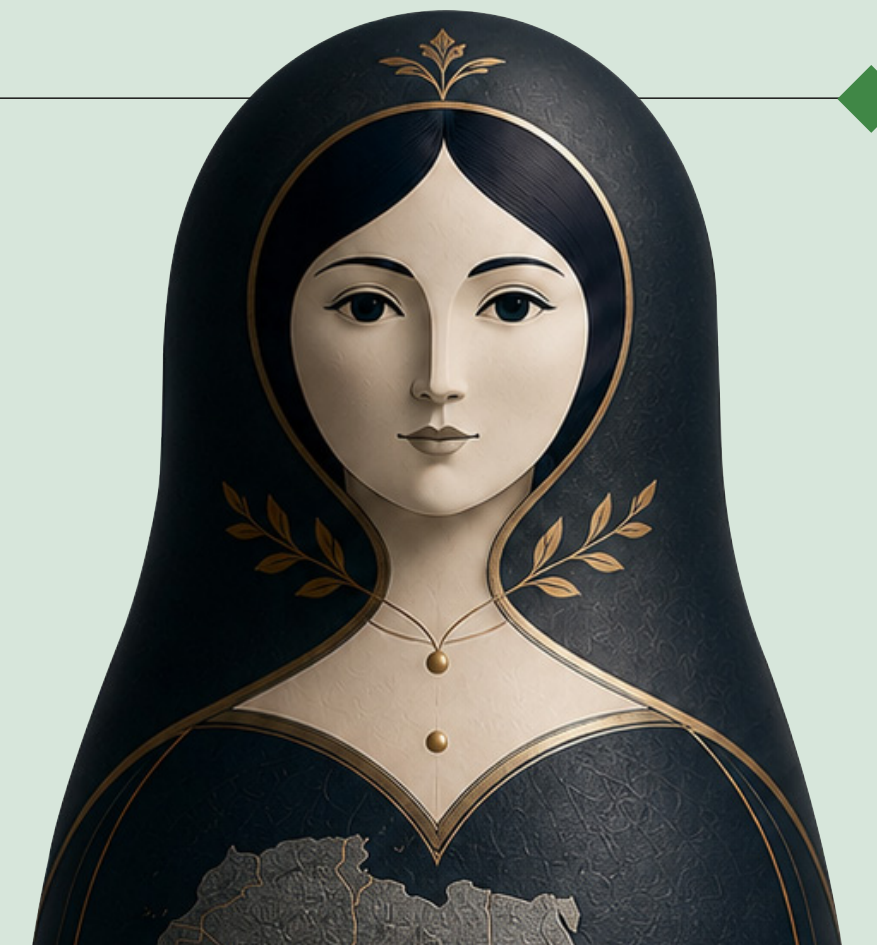
While the foundational “biolab” narrative is global in design, its expression in Africa reflects distinct regional dynamics. In Sierra Leone, for example, disinformation surrounding Kenema fused with local grievances during the Ebola epidemic, transforming

the death of Dr Sheikh Umarr Khan into “evidence” of a neo-colonial plot. In the Democratic Republic of the Congo, narratives circulating during the 2019–22 Ebola outbreak portrayed international responders as agents of exploitation, enabling conspiracy theories about Western extermination campaigns, organ theft, and population control. At KEMRI in Kenya, Russian diplomatic messaging and state media layered the global biolab narrative onto dormant anxieties by framing long-standing US-funded health collaborations as opaque, militarised or in violation of national sovereignty.

The result is a cyclically reinforcing, multi-tiered narrative ecosystem in which local anxieties, geopolitical messaging, and historical memory

intersect. Biological disinformation in Africa is therefore not simply imported; it is continually reshaped through regional insecurities and political realities, and its local consequences are then recycled upward as supposed proof of Western wrongdoing.

This dynamic ensures that false narratives remain durable, adaptable and deeply embedded across the continent’s information landscape.



The result is a cyclically reinforcing, multi-tiered narrative ecosystem in which local anxieties, geopolitical messaging, and historical memory intersect.

3.3



Background

Case Study One: Kenema Government Hospital, Sierra Leone

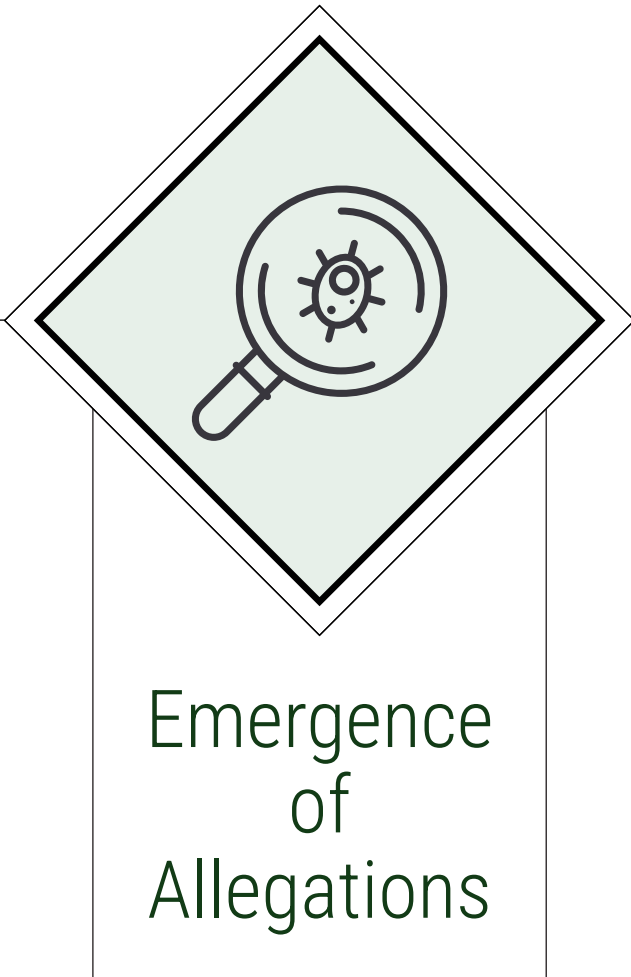
Kenema Government Hospital (KGH), located in eastern Sierra Leone, is one of West Africa's most significant centres for the study and treatment of viral haemorrhagic fevers, particularly Lassa fever¹. For decades, it has served as the primary national facility for diagnosing and managing Lassa cases, while also contributing to regional surveillance, clinical research and capacity building. During the 2014–16 Ebola outbreak, KGH confirmed Sierra Leone's first Ebola cases and rapidly repurposed its Lassa fever infrastructure to support Ebola patient care and diagnostics, placing it at the centre of the national response².

KGH's research capabilities and laboratory upgrades have been supported by a network of international partners: CEPI provided \$10.3 million for Lassa fever research³; the US Defense Threat Reduction Agency (DTRA) has indirectly supported work through Metabiota⁴; and the U.S. Army Medical Research Institute of Infectious Diseases (via the GEIS programme) has partnered on haemorrhagic fever surveillance and training⁵.

These partnerships form part of routine cooperative biosecurity and global health engagement rather than military activity, but the presence of foreign funding and technical contractors has made KGH a recurring focus of biological disinformation.



3.4



Case Study One: Kenema Government Hospital, Sierra Leone

Beginning in 2014, as the Ebola virus spread across Sierra Leone and public anxiety intensified, KGH became the focal point of an emerging foundational biolab narrative that portrayed the hospital as a covert US-funded biological weapons facility⁶. These allegations were not grounded in evidence but were constructed around existing fears of Ebola, longstanding scepticism toward foreign-funded health projects, and the visibility of US-linked contractors such as Metabiota. These narratives were propagated by conspiracy websites⁷ and Russian state-linked outlets such as RT International⁸, which together helped position KGH as apparent “evidence” of a hidden Pentagon laboratory network in Africa by coupling site-specific allegations with broader, generalised claims about US bioweapons activity.

Fact-checking organisations, including PolitiFact⁹ and the Poynter Institute¹⁰, systematically debunked these allegations, finding no evidence of bioweapons research, deliberate release or clandestine US control.

These allegations were not grounded in evidence but were constructed around existing fears of Ebola.

However, these corrections circulated far less widely than the initial claims, illustrating the asymmetric reach of disinformation relative to verification.

As the outbreak worsened, additional narratives emerged. Some alleged¹¹ that Metabiota, because of its DTRA contracts, was conducting secret experiments at KGH or mishandling samples, rumours that later became entangled with US domestic political

narratives involving Hunter Biden and claims of elite-driven pandemic profiteering¹².

Meanwhile the death of Dr Sheikh Umarr Khan, a renowned Sierra Leonean virologist who succumbed to Ebola in 2014, became a potent anchor for speculation. Local media and online commentators questioned the circumstances of his death, portraying him as a victim of foreign sabotage or as someone who had uncovered hidden activities at KGH¹³.

Online blogs went further, insinuating that Khan was targeted in a neo-colonialist plot aimed at undermining Sierra Leone by eliminating its leading virologist¹⁴.

These claims blended global conspiracy tropes with the intense fear and trauma experienced during the epidemic, allowing narratives about foreign control, experimentation, and deliberate harm to take root within Sierra Leone’s collective memory of the crisis.



3.5



Case Study One: Kenema Government Hospital, Sierra Leone

Over time, these narratives evolved into a multi-tiered Matryoshka-style ecosystem. At the international level, Russian Ministry of Defence briefings¹⁵ and Ministry of Foreign Affairs communication¹⁶ highlighted supposed biosafety concerns at KGH, citing theoretical risks, such as blood culturing practices, to insinuate that the lab might have contributed to Ebola transmission. These statements did not present evidence but were framed to raise suspicion about US-linked laboratories in Africa within the broader foundational narrative of clandestine military-biological activity.

Regional outlets further amplified the story. For example, Ghanaian media such as *ModernGhana*¹⁷ printed claims that KGH was part of a WHO-backed scheme enabling military intervention and mass vaccination campaigns. These reports recycled standard biolab conspiracy motifs, portraying public-health partnerships as tools of geopolitical manipulation and sovereignty erosion.

At the community level, WhatsApp groups, radio call-in shows and blogs repeated and embellished the allegations¹⁸ claiming that KGH had leaked Ebola¹⁹.

Theories that philanthropists such as Bill Gates or George Soros secretly controlled the lab reflected longstanding suspicion of international NGOs and deep public trauma in the aftermath of the epidemic²⁰, translating abstract geopolitical claims into emotionally resonant local stories.

At the community level, WhatsApp groups, radio call-in shows and blogs repeated and embellished the allegations claiming that KGH had leaked Ebola.

3.6



Case Study One: Kenema Government Hospital, Sierra Leone

The disinformation ecosystem surrounding Kenema Government Hospital (KGH) reflects the Matryoshka-style, tiered and iterative architecture commonly observed. Each layer builds and validates the others, creating a nested system that has been durable, adaptable and difficult to fully dismantle.

The outermost layer is the foundational global biolab narrative promoted by Russia and other actors: the assertion that the United States maintains a secretive, militarised network of biological laboratories worldwide under the cover of health cooperation. This broad, ambiguous claim serves as a template into which almost any US-associated laboratory can be inserted.

The intermediate layer adapts this global message to regional and national contexts. Russian state-backed media, diplomatic statements and defence briefings referenced KGH within discussions of alleged US “military-biological” activities in the Global South. These messages emphasised the presence of US-linked contractors such as Metabiota and highlighted biosafety concerns, framing KGH as part of a wider pattern of Western exploitation and opaque research practices.

The next layer consists of domestic political and social reinterpretation. In Sierra Leone, the trauma of Ebola and longstanding scepticism toward foreign NGOs provided fertile ground

for reinterpretation. Claims that KGH was a bioweapons facility were reframed as accusations that foreign researchers were conducting secret experiments on Sierra Leoneans or deliberately manipulating outbreaks. The death of Dr Sheikh Umarr Khan became a highly emotive focal point, allowing conspiratorial actors to personalise the narrative and embed it more deeply within local memory.

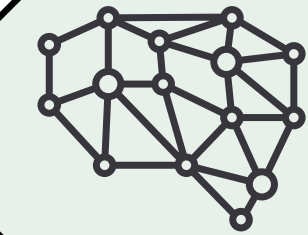
The innermost layer consists of community-level rumours, misinterpretations and user-generated speculation circulating through WhatsApp groups, Facebook pages, local radio and informal networks. These fragments are often disconnected

from their original sources yet are repeatedly cited as “evidence” by actors at higher tiers²¹. This produces proof-of-concept recycling, in which local consequences and rumours are fed back upward to validate broader disinformation claims.

Together, these layers form a self-sustaining Matryoshka system: the global claim provides structure, regional actors supply authority, local adaptation generates emotional resonance, and micro-level reproduction ensures persistence.

3.7

Case Study One: Kenema Government Hospital, Sierra Leone



Why the Narrative Resonates

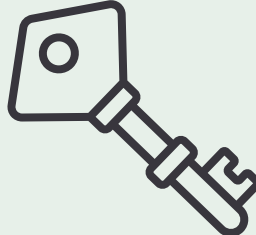
Several factors contribute to the persistence and local traction of the KGH conspiracy narrative.

First, the sociopolitical and emotional context of Sierra Leone during the Ebola outbreak created an environment in which fear and distrust were widespread. KGH, as the country’s primary viral haemorrhagic fever laboratory, was naturally associated with the most frightening aspects of the epidemic, making it an intuitive target for rumours about disease origins and mishandling.

Second, the involvement of foreign contractors and funding streams, including Metabiota and US-linked programmes, fed into long-standing anxieties about sovereignty, exploitation and unequal partnerships. Complex scientific collaborations can appear opaque, especially during crisis conditions, making it easier for adversarial actors to portray them as secretive or harmful.

Third, the death of Dr Sheikh Umarr Khan provided an emotionally powerful focal point for conspiracy narratives. Because Khan was a national hero, stories suggesting he was deliberately killed or silenced resonated strongly and gave conspirators a personalised narrative hook far more compelling than abstract geopolitical claims.

Finally, the broader global architecture of US “biolab” conspiracies provides a ready-made interpretive frame that audiences can easily apply to local events. The KGH narrative fits neatly into recurring themes of foreign control, experimentation and population manipulation that have circulated widely across Africa, Eastern Europe and Asia. When global messages align with local fears, the result is a durable disinformation system.



Key Takeaways

- ◆ **NARRATIVE PATHWAY**
Kenema exemplifies a hybrid top-down and bottom-up Matryoshka dynamic. Local fears during the Ebola crisis generated rumours that were later codified, amplified and legitimised by foreign states-linked actors.
- ◆ **REGIONAL RESONANCE**
Sierra Leone’s experiences with colonial medical exploitation, deep public mistrust of government and traumatic outbreak conditions made allegations of foreign experimentation emotionally and historically plausible.
- ◆ **LOCAL VULNERABILITIES**
The lab’s partnership with US institutions, high-mortality outbreak context and visible presence of foreign researchers created a perception of secrecy and external control that disinformation networks were able to weaponise.

3.8



Background

Case Study Two: Rodolphe Mérieux Laboratory INRB-Goma, Democratic Republic of the Congo

The Rodolphe Mérieux Laboratory, part of the National Institute of Biomedical Research (INRB) in Goma, Democratic Republic of the Congo (DRC), was established in response²² to the 2020 Ebola outbreak to decentralise testing and strengthen local outbreak response. Operational since 2023, the laboratory is funded by USAID and the Mérieux Foundation and features both Biosafety Level 2 and 3 (BSL-2/3) facilities²³.

As a permanent reference laboratory for viral haemorrhagic fevers, including Ebola, the facility also supports surveillance for emerging infectious diseases. It plays a critical role in diagnostics, research, and public-health preparedness, ensuring rapid detection and management of outbreaks in eastern DRC²⁴. The lab's establishment and operation are consistent with standard global health protocols and reflect routine cooperative biosecurity capacity-building rather than military or covert activity.



3.9



Emergence
of
Allegations

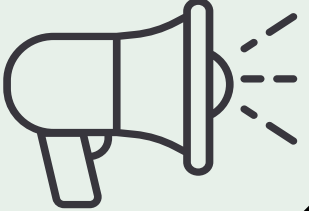
Case Study Two: Rodolphe Mérieux Laboratory INRB-Goma, Democratic Republic of the Congo

Since its establishment, the Rodolphe Mérieux Laboratory has been the target of biological disinformation narratives, mirroring patterns observed in other African Ebola-response labs such as the Kenema Government Hospital in Sierra Leone. The foundational biolab narrative positions US-funded laboratories as part of a covert global network of biological weapons facilities, allowing existing global conspiracy themes to immediately attach themselves to the laboratory’s operations.

During the 2019–2022 Ebola outbreak, regional media and social-media posts circulated assertions that Ebola itself was a “dangerous biological weapon,”²⁵ often linking the virus to supposed Western experimentation. As with other biolab conspiracies, these narratives evolved into a web of more elaborate claims: the outbreak was framed as a “Western extermination campaign,”²⁶ part of organ-theft plots²⁷ (an allegation that was also made by Russian state

media towards the White Helmets in Syria²⁸), or even a ruse orchestrated by multinational actors. Common to many of these narratives was the belief that “white foreigners, international pharmaceutical corporations, and oil companies” were responsible, with Ebola portrayed as the result of exploitative experimentation, population control, or attempts to sterilise and depopulate the DRC²⁹.

At the local level, influential figures such as anti-racism activist Egountchi Behanzin³⁰ have amplified these narratives, labelling the Rodolphe Mérieux Laboratory a “military laboratory” and asserting that it conducts secretive research on the local population. The narrative has been particularly potent because it leverages existing fears about foreign intervention and perceived exploitation in the region, allowing a global disinformation template to be reinterpreted through local historical memory.



Narrative
Amplification

More recently, between 2024 and 2025, these claims resurfaced at higher tiers of the disinformation ecosystem. Russian state-owned outlets, including Sputnik³¹, warned that the laboratory “can leak viruses” and highlighted its US and French funding, implying opaque and potentially dangerous research practices. Similarly, the Russian Department of consumer protection and public health, Rospotrebnadzor³², framed the laboratory’s operations as reflective of an “irresponsible approach of Western countries when working with dangerous infections on the territory of third countries,” deliberately avoiding direct accusations but embedding the case within the broader foundational narrative of Western military-biological recklessness.

3.10



Case Study Two: Rodolphe Mérieux Laboratory INRB-Goma, Democratic Republic of the Congo

The Rodolphe Mérieux Laboratory case reflects the same Matryoshka-style, tiered and self-reinforcing architecture characteristic of contemporary biological disinformation campaigns.

At the outermost layer sits the foundational global biolab narrative: a sweeping, ambiguous claim that the United States operates a clandestine worldwide network of biological laboratories under the guise of public-health cooperation. This storyline provides a template and interpretive frame into which almost any US-associated laboratory can be inserted.

The intermediate layer involves strategic state-linked amplification, in which Russian state media and official bodies adapt this broad narrative to the DRC. Messaging highlights the laboratory’s US and French funding, its BSL-3 capacity, and its role in Ebola surveillance. Biosafety concerns, dual-use potential and operational opacity are emphasised to convert a general geopolitical narrative into a specific suspicion attached to INRB-Goma.

The next layer consists of domestic political and social reinterpretation. Activists, commentators, and community figures filter these claims through long-standing anxieties about foreign

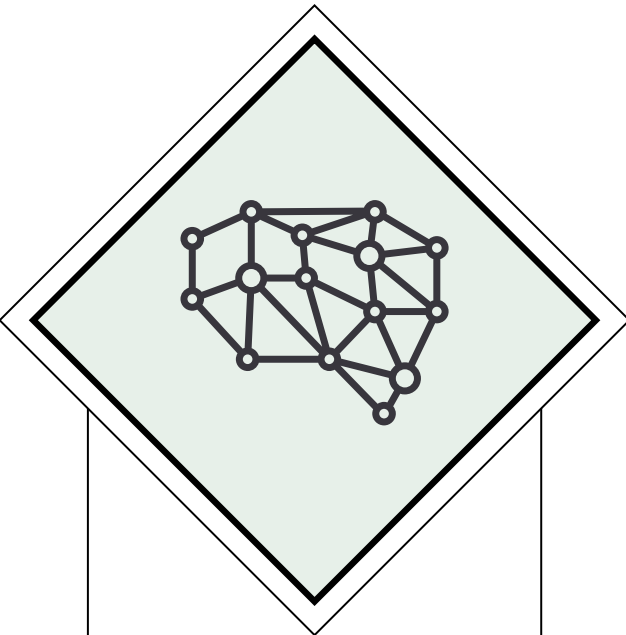
extraction, unequal partnerships and memories of crisis during past Ebola outbreaks. In this process, the laboratory is reframed as a site of hidden experimentation, biological harm or neo-colonial exploitation, translating a global script into a locally resonant story.

At the innermost micro-layer, rumours circulate across social media, blogs and informal networks. Screenshots, partial documents and isolated facts are shared without context, accumulating into a growing body of claims that are later recycled upwards as “evidence” by higher-tier actors. This proof-of-concept recycling allows grassroots misinformation to reinforce and stabilise the overarching disinformation narrative.

This proof-of-concept recycling allows grassroots misinformation to reinforce and stabilise the overarching disinformation narrative.

Taken together, this nested architecture enables the Rodolphe Mérieux Laboratory disinformation narrative to persist despite repeated factual corrections, making it both resilient and highly adaptable to changing political and epidemiological contexts.

3.11



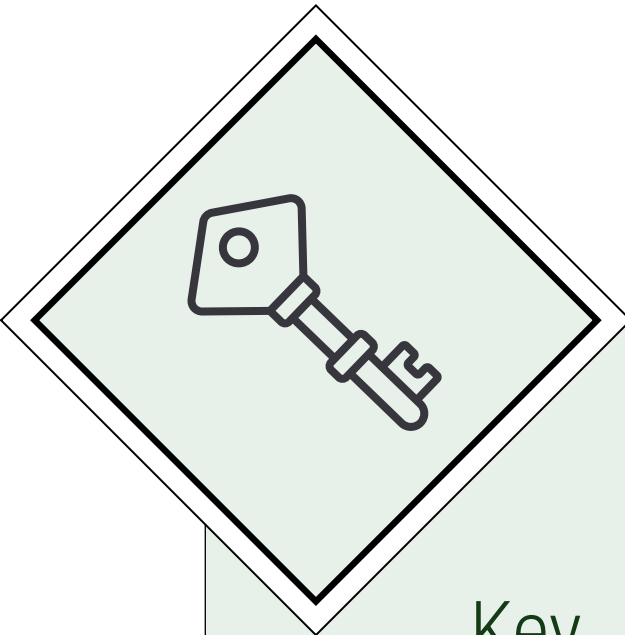
Why the Narrative Resonates

Case Study Two:
Rodolphe Mérieux Laboratory INRB-Goma,
Democratic Republic of the Congo

The claims surrounding the Rodolphe Mérieux Laboratory follow the same pattern seen in other US-linked laboratory narratives across Africa. The story draws strength from multiple intersecting dynamics that make it particularly adherent and challenging to dispel.

First, the narrative taps into the emotional residue of past Ebola outbreaks in the DRC. During periods marked by fear, trauma and deep mistrust in institutions, a facility associated with high-fatality pathogens

becomes an intuitive focal point for public anxiety. Second, the laboratory’s international partnerships are easily reframed as evidence of outside control. These connections are cast not as collaborative health investments but as signs of secrecy and exploitation. Third, local actors translate the narrative into a personalised, culturally resonant story, linking community-level grievances to the broader global biolab disinformation ecosystem. When global claims align with lived experience and historical memory, the result is a durable and self-sustaining belief system.



Key Takeaways

- ◆ **NARRATIVE PATHWAY**
Rodolphe Mérieux Laboratory represents a hybrid Matryoshka dynamic, in which outbreak-driven local narratives are reinforced, legitimised and extended by higher-tier state-linked disinformation.
- ◆ **REGIONAL RESONANCE**
The DRC’s history of foreign extraction, weak institutional trust and recurrent Ebola crises made claims of covert bioweapons activity emotionally and politically plausible to some audiences.
- ◆ **LOCAL VULNERABILITIES**
The lab’s international partnerships, disease-surveillance mandate and presence during active outbreaks created openings for accusations of sample harvesting, pathogen release and experimentation that were subsequently weaponised within the global biolab narrative.

3.12



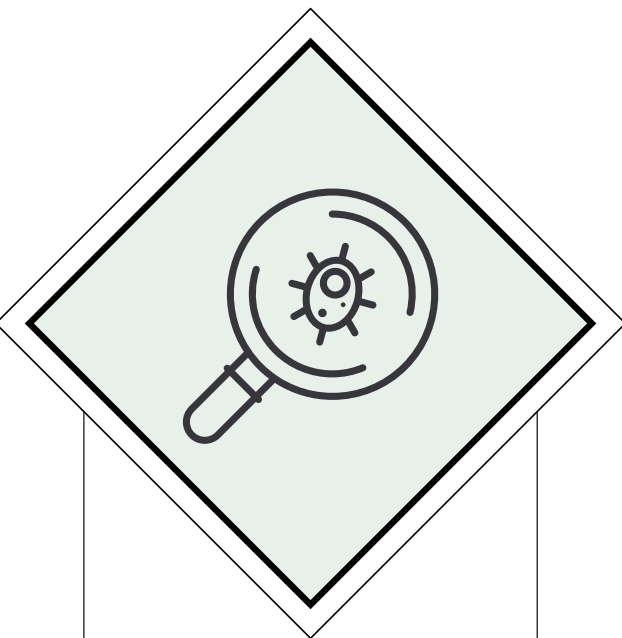
Case Study Three: KEMRI, Kenya

The Kenya Medical Research Institute (KEMRI), established in 1979 through the Science and Technology Act, functions as Kenya’s national biomedical research authority and one of East Africa’s most prominent public-health institutions³³. Across four decades, it has developed extensive research capabilities in infectious disease surveillance, diagnostics, vaccine research, environmental health, parasitology, genomics and outbreak response³⁴.

KEMRI hosts multiple BSL-2 and BSL-3 laboratories and serves as a regional reference laboratory for influenza, polio, malaria and emerging pathogens³⁵. Since the early 2000s, KEMRI has expanded its international collaborations, partnering with the US CDC, DTRA, NIH, the Wellcome Trust, the Japanese International Cooperation Agency, the European CDC and African academic institutions³⁶. These collaborations support laboratory upgrades, genomic sequencing, antimicrobial-resistance surveillance, epidemiological training and early warning systems that constitute the backbone of Kenya’s public-health and biosecurity architecture.



3.13



Emergence
of
Allegations

Case Study Three: **KEMRI, Kenya**

The allegations targeting KEMRI emerged as part of the global foundational biolabs narrative, a longstanding conspiracy system revived and amplified by the Russian state during and after the 2022 invasion of Ukraine. In May 2022, the Russian Embassy in Kenya publicly questioned the existence of a “US- funded biolab” at KEMRI, naming it among “30 countries” supposedly hosting Pentagon-linked laboratories³⁷. This messaging was closely aligned with Russia’s international campaign accusing the United States of covertly running a network of biological weapons facilities through public-health collaborations.

The embassy’s posts insinuated, without evidence, that US Defense Threat Reduction Agency (DTRA) support to KEMRI might violate the Biological Weapons Convention. Russian state media, including Sputnik³⁸ and affiliated channels, subsequently integrated Kenya and KEMRI into broader claims about US “military-biological activities” across Africa³⁹. These materials often deployed strategic ambiguity rather than direct accusations, a technique designed to raise suspicion while avoiding falsifiable specifics.

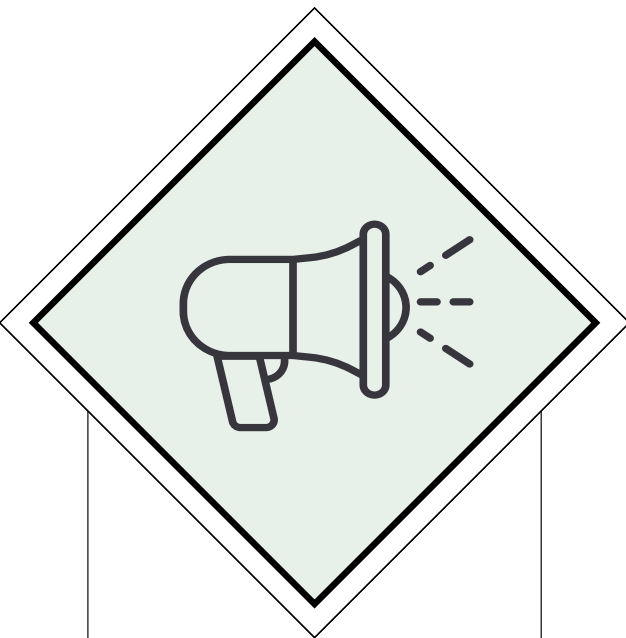
These narratives intensified following a 2024 press conference by a senior official in Russia’s radiological/CBRN defence apparatus. The official claimed that Africa, including Kenya, had seen a rapid expansion of US-linked biological laboratories⁴⁰. According to this narrative, such labs, including the one at KEMRI, allegedly conduct “dual-use research,” potentially involving dangerous

pathogens, and may operate under opaque conditions without meaningful local oversight. Russian messaging has at times hinted that African states and populations are deprived of control over these purported activities, thereby framing cooperative science as a form of sovereign erosion⁴¹.

These claims fit within a decades-old disinformation tradition targeting Western-funded public-health collaboration. The emphasis on funding links (especially DTRA), the portrayal of cooperative health work as secretive, and the repeated appeal to historical anxieties about external exploitation are established hallmarks of Russia’s biological-security disinformation playbook⁴².

These materials often deployed strategic ambiguity rather than direct accusations, a technique designed to raise suspicion while avoiding falsifiable specifics.

3.14



Localisation
of the
Narrative

Case Study Three: KEMRI, Kenya

As in other regions where this narrative has taken hold, the allegations about KEMRI did not remain confined to their initial diplomatic source. Once introduced to Kenya’s domestic information space, the claims were reframed through local concerns about foreign influence, donor dependency, and inequalities in global scientific partnerships⁴³. Within this context, KEMRI was accused of participating in undisclosed US-run research projects, conducting risky experiments on “particularly hazardous pathogens,” or allowing excessive access to foreign

scientists, despite operating under Kenya’s national regulatory, ethical and biosafety frameworks⁴⁴. These claims echoed patterns seen in Georgia, Ukraine and several African countries where collaborative laboratories were recast as covert military sites⁴⁵. As in those cases, disinformation selectively blended real elements such as foreign funding and joint training programmes with misinterpretations and speculation to create the appearance of hidden activity, allowing the foundational narrative to be locally reinterpreted and reproduced.



3.15



Case Study Three: **KEMRI, Kenya**

The KEMRI case illustrates the Matryoshka-style, tiered and iterative architecture employed in contemporary biological disinformation campaigns. At the outermost layer lies the foundational biolab narrative: a broad, ambiguous claim promoted by Russia that the United States operates a secretive global network of biological laboratories for military purposes. This overarching story provides the interpretive frame into which KEMRI could be inserted.

The intermediate layer involves strategic state-linked amplification, in which Russian state media, government ministries and diplomatic channels adapted this claim to Kenya. KEMRI entered this tier when the Russian Embassy in Nairobi publicly referenced the institution as part of the alleged US laboratory network, thereby giving the narrative diplomatic authority and international visibility.

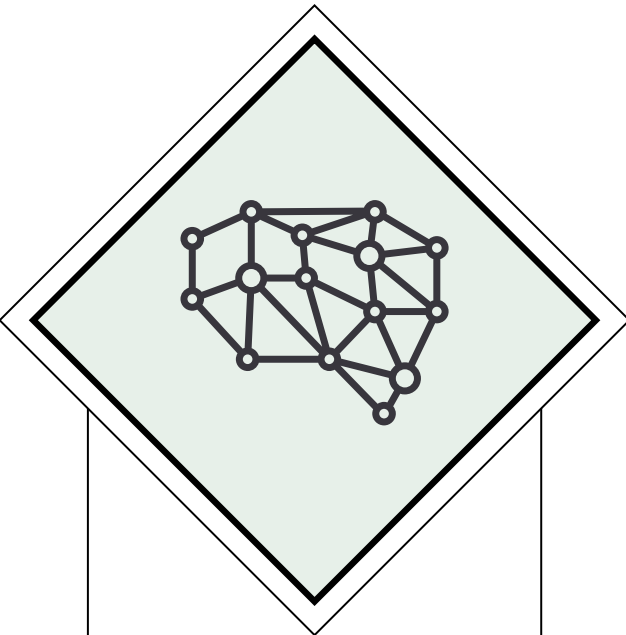
The next layer consists of domestic reinterpretation and political framing. Kenyan audiences filtered these claims through existing anxieties about unequal partnerships, donor dependence and foreign scientific influence, allowing KEMRI to be recast as a symbol of compromised sovereignty rather than a national public-health asset.

At the innermost micro-layer, individuals, fringe channels, and low-tier platforms circulated screenshots, partial documents, and user-generated commentary. These fragments persist online and are later recycled upward as “evidence” in higher-tier messaging, producing proof-of-concept recycling that sustains the overall narrative.

This multi-tiered structure allows disinformation to endure even after official clarifications and makes it exceedingly difficult to eradicate.

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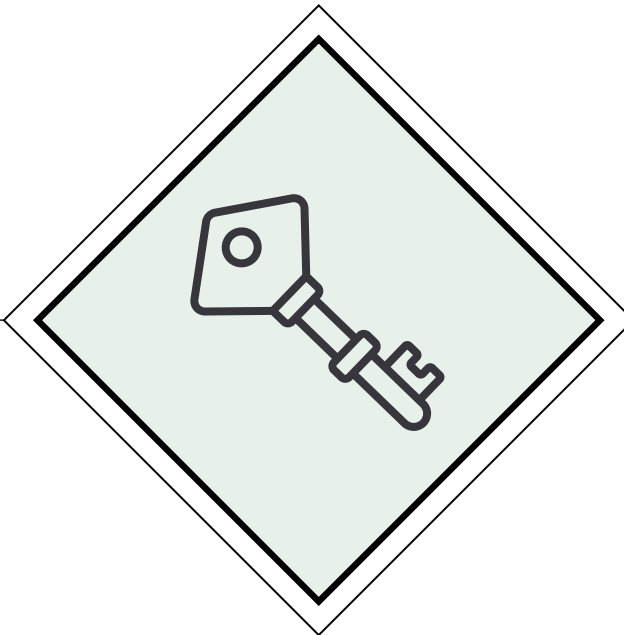
3.16



Why the Narrative Resonates

Case Study Three: KEMRI, Kenya

Recent analysis by regional disinformation monitoring organisations shows that claims about US-linked laboratories in Africa, including KEMRI, are repeatedly amplified through a predictable pattern. Russian-affiliated content is copy-pasted across multiple outlets, then recycled on social-media and fringe platforms⁴⁶. The narrative draws power from the same foundational tropes seen globally, while invoking emotionally resonant themes such as exploitation, inequality and distrust, which gives an externally generated narrative local psychological traction⁴⁷.



Key Takeaways

- ◆ **NARRATIVE PATHWAY**
The KEMRI narrative was primarily top-down, introduced through Russian state-linked messaging and only weakly localised, reflecting an externally driven Matryoshka pattern rather than a fully organic domestic mobilisation.
- ◆ **REGIONAL RESONANCE**
The claims drew on existing East African sensitivities around medical sovereignty, foreign research agendas and historical patterns of extractive science, giving an imported narrative local plausibility.
- ◆ **LOCAL VULNERABILITIES**
KEMRI’s visibility, US-linked partnerships and central role in pathogen surveillance created structural openings for mis-framing, allowing outside actors to position it within a global “US biolab network” narrative.

3.17



Case Study Four: Guinea

Guinea plays a central role in West Africa’s infectious-disease architecture, particularly following the 2014–16 Ebola epidemic. In the years since, the United States has supported major upgrades to Guinea’s public-health infrastructure through initiatives such as the Global Health Security Agenda (GHSA), USAID programmes, and laboratory-strengthening partnerships⁴⁸.

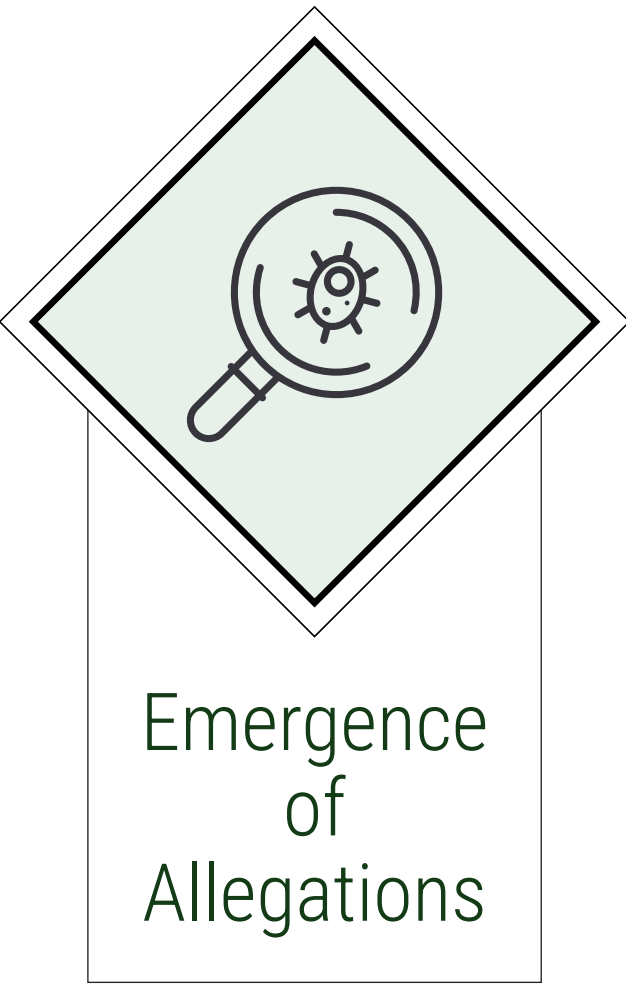
US-supported laboratories in Guinea have been equipped to diagnose priority pathogens including Ebola, Lassa fever, brucellosis, avian influenza, anthrax and rabies, significantly reducing diagnostic

turnaround times and improving outbreak response. In parallel, broader US assistance has targeted community-level health systems, agricultural productivity, and economic resilience. The United States has contributed an estimated \$40 million to strengthen Guinea’s health sector, with investments aimed at cooperative biosecurity and epidemic preparedness rather than military or intelligence-related research.

Against this backdrop, Guinea became a new focal point for Russian foundational “biolab” disinformation beginning in late 2023.



3.18



Case Study Four: Guinea

The allegations emerged on 24 December, when Maj-Gen Aleksei Rtishchev, Deputy Chief of the Russian MOD’s Radiation, Chemical, and Biological Protection Troops (Ru: PX53, En transliteration: RKhBZ, En translation: RCBD [CBRN]), gave a briefing accusing the United States of running covert biological programmes across Africa⁴⁹. Guinea was listed alongside Ghana, Djibouti, Nigeria, Senegal, Zambia and Kenya as sites of purported US activities framed as threatening to Russian geopolitical interests.

Russian officials claimed, without evidence, that the United States has developed a biological risk-management system “tested” in Ukraine and Georgia and now deployed in Africa⁵⁰. They alleged that US-supported laboratories

in Guinea provide the Pentagon with access to dangerous pathogens, enable monitoring of Russian activity in potential deployment zones, and support US influence in regions where Russia seeks economic partnerships.

In the Guinean context, Russia focused particularly on Lassa fever research, framing US involvement not as public health collaboration but as a strategic attempt to undermine Russian-Guinean cooperation.

This reinterpretation of disease surveillance as geopolitical sabotage reflects a now-familiar pattern in which high-profile pathogens are used as vehicles for strategic insinuation.



Rtishchev’s briefing was amplified across the Russian state-aligned information ecosystem, including TASS⁵¹, RIA Novosti⁵² and military-affiliated Telegram channels. Messaging relied on familiar rhetorical tactics: selective pairing of facts, strategic ambiguity, and suggestive questions framed as “coincidences,” rather than falsifiable claims.

From these high-tier channels, the narrative diffused into regional African media and was often reprinted verbatim in social-media spaces where it linked US health security work with themes such as population control, biowarfare and neocolonial interference.

This amplification pathway mirrors Russia’s earlier campaigns in Ukraine⁵³ and Georgia, where allegations targeting the Lugar Center⁵⁴ or Ukrainian public-health laboratories circulated across multiple tiers and through repetition and iteration across platforms.

3.19



Case Study Four: Guinea

The Guinea allegations map directly onto the Matryoshka-style tiered and iterative disinformation architecture observed across other global cases. Rather than originating locally, the narrative was introduced as part of a broader, internationally framed foundational biolab narrative that positions Guinea as one node within a purported network of US-linked biological facilities.

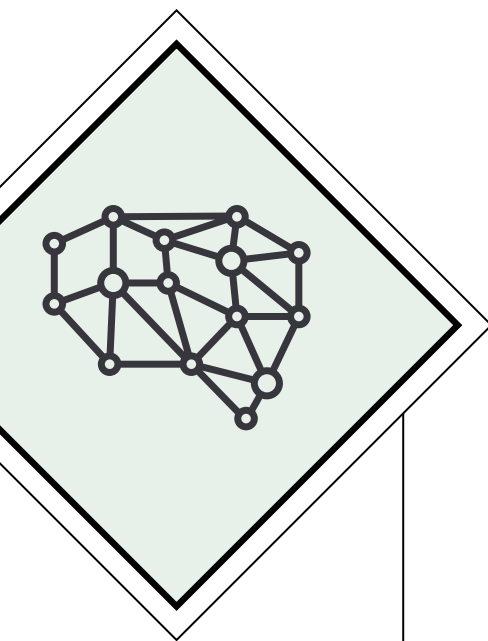
The themes deployed in the Guinea case encompassed foreign laboratories, covert pathogen collection, and geopolitical intent, and closely

replicated the rhetorical and structural elements used in campaigns targeting Ukraine, Georgia, Armenia, Kenya and Nigeria.

However, the narrative was locally inflected through references to Guinea’s fragile healthcare system, US financial assistance (reported as 40 million USD), and research into Lassa fever. These elements were further framed within claims that Washington’s actions aimed to undermine Russian-Guinean economic cooperation. Despite these contextual adaptations, the allegations do not stem from Guinea-specific grievances but rely on a pre-existing narrative template overlaid onto national health infrastructure.

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3.20



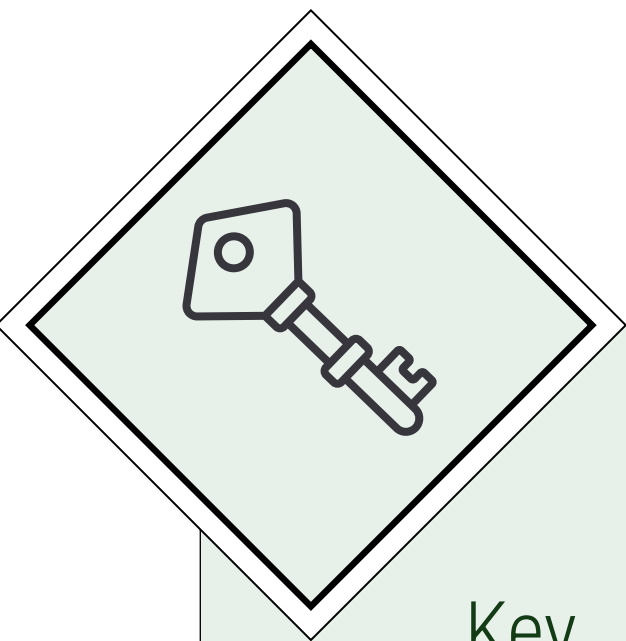
Why the
Narrative
Resonates

Case Study Four: Guinea

The Guinea narrative gained traction because it aligns with long-standing anxieties about foreign involvement in national health systems, particularly in countries with histories of unequal partnerships and external intervention. Technical opacity around high-containment laboratories, combined with public sensitivity following Ebola and other regional outbreaks, makes allegations of covert research or pathogen manipulation intuitively plausible to some audiences.

The claims also tap into broader regional concerns about sovereignty, resource extraction and geopolitical competition in Africa. By framing US-supported laboratories as strategic assets rather than public-health infrastructure, the narrative dovetails with pre-existing suspicions regarding Western motives in the region.

Finally, the allegations resonate because they provide a simple, emotionally compelling explanation for complex public-health challenges. In a context where disease outbreaks are recurrent and institutional trust is uneven, narratives suggesting hidden foreign agendas offer a coherent storyline that links local fears to global conspiratorial frameworks.



Key Takeaways

- ◆ **NARRATIVE PATHWAY**
The Guinea case reflects a top-down Matryoshka dynamic, in which a pre-existing foundational narrative is injected by senior Russian defence officials and disseminated through state-linked media before diffusing into regional and online ecosystems.
- ◆ **REGIONAL RESONANCE**
The claims gain plausibility by tapping into concerns about sovereignty, foreign influence and the legacy of unequal health partnerships, making a generic narrative feel locally relevant.
- ◆ **LOCAL VULNERABILITIES**
By framing US-supported laboratories as strategic military assets rather than cooperative health infrastructure, the campaign seeks to erode trust in international biosecurity cooperation and weaken US partnerships in West Africa.

3.21



Case Study Five: Nigeria

Nigeria has long served as a regional hub for infectious-disease surveillance and outbreak response. National and international research collaborations support work on viral haemorrhagic fevers, Lassa fever and emerging zoonotic threats, forming a core pillar of West Africa’s cooperative biosecurity architecture.

Monkeypox, a zoonotic orthopoxvirus endemic to parts of West and Central Africa, has periodically caused outbreaks in the region since the 1970s. In recent years, global concern intensified as cases appeared in multiple non-endemic countries. According to the World Health Organization⁵⁵, the strain implicated in

recent international outbreaks belongs to the West African clade and is genetically linked to strains circulating in Nigeria.

Against this backdrop, Nigeria became the focus of a new wave of foundational biolab disinformation following statements by senior Russian officials attempting to link US-supported laboratories within the country’s public-health infrastructure to the origins of monkeypox.



3.22

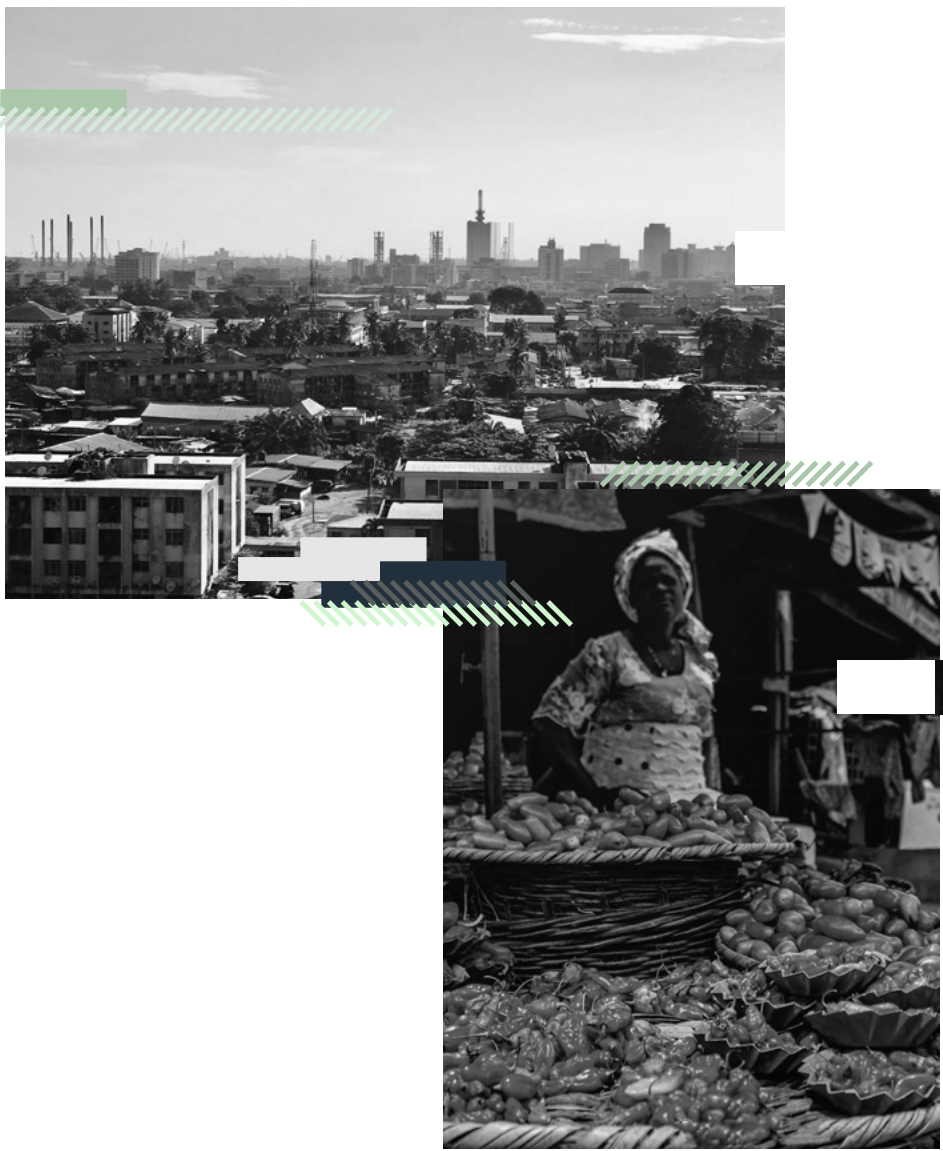


Case Study Five: Nigeria

The claims originated primarily from Lt-Gen Igor Kirillov, then-head of the Russian MOD’s Radiation, Chemical and Biological Protection Troops (Ru: PXБЗ, En transliteration: RKhBZ, En translation: RCBД [CBRN]), who in 2022–2023 alleged that the United States was conducting military-biological activities in Nigeria. Kirillov asserted that the US operated several laboratories in Abuja, Zaria and Lagos⁵⁶ as part of a broader Pentagon-run biological programme. Although he provided no evidence, he insinuated that their activities could be connected to the global spread of monkeypox, embedding Nigeria within the global US “biolab” narrative.

In his public statements, Kirillov drew attention to what he termed a “strange coincidence”⁵⁷: that the West African monkeypox strain identified in the global outbreak had previously been detected in Nigeria, a country he suggested hosted US-controlled laboratories. This juxtaposition was presented as a basis for suspicion, despite lacking scientific or epidemiological grounding. The allegations were accompanied by claims that these laboratories might have breached international biosecurity norms or even facilitated research with potential terrorist application, thereby invoking treaty violations and security fears without evidentiary support⁵⁸.

The narrative was further embellished with references to past laboratory incidents in the United States involving improperly stored smallpox-related samples⁵⁹. Russian officials also pointed to discussions at the 2021 Munich Security Conference⁶⁰ in which hypothetical monkeypox outbreak scenarios were examined, presenting these exercises as suggestive of pre-existing US awareness or planning. Although such scenario modelling is routine in international security and health preparedness, it was framed as suspicious when juxtaposed with subsequent real-world outbreaks, allowing speculative linkage to substitute for causal evidence.



3.23



Case Study Five: Nigeria

The messaging fits neatly into Russia’s broader global disinformation strategy targeting Global Partnership-backed public-health collaborations. Rather than presenting concrete accusations, Russian statements relied heavily on innuendo, selective fact pairing and strategic ambiguity. These techniques were designed to raise suspicion while avoiding making claims that could be directly disproven.

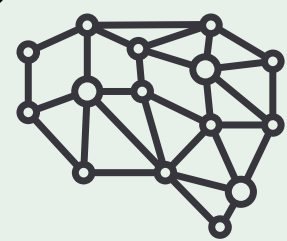
Russian state media, including RT⁶¹ and Sputnik⁶², amplified Kirillov’s remarks and codified them within the foundational US “biolabs” narrative circulating across Africa, Eastern Europe and Central Asia.

From there, the claims migrated into lower tiers of the information ecosystem. Some regional outlets reproduced the narrative with minimal scrutiny; social-media users recycled and reframed it; and fringe platforms integrated it into longstanding conspiracy structures concerning biological warfare and Western exploitation.

This pattern of high-tier state insinuation followed by multi-tiered diffusion and local reinterpretation mirrors the dynamics observed in Russian disinformation campaigns targeting laboratories in Ukraine, Georgia and Kenya, illustrating the operation of a Matryoshka-style narrative system.

These techniques were designed to raise suspicion while avoiding making claims that could be directly disproven.

3.24

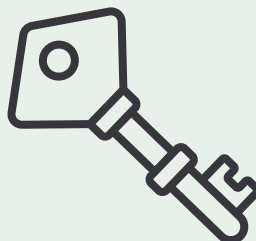


Why the
Narrative
Resonates

Case Study Five:
Nigeria

As with similar biolab campaigns across Africa, the allegations leverage pre-existing social and political anxieties. In contexts shaped by historical memories of unequal research partnerships and colonial extraction, narratives portraying Western-funded laboratories as opaque and exploitative can gain traction even in the absence of evidence.

The recurrence of emotionally charged themes enables the narrative to embed itself within broader concerns about global health inequities. By framing monkeypox as the potential outcome of foreign research activity rather than a naturally occurring zoonotic event, the disinformation provides a simple, morally charged explanation for a complex epidemiological reality, linking local disease experience to a global conspiratorial framework.



Nigeria Key
Takeaways

- ◆ **NARRATIVE PATHWAY**
The Nigeria monkeypox narrative followed a top-down Matryoshka pathway, originating with Russian defence officials and cascading through state media before diffusing into regional and social-media ecosystems.
- ◆ **REGIONAL RESONANCE**
The allegation tapped into longstanding West African sensitivities about foreign research agendas, extractive scientific practices and inequities in global health governance, giving external insinuations local plausibility.
- ◆ **LOCAL VULNERABILITIES**
Nigeria's role as a regional diagnostic and surveillance hub, combined with US-supported laboratory partnerships and the circulation of monkeypox strains domestically, created openings for mis-framing that allowed routine public-health cooperation to be recast as suspicious or malign.

3.25



Cross-Case Synthesis: Africa in the Matryoshka System

FROM OUTBREAKS TO INFORMATION WAR

Kenema, Goma, KEMRI, Guinea and Nigeria appear to describe different stories: Ebola, Lassa fever, biosurveillance, monkeypox and laboratory assistance. Yet they all enter the same disinformation system because disease outbreaks in Africa are already politically charged by tragic histories of colonial medicine, extractive research and humanitarian intervention. Outbreaks create moments of fear and grievance and laboratories become symbols of foreign power. This analysis shows that once these conditions exist, the foundational biolab narrative does not have to persuade, it only has to attach to a susceptible site of resonance to remain durable.

THE BIOLAB NARRATIVE AS A CONTINENTAL FRAME

At the outermost tier, Russian defence and foreign-policy institutions provide the same master story⁶³ about malign Western involvement in biological laboratories. In Africa this frame has been applied to everything from Ebola labs to agricultural research facilities. The frame supplies meaning in advance. Once invoked, it turns routine biosafety, genomic sequencing and outbreak response into suspected weapons activity.

HOW LOCAL TRAUMA BECOMES GEOPOLITICAL PROOF

Africa’s middle tiers are shaped by crisis and memory. Ebola deaths in Sierra Leone, violence in eastern Congo, and distrust of Western NGOs

create emotionally powerful narratives that local commentators interpret as exploitation or experimentation. Russian state media has harvested these locally generated stories as evidence that Africans themselves reject Western laboratories.

WHERE HISTORY, DISEASE AND POWER INTERSECT

At the lowest tier, biological disinformation draws on lived experience. The Ebola epidemics have caused repeated trauma to local communities who have been forced to square personal grief and community losses with inadequate foreign intervention. In this context, rumours about Kenema, KEMRI or Guinea tap into deep emotional fissures in the absence of compelling counter-narratives.

WHAT AFRICA REVEALS ABOUT BIOLOGICAL DISINFORMATION

Africa shows how outbreak trauma and colonial memory can turn public health infrastructure into a vulnerable site of information hostility. The very existence of foreign-supported laboratories is an issue of deep sensitivity and potential discord due to long histories of oppression and extraction. Such deep fissures are ripe for exploitation by contemporary information warriors using historic legacies to secure strategic futures in a critical region.



ASIA-PACIFIC

Strategic Narratives
in a High-Risk
Biosecurity Region

Asia-Pacific: Strategic Narratives in a High-Risk Biosecurity Region

The Asia-Pacific region has long been a focal point of biological disinformation, shaped by its complex biosurveillance needs, its colonial and Cold War histories, and its dense network of foreign-supported laboratories.

It is also home to rapidly expanding biotechnology sectors accompanied by growing investment in biodefence, and highly uneven capacities for biosafety and biosecurity oversight. Cooperative Threat Reduction activities, particularly those involving US Department of Defense (DOD)-funded research, have deep historical roots in the region, dating back to post-Second World War reconstruction and early military health cooperation. This legacy provides fertile terrain for malign actors seeking to frame contemporary public-health collaboration as evidence of the same foundational “biolab” narrative that underpins biological disinformation elsewhere.

Across the region, state actors (most notably Russia and China) have repeatedly leveraged this foundational biolab frame, alleging that US-supported facilities serve as fronts for clandestine weapons development. These claims gain traction in part because the Asia-Pacific is uniquely exposed in biosecurity terms: it remains highly vulnerable to emerging infectious diseases, as demonstrated by outbreaks of SARS, avian influenza and COVID-19. However, accusations in the Asia-Pacific rarely appear as bold, direct claims. Instead, disinformation more often relies on the same strategic ambiguity observed in other regions which incorporate subtle insinuations about “hidden” research agendas or suggestions that DOD-supported

programmes mask undeclared military objectives. In a region where dual-use research, biodefence activity and outbreak response already sit close together, such ambiguity makes misperception easy and correction difficult. These insinuations invite actors in the lower tiers of the Matryoshka system to reinterpret routine research activity as suspicious, thereby enabling the narratives to diffuse organically through national political discourse.



Asia-Pacific: Strategic Narratives in a High-Risk Biosecurity Region (continued)

Regional political culture further shapes the uptake of these narratives. Biosecurity in much of the Asia-Pacific is tightly linked to agricultural stability, zoonotic disease spillover and food security, rather than the national-security framing that dominates US discourse. As a result, the presence of foreign defence institutions in civilian agricultural or veterinary research can trigger sensitivities around sovereignty and the perceived militarisation of public-health systems. Disinformation campaigns strategically exploit this regional nuance, portraying US-funded laboratories not only as security risks, but as threats to local livelihoods and economic resilience, especially in societies where disease outbreaks directly threaten economic and social stability.

The region's disinformation dynamics also align closely with the Matryoshka model observed globally. At the outermost tier, foundational narratives provide the interpretive frame. At the intermediate tier, these themes are adapted by state media outlets and official spokespeople to reflect regional insecurities about agriculture, sovereignty and militarisation. At the innermost tiers, domestic political actors, activists, bloggers and fringe online communities further localise the claims, reframing them through national history, political tension and mistrust of foreign influence. As in Africa the process is iterative with elite narratives supplying authority, domestic discourse providing political meaning, and local speculation generating the emotive "evidence" that sustains the system.

The Asia-Pacific case studies – NAMRU-2 in Indonesia, the Tarlac City Regional Animal Disease Diagnostic Laboratory in the Philippines and AFRIMS in Thailand – illustrate this architecture in practice. Each demonstrates how a single global narrative is repackaged into regionally specific accusations, how local actors co-produce and circulate disinformation, and how external state actors then recycle these localised narratives upward as apparent confirmation of their original claims. Together, they reveal how biological disinformation has become a cyclically reinforcing, multi-tiered ecosystem within the region's political and informational landscape, readily mobilised in moments of crisis or diplomatic tension.



Biological disinformation has become a cyclically reinforcing, multi-tiered ecosystem within the region's political and informational landscape, readily mobilised in moments of crisis or diplomatic tension.

4.3



Background

Case Study One: NAMRU-2 Jakarta, Indonesia

The US Naval Medical Research Unit No.2 (NAMRU-2, now NAMRU INDO PACIFIC) has been a central component of US cooperative threat reduction and global-health engagement in the Asia-Pacific for decades. Its origins trace back to the final months of the Second World War, when the US Navy, working with the Rockefeller Foundation, established the first iteration at Oca Point, Guam in 1945 to study tropical and emerging infectious diseases affecting military personnel and regional populations⁶⁴.

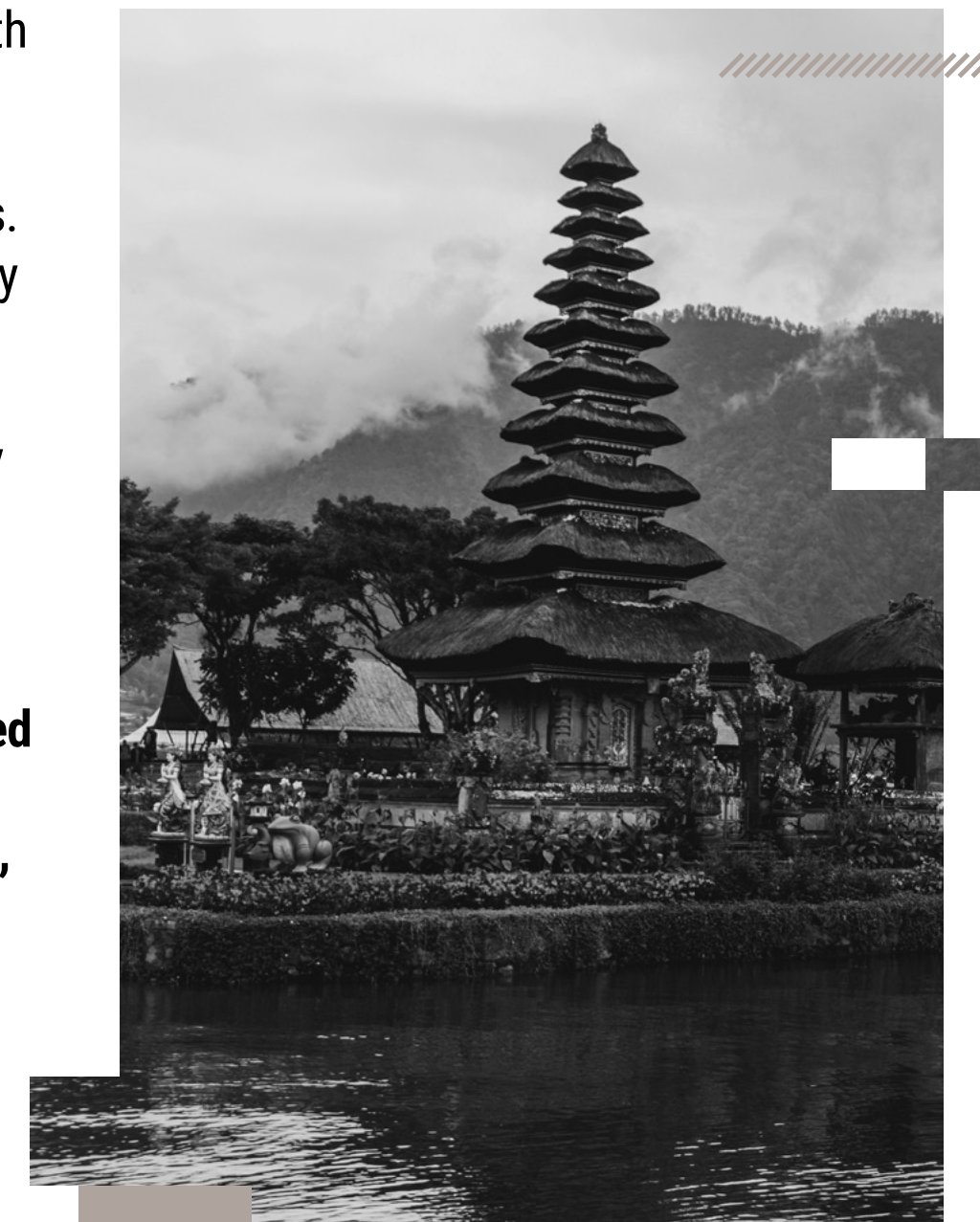
Over the following decades, the unit's location shifted in response to regional health priorities and geopolitical developments. It moved to Taipei in 1955, expanded its work on vector-borne and

enteric diseases, and later relocated to Manila in 1979. In 1991, a permanent detachment was established in Jakarta, which became one of Southeast Asia's most capable infectious-disease laboratories. Following the closure of the Jakarta site in 2010, the command was reconstituted in Singapore in 2013, where it continues to operate as a hub for surveillance, diagnostics and scientific collaboration across the Indo-Pacific⁶⁵.

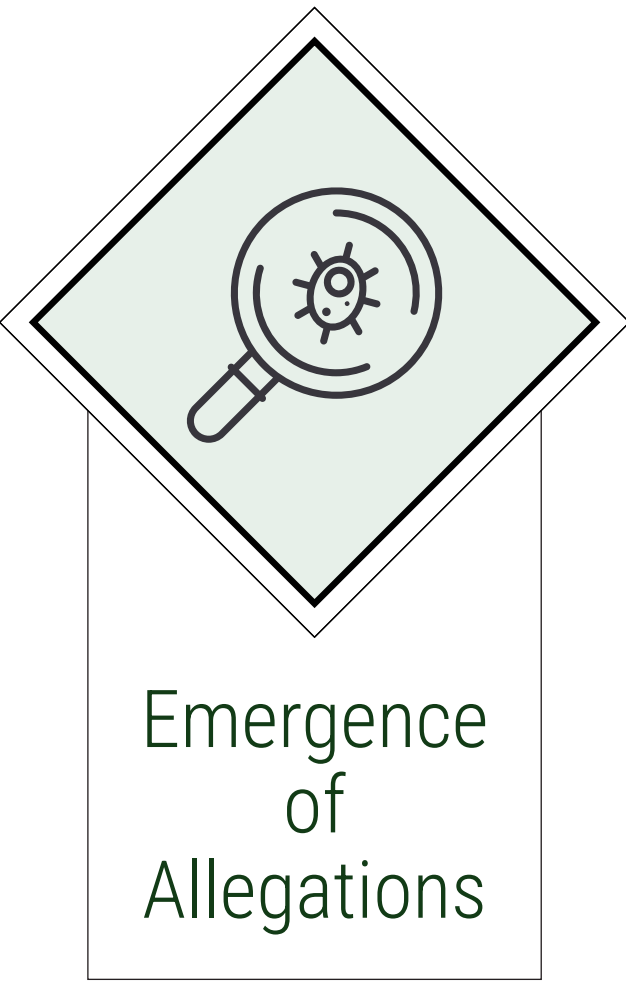
Funded by the US Department of Defense through the Defense Threat Reduction Agency (DTRA), with additional support from its Defense Health Agency and from the US Department of Health and Human Services⁶⁶, NAMRU-2 Jakarta operated

as a high-capacity dual-use public-health and biodefence laboratory supporting regional responses to malaria, dengue, enteric diseases and emerging zoonoses. Its collaboration with Indonesia's Ministry of Health, World Health Organization, and international research networks strengthened local laboratory capability and contributed to national and global disease-surveillance systems.

Prior to its closure, NAMRU-2 was regarded as one of the most sophisticated infectious-disease laboratories in the region, routinely providing diagnostics, training Indonesian scientists and facilitating pathogen sequencing for global health security.



4.4



Case Study One: NAMRU-2 Jakarta, Indonesia

In July 2005, NAMRU-2 became the first laboratory to detect human cases of the highly pathogenic H5N1 avian influenza virus in Indonesia. At the time, the Indonesian Ministry of Health lacked in-country capacity for human diagnostics, making NAMRU-2 essential for identifying and confirming cases. Viral samples were shared with Indonesian authorities and the US Centers for Disease Control and Prevention (CDC), and sequence data were deposited in GenBank to support vaccine development and global disease monitoring⁶⁷.

Despite this public health role, NAMRU-2 became a flashpoint for domestic political controversy. Indonesia’s Minister of Health, Siti Fadilah Supari, framed the sharing of viral samples and genomic data

as a violation of Indonesia’s “viral sovereignty,”⁶⁸ arguing that foreign laboratories were exploiting Indonesian biological materials to produce vaccines that would be sold back to Indonesia at high cost.

NAMRU-2 became the first laboratory to detect human cases of the highly pathogenic H5N1 avian influenza virus in Indonesia

These claims soon evolved into a broader political narrative. Drawing on long-standing sensitivities about foreign interference and perceived neo-colonial power dynamics⁶⁹, Supari suggested that NAMRU-2’s activities were not merely unfair but potentially dangerous⁷⁰.

She increasingly questioned the legitimacy of the laboratory’s diagnostic work and portrayed the laboratory as a threat to national security. In 2008, she published a book⁷¹ that conflated routine outbreak surveillance, vaccine development and biodefence research, portraying US-funded laboratories as part of a global system capable of misusing pathogens for strategic ends.

Through this reframing, Supari transformed a dispute over sample-sharing into a foundational domestic biolab narrative, recasting NAMRU-2 and other US CTA laboratories as instruments of foreign exploitation and covert intent.



4.5



Case Study One: NAMRU-2 Jakarta, Indonesia

The NAMRU-2 narrative gained traction through both domestic and international channels. Domestically, Supari’s statements embedded scepticism toward foreign laboratories and US-funded research into Indonesian political discourse. Internationally, these dormant domestic narratives were later appropriated and weaponised by external state actors.

In March 2023, the Russian Ministry of Defence cited NAMRU-2 alongside the Tarlac City RADDL in the Philippines⁷², presenting both as examples of US military-biological activity in Southeast Asia. The MOD framed Indonesia’s 2010

closure of the Jakarta laboratory as evidence of successful resistance to US influence and encouraged regional governments to scrutinise their own DOD-funded laboratories⁷³.

Russian state media further amplified this framing. In 2024, RT broadcast an “investigative documentary” featuring Supari, linking her decade-old claims directly to Russia’s contemporary biolab narrative⁷⁴. The following day, Maj-Gen Alexey Rtishchev asserted that Southeast Asia and Africa were emerging theatres of US military-biological activity, re-injecting NAMRU-2 into the global foundational narrative⁷⁵.

These claims were further propagated through fringe websites, blogs and social-media networks⁷⁶, where Supari’s sovereignty discourse was blended with transnational bioweapon conspiracies.

Crucially, NAMRU-2’s closure and relocation were repeatedly cited as supposed proof of US wrongdoing. This “proof-of-concept recycling” transformed a historical administrative decision into evidence for a global conspiracy, illustrating how local political memory can be repurposed within a transnational disinformation architecture.

Crucially, NAMRU-2’s closure and relocation were repeatedly cited as supposed proof of US wrongdoing.

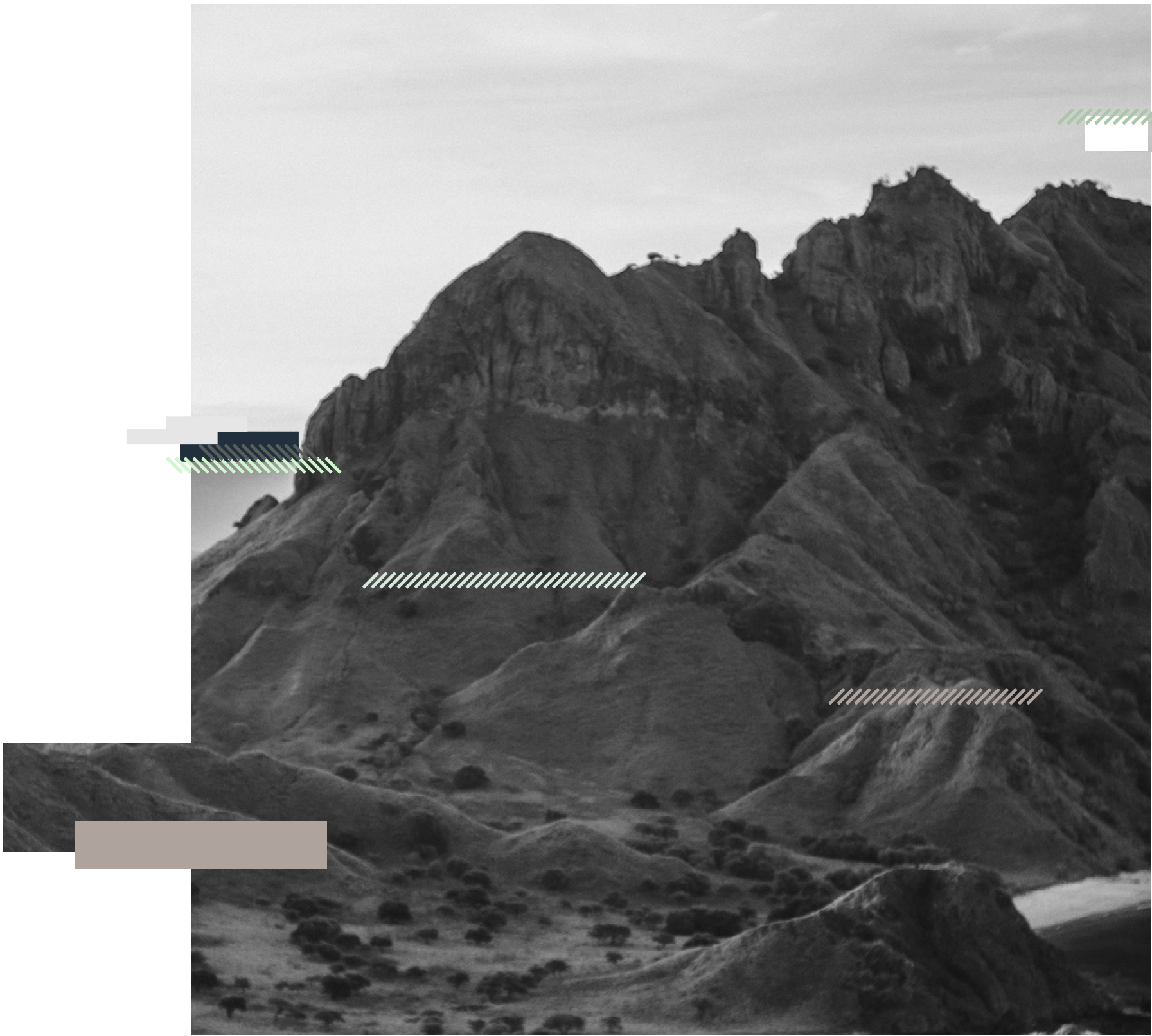
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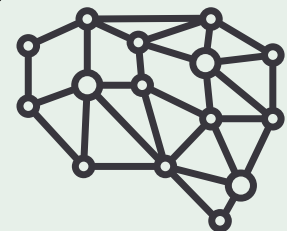
Case Study One: NAMRU-2 Jakarta, Indonesia

NAMRU-2 exemplifies the Matryoshka-style architecture of Asia-Pacific biological disinformation. At the innermost tier, Supari functioned as a domestic co-author, generating a sovereignty-based narrative rooted in Indonesian political and historical grievances. At the intermediate tier, regional political actors, media outlets and online communities circulated and adapted these claims. At the outermost tier, Russian state institutions integrated NAMRU-2 into the foundational global

narrative of a US biolab network, using the Indonesian case to legitimise wider geopolitical accusations. This multi-tiered structure demonstrates how locally generated controversy can be elevated, internationalised and then recycled again through multiple cycles of iteration.



4.7



Why the Narrative Resonates

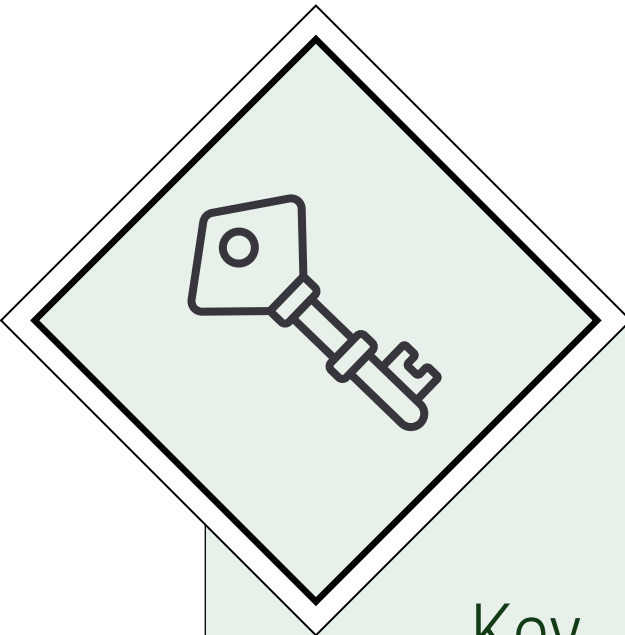
Case Study One: NAMRU-2 Jakarta, Indonesia

The NAMRU-2 narrative resonates because it aligns with long-standing Indonesian anxieties about unequal scientific partnerships and the external extraction of biological resources. The H5N1 sample-sharing controversy activated deeply held concerns about exploitation and dependency in global health governance, making claims of “viral sovereignty” feel intuitive rather than conspiratorial.

National identity politics also played a central role. Post-authoritarian Indonesia has increasingly embraced discourses of autonomy and resistance to foreign influence. Supari’s framing cast NAMRU-2 not as a laboratory but as a symbol of strategic encroachment, a message made more potent by the facility’s US military affiliation.

The technical opacity of biosurveillance and high-containment laboratory work further amplified these dynamics. Because pathogen sequencing, sample transfer and dual-use research are not easily understandable to non-experts, alternative explanations such as espionage, malicious experimentation or weapons development were able to flourish with limited constraint.

Finally, the narrative endures because it fits seamlessly within the global biolab disinformation ecosystem. Russian amplification succeeded precisely because it attached itself to grievances that were already locally meaningful, allowing domestic memory to become geopolitical evidence.



Key Takeaways

- ◆ **NARRATIVE PATHWAY**
NAMRU-2 reflects a hybrid Matryoshka dynamic, in which locally generated sovereignty narratives were later captured, amplified and repurposed by foreign state-linked disinformation actors.
- ◆ **REGIONAL RESONANCE**
Cold War legacies, US-China competition and sensitivities about foreign military presence gave the biolab narrative strong traction.
- ◆ **LOCAL VULNERABILITIES**
The laboratory’s DOD funding, mobility across countries and work on high-profile pathogens made it easy to reframe routine public-health activity as strategic threat.

4.8

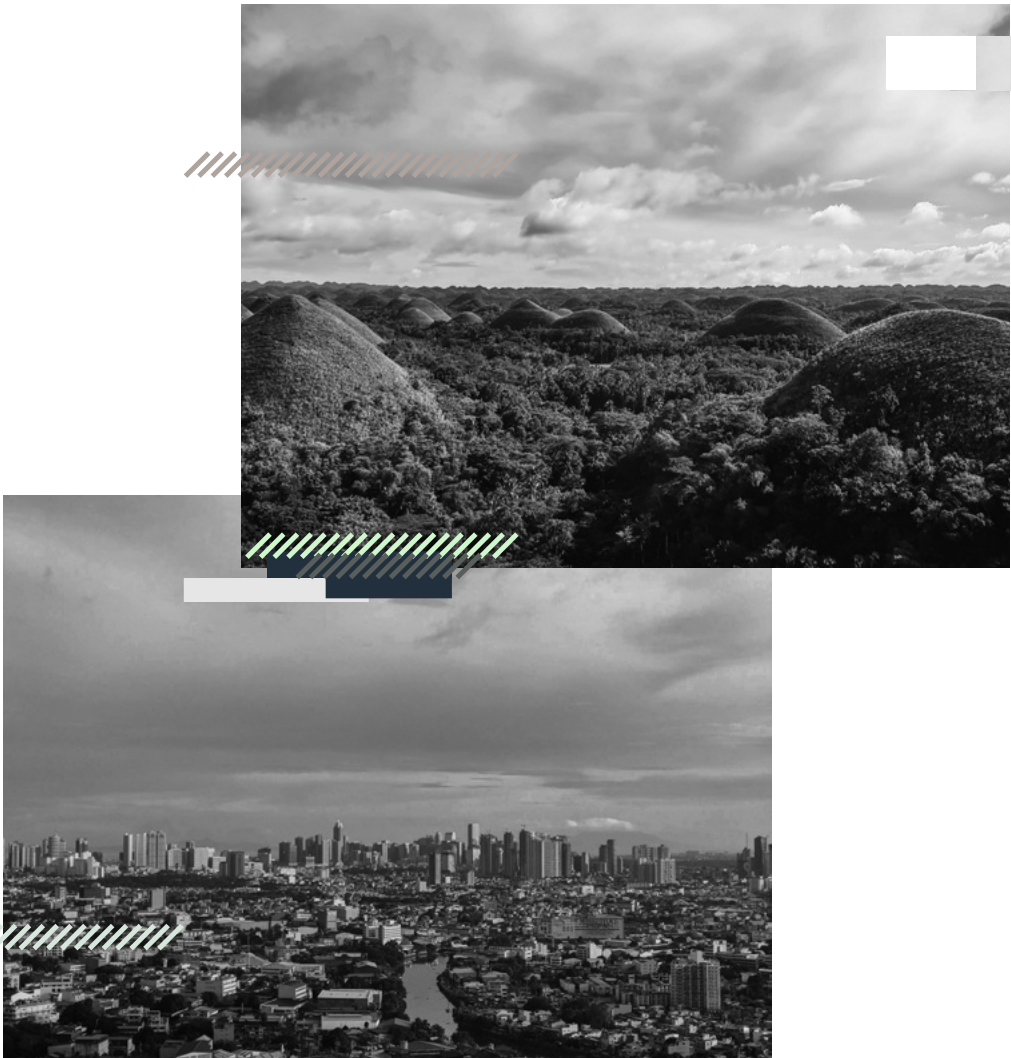


Case Study Two: RADDL, Tarlac City, the Philippines

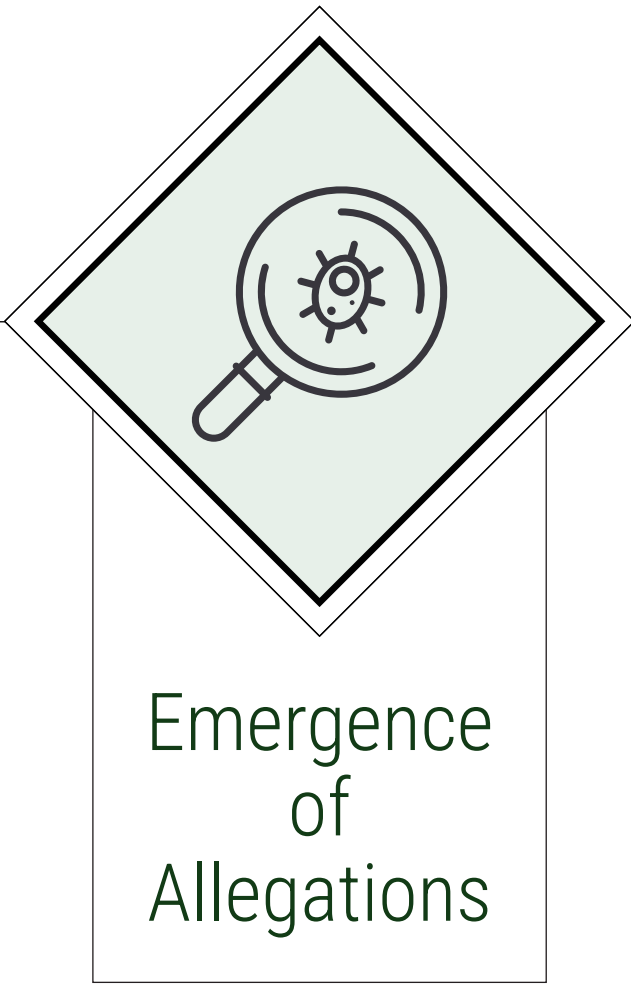
The Regional Animal Disease Diagnostic Laboratories (RADDLs) form part of the Philippines’ national animal-health surveillance system under the Department of Agriculture⁷⁷. Designed to strengthen biosurveillance, pathogen detection and rapid response for high-impact livestock diseases, the RADDL network supports a sector that constitutes a major pillar of The Philippines’ economic security. The swine industry alone is valued at more than £3 billion⁷⁸, and outbreaks of African Swine Fever, avian influenza and other transboundary animal diseases routinely carry severe economic and political consequences.

The Central Luzon RADDL, located in Tarlac City, was opened in September 2020 to support the region’s response to African Swine Fever, which had devastated herds and disrupted supply chains⁷⁹. Like other laboratories in the network, it was constructed under a cooperative agreement between the Philippine Department of Agriculture and the US Department of Defense’s Biological Threat Reduction Program (BTRP)⁸⁰. BTRP funding provided infrastructure, diagnostics equipment and biosafety upgrades, mirroring long-standing US CTR engagement in agricultural biosecurity.

Although BTRP investments were directed entirely toward civilian animal-health surveillance, the presence of US DOD funding in a civilian laboratory system became a point of political sensitivity. The Philippines, like much of Southeast Asia, conceptualises biosecurity primarily through an agricultural and economic lens⁸¹ rather than a military one, creating a structural mismatch that disinformation actors later exploited.



4.9



Case Study Two: RADDL, Tarlac City, the Philippines

Between 2021 and 2023, the Tarlac RADDL became the centre of a domestic political dispute that would later be incorporated into international disinformation campaigns. In December 2021, the Makabayan bloc filed a House Resolution calling for the cancellation of all pending DTRA-funded laboratory projects⁸². The Resolution portrayed the RADDL as the first in a chain of “integrated laboratories” that could provide cover for “unspecified military objectives”⁸³ including bioweapons development.

Significantly, the claims mirrored an Infracatch report published earlier⁸⁴ that framed BTRP involvement as covert military penetration of civilian agricultural infrastructure. This narrative lifted directly from the foundational US biolab template but was reframed through Philippine concerns about food security, sovereignty and foreign influence.

Further Resolutions in late 2022⁸⁵ and early 2023⁸⁶ layered additional insinuations about US-based funding mechanisms and creeping external control of domestic laboratories. While non-binding, these filings provided formal political endorsement of suspicion toward CTR activities⁸⁷, elevating a conspiracy frame into legislative discourse.

Makabayan and its affiliated networks did not simply repeat foreign narratives – they co-produced a domestically grounded version of the global biolab story, embedding it in Philippine political economy and nationalist rhetoric.

Further Resolutions in late 2022 and early 2023 layered additional insinuations about US-based funding mechanisms and creeping external control of domestic laboratories.

4.10



Case Study Two: RADDL, Tarlac City, the Philippines

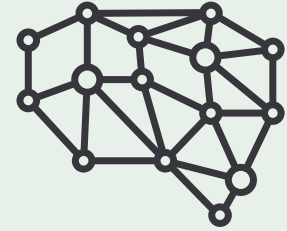
The RADDL narrative was rapidly absorbed into the higher tiers of the Asia-Pacific disinformation ecosystem. In March 2023, the Russian Ministry of Defence referenced the Makabayan Resolutions directly⁸⁸, presenting them as proof that US military-biological activities were being exposed worldwide. Tarlac RADDL was named alongside NAMRU-2 and other facilities as part of a purported US biolab network.

Russian state media amplified this framing, portraying Philippine political activity as an indigenous “exposé”. Infrawatch reports and House Resolutions were circulated across fringe blogs, Telegram channels and transnational conspiracy networks, where they became “evidence” recycled into the global narrative. This created a classic Matryoshka feedback loop: domestic political claims fed international disinformation; Russian amplification then returned those claims to the Philippines as external validation, reinforcing local actors’ sense of legitimacy and prompting further domestic mobilisation.



The Tarlac City RADDL case illustrates the nested architecture of biological disinformation in the Asia-Pacific. At the innermost tier, Makabayan politicians acted as narrative co-authors, reframing agricultural biosurveillance as militarised foreign intrusion. At the intermediate tier, groups such as Infrawatch repackaged these claims as policy critique and investigative reporting. At the outermost tier, Russian state institutions incorporated the Philippine case into the foundational global biolab narrative. This structure allowed locally meaningful claims to be elevated into geopolitical “proof” and then recycled back into domestic politics, stabilising the narrative across scales.

4.11



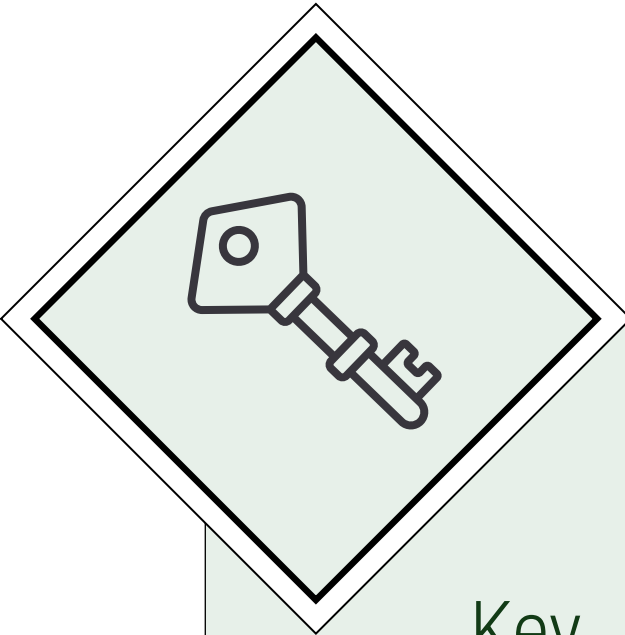
Why the Narrative Resonates

Case Study Two: RADDL, Tarlac City, the Philippines

The RADDL narrative resonates because it connects agricultural vulnerability, national sovereignty and foreign power. In a country where livestock disease threatens livelihoods and food prices, a foreign-funded laboratory researching animal pathogens becomes an intuitive object of fear.

Historical distrust of foreign military involvement further strengthens the narrative. Framing RADDL as a DOD-linked facility transforms a biosecurity investment into a symbol of strategic encroachment. The opacity of laboratory science makes it difficult for non-specialists to distinguish between surveillance and weapons research, allowing ambiguity to do strategic work.

Because the narrative aligns local anxieties with global disinformation frames, it remains durable even without evidence.



Key Takeaways

- ◆ **NARRATIVE PATHWAY**
RADDL reflects a bottom-up Matryoshka dynamic in which domestic political narratives were captured and weaponised by foreign disinformation actors.
- ◆ **REGIONAL RESONANCE**
The narrative draws power from agricultural vulnerability, sovereignty concerns and mistrust of military-linked science.
- ◆ **LOCAL VULNERABILITIES**
Limited transparency, DOD funding and high-consequence disease surveillance created openings for mis-framing routine biosecurity as clandestine threat.

4.12



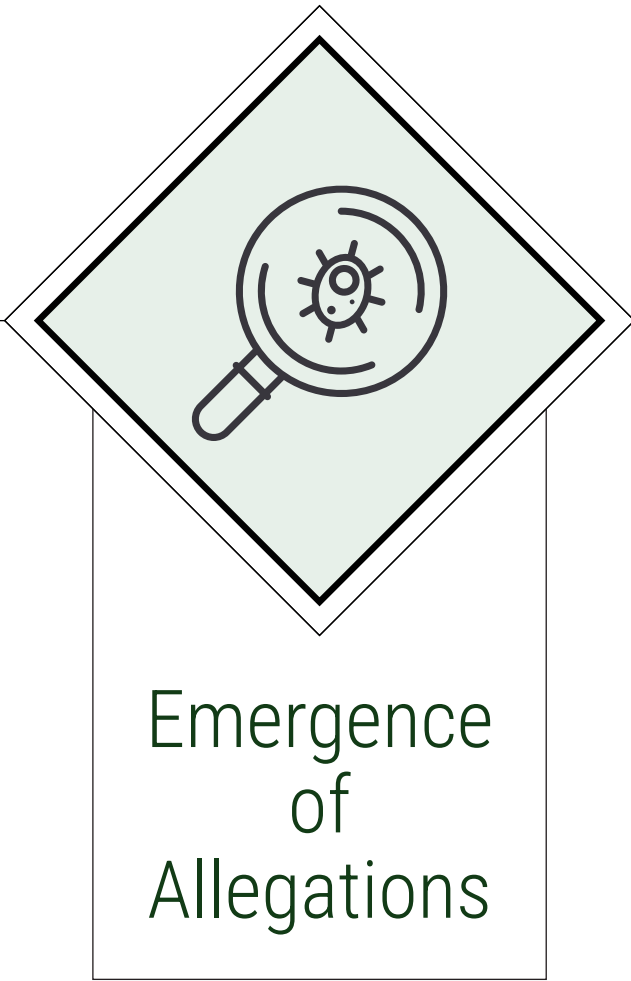
Case Study Three: AFRIMS Lab, Thailand

The Armed Forces Research Institute of Medical Sciences (AFRIMS) began in 1959 as the Thailand Southeast Asia Treaty Organization (SEATO) Cholera Research Project, established to respond to severe regional cholera outbreaks. In 1961, it became the SEATO Medical Research Laboratory, expanding its work to a broad range of tropical and military-relevant diseases and supporting US efforts during the Vietnam War.

Following SEATO’s dissolution in 1977, the institute was restructured under US–Thai bilateral agreements and renamed AFRIMS. Over six decades, it has grown into the largest US Army overseas medical research laboratory, conducting research on tropical diseases, supporting public health and military readiness, and collaborating closely with Thai medical authorities⁸⁹.



4.13



Case Study Three: **AFRIMS Lab, Thailand**

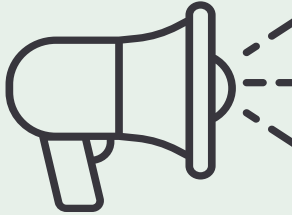
Allegations targeting AFRIMS emerged during the COVID-19 pandemic within a digital environment already saturated by the global US “biolab” narrative. Thai-language material portrayed AFRIMS as part of a worldwide network of US Army laboratories allegedly linked to the origins of COVID-19⁹⁰. Posts and screenshots asserted that the virus originated from Fort Detrick in the United States—a facility long featured in Russian and Soviet-era biological disinformation—and then mapped that foundational narrative onto AFRIMS as Thailand’s local node in the same supposed system⁹¹.

Within this framing, AFRIMS was described as “the US Army’s largest pathogen laboratory,”⁹² implying that Thailand hosted a major hub of American military-biological activity. This positioning mirrored disinformation campaigns against US-linked laboratories in Georgia, Ukraine and Africa, where overseas research sites were portrayed as part of a single transnational network. AFRIMS was accused of conducting high-risk experiments, secretly exporting Thai biological samples, and operating under unsafe biosafety conditions⁹³. More sensational claims alleged unethical human experimentation and covert transport of pathogens by the US⁹⁴. These motifs are standard components of the global biolab narrative and reappear almost unchanged across countries.

Much of the content originated from an anonymous “whistleblower” document that blended personal grievances, misinterpretations of laboratory practice and tropes drawn from international biolab conspiracies. As in similar materials used in other regions, it contained no verifiable evidence but reproduced the narrative architecture of U.S.-biolab disinformation almost verbatim.^{95,96}

AFRIMS was accused of conducting high-risk experiments, secretly exporting Thai biological samples, and operating under unsafe biosafety conditions.

4.14



Narrative Amplification

Case Study Three: AFRIMS Lab, Thailand

Until 2021, AFRIMS attracted little controversy in Thailand⁹⁷. However, the COVID-19 pandemic created a moment of heightened sensitivity around foreign-funded laboratories and pathogen research scrutiny, making the institute vulnerable to being drawn into the lowest tier of the Matryoshka ecosystem.

The allegations circulated primarily through fringe Facebook pages, Telegram channels, pseudonymous blogs and small YouTube accounts. These spaces recycled and translated the anonymous document, presenting it as insider proof of hidden American activity.

Mainstream Thai institutions intervened quickly. Major outlets and the Royal Thai Army issued public rebuttals, while the Anti-Fake News Center formally debunked the claims⁹⁸. This top-down rebuttal prevented the narrative from moving into the middle tiers of national political or media discourse, keeping it confined to online fringe spaces.

Nevertheless, the narrative did not remain entirely isolated. Russian state-linked messaging indirectly gestured toward AFRIMS, when a TASS article quoted Igor Kirillov describing a large U.S. Army biological research unit in Thailand with hundreds of staff, generating an unmistakable reference without naming the institute. This ambiguity is characteristic of mid-tier Matryoshka signalling—the target is implied in a way that allows deniability while still embedding Thailand within the global biolab frame.

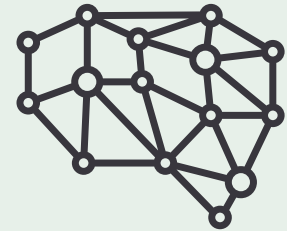


Matryoshka Model

Although the AFRIMS allegations never achieved mainstream traction, their structure fits the lowest tier of the Matryoshka architecture. The anonymous document and fringe-platform narratives functioned as micro-level reproductions of the foundational biolab story, translated into Thai political and cultural idioms.

Because such content persists online, it remains available for selective appropriation by higher-tier actors. As seen in the TASS reference, even marginal claims can be lifted upward and incorporated into state-level narratives when strategically useful, reinforcing the cyclical logic of the model.

4.15



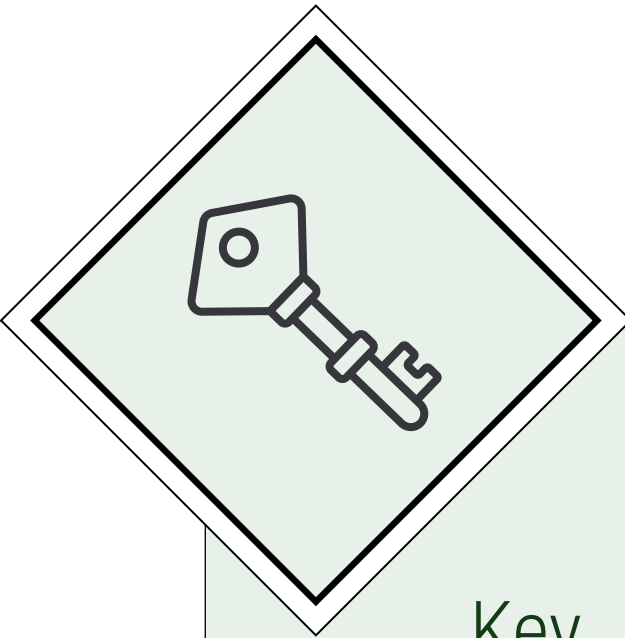
Why the Narrative Resonates

Case Study Three: AFRIMS Lab, Thailand

The AFRIMS narrative resonated in small segments of Thailand’s online community because it aligned with pandemic-era fear, longstanding sensitivities around US military presence, and widespread uncertainty about how biosurveillance and pathogen research operate.

Claims about secret experiments, foreign sample extraction and unethical research mirror themes already present in anti-US, anti-vaccine and anti-elite online spaces. By providing a coherent storyline linking COVID-19 to foreign laboratories, the narrative offered emotional and political meaning during a period of uncertainty.

Although it did not become nationally influential, the AFRIMS case shows how even low-credibility, bottom-tier narratives remain geopolitically useful when they align with global disinformation templates.



Key Takeaways

- ◆ **NARRATIVE PATHWAY**
AFRIMS reflects a bottom-tier Matryoshka dynamic, in which fringe local narratives can be selectively incorporated into higher-tier state messaging.
- ◆ **REGIONAL RESONANCE**
Pandemic fear, sensitivity to US military presence and existing conspiracy cultures enabled the narrative to take root in limited communities.
- ◆ **LOCAL VULNERABILITIES**
AFRIMS’ US Army affiliation, historical regional footprint and role in pathogen surveillance allowed routine scientific activity to be reframed as covert military research.

4.16



Cross-Case Synthesis: ASEAN in the Matryoshka System

ONE ARCHITECTURE, THREE ENTRY POINTS

NAMRU-2, RADDL and AFRIMS appear unrelated: one is a Cold War-era U.S. military lab, one an agricultural disease centre, and one a bilateral research institute. Yet all three become legible through the same foundational biolab narrative. Each enters the system from a different tier, whether historical grievance, domestic politics or digital fringe, but once inside, they fit neatly within an iterative feedback loop.

THE FOUNDATIONAL SHELL

At the outermost tier, Russian institutions deploy the same biolab template used globally. They do not create Southeast Asian stories;

they reinterpret Indonesian closures, Philippine parliamentary motions and Thai laboratory presence as regional proof of a global US military-biological network.

HOW LOCAL POLITICS BECOME GEOPOLITICAL PROOF

In Indonesia, viral-sovereignty disputes become grievance memory later weaponised by Moscow. In the Philippines, nationalist blocs and think-tank proxies actively produce biolab narratives that Russia then amplifies. In Thailand, even fringe conspiracy material becomes available for selective citation. Domestic politics becomes global evidence.

WHERE SCIENCE, FOOD AND SOVEREIGNTY COLLIDE

At the innermost tier, ASEAN disinformation draws power from agricultural vulnerability, zoonotic risk and the ambiguous line between civilian and military science. A pig virus, an influenza lab or a defence-funded biosurveillance project sits exactly where fear, food and geopolitics meet.

CYCLICAL REINFORCEMENT ACROSS ASEAN

Indonesian closures, Philippine resolutions and Thai rumours are all recycled upward and outward. Each national story becomes part of a regional pattern, and the pattern returns to validate local suspicion.

WHAT ASEAN REVEALS ABOUT THE BIOLAB NARRATIVE

ASEAN shows how dual-use science and food security give biological disinformation technical plausibility. Here, the Matryoshka thrives not on trauma but on the strategic ambiguity of modern biotechnology.



LATIN AMERICA

Biological Disinformation
in Latin America

Latin America: Biological Disinformation in Latin America

Latin America has increasingly emerged as a sustained theatre for state-linked biological disinformation.⁹⁹ As one of the world's most socio-politically diverse regions, it faces intersecting pressures from entrenched inequality to fragmented governance and persistent public health burdens.¹⁰⁰

These elements create an information environment in which rumours, mistrust and politically charged narratives may readily take root. Recurrent outbreaks of dengue, Zika, chikungunya, COVID-19 and other endemic and emerging diseases place continual strain on national health systems¹⁰¹, generating uncertainty that external actors are able to strategically manipulate.

International cooperation in health security has been essential to strengthening regional disease detection and response. Yet these same partnerships have become recurrent targets of strategic biological disinformation.¹⁰²

In much of Latin America, historical sensitivities around sovereignty, foreign military involvement and biomedical research have produced fertile ground for narratives portraying foreign-supported laboratories as malign interventions.¹⁰³ These structural conditions make the region highly receptive to the foundational “biolab” narrative that underpins contemporary Russian biological disinformation campaigns.

While this foundational narrative is global in design, its expression in Latin America reflects distinct regional dynamics. Here it is filtered through legacies of Cold War intervention, extractive political economies, migration crises and deep public distrust of institutions.



Latin America: Biological Disinformation in Latin America (continued)

As a result, the global biolab frame is routinely localised into claims about border contamination, population manipulation, or foreign exploitation of biological resources. Cases ranging from allegations of planned anthrax attacks in the Haiti–Dominican Republic corridor to accusations targeting US-affiliated laboratories in Peru illustrate how a single global template is reinterpreted through local sociopolitical anxieties.

These dynamics operate through a Matryoshka-style, tiered architecture. At the smallest tier, community-level fears about disease, migration, poverty or foreign presence generate rumours that are emotionally resonant and highly adaptive. These bottom-up narratives do not exist in isolation but are interpreted through the foundational biolab frame circulating at higher levels. At the intermediate tier, national-level actors such as journalists, political intermediaries, activists and sometimes ministries, rearticulate these claims within domestic debates about sovereignty, corruption and security. At the outermost tier, international state-linked messaging, most prominently from Russian defence and foreign-policy actors, legitimises these localised stories by integrating them into a broader geopolitical narrative of clandestine US military-biological activity.

As in Africa and Southeast Asia, these tiers do not operate linearly but in iterative cycles of reinforcement. Local rumours provide the emotive “evidence” that sustains the narrative whilst national reactions supply political meaning and international disinformation networks elevate these fragments into supposed proof of a global pattern. The resulting ecosystem ensures that biological disinformation in Latin America is not merely imported, but continually recycled across levels, making it durable within the region’s information landscape.



Local rumours provide the emotive “evidence” that sustains the narrative whilst national reactions supply political meaning and international disinformation networks elevate these fragments into supposed proof of a global pattern.

5.3



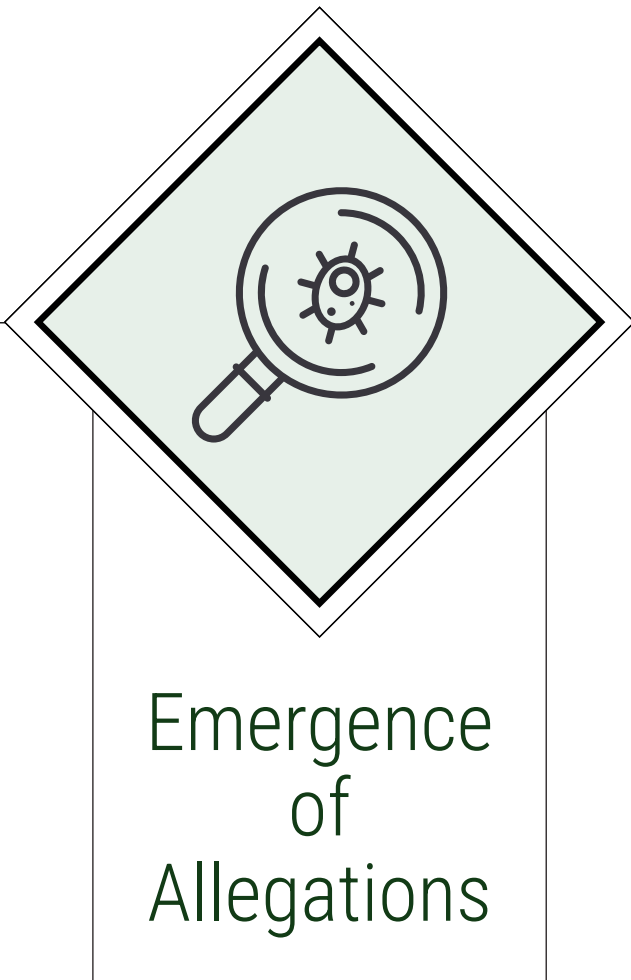
Case Study One: NAMRU-6/ NAMRU-SOUTH, Lima, Peru

The United States Naval Medical Research Unit SOUTH (NAMRU-SOUTH, formerly NAMRU-6) was established in 1983 and is headquartered in Lima, Peru, with field sites across Latin America¹⁰⁴. Funded by the US Department of Defense¹⁰⁵, the laboratory conducts biomedical research on infectious diseases relevant to both regional public-health priorities and US military force-health protection¹⁰⁶.

Over four decades, NAMRU-SOUTH has conducted research on malaria, dengue, diarrheal disease and antimicrobial resistance, contributing to diagnostics, vaccines and treatment strategies¹⁰⁷. The lab collaborates with regional ministries of health and universities and plays a key role in strengthening Latin American biosurveillance and outbreak response, including during influenza waves and COVID-19¹⁰⁸.



5.4



Case Study One: NAMRU-6/ NAMRU-SOUTH, Lima, Peru

Despite its scientific mandate, NAMRU-SOUTH has become a recurring target of suspicion in a region shaped by long-standing sensitivities to foreign military and biomedical presence. Its dual-use profile made it structurally legible to the global biolab narrative.

Allegations first emerged in 2015, when activist outlets including CEPRID and *El Derecho a Vivir en Paz*¹⁰⁹ claimed, without evidence, that the laboratory was engaged in “bacteriological warfare.”¹¹⁰ These early texts framed NAMRU-SOUTH through the familiar motifs of secrecy, militarisation and US geopolitical intent, laying the foundation for its later incorporation into the larger US “biolabs” narrative.

In 2017, CEPRID expanded these claims by asserting that NAMRU-SOUTH formed part of a global network of US military-run laboratories operating under civilian cover. This step was crucial: it embedded the Peruvian laboratory within the foundational global template rather than treating it as an isolated case.

The narrative was further stabilised in 2020 when the Universidad Nacional Autónoma de México (UNAM)’s Geopolítica programme¹¹¹ republished the claims in a quasi-academic format, giving them institutional packaging and ideological coherence. In Peru, these ideas filtered into regional media, including *Diario Ahora*¹¹², which repeated allegations about secrecy and militarisation using the same interpretative frame.

2023 DENGUE SURGE AND NARRATIVE ACCELERATION

Public health crises act as accelerants within Matryoshka systems. During the 2023 dengue surge, long-standing claims about NAMRU-SOUTH were reactivated and emotionally intensified.

Journalists and bloggers in Brazil¹¹³ and Central America¹¹⁴ alleged that US defence institutions had engineered or altered dengue strains through NAMRU-SOUTH. No new evidence was introduced; instead, existing conspiracy motifs were recycled to provide an intuitive explanation for the outbreak.

Claims that Peruvian staff had been compelled to assume US nationality¹¹⁵ further reinforced the sovereignty frame, portraying the laboratory as operating beyond national oversight and accountability. Dengue’s transnational spread and sensitivity to climate and

vector-control interventions made these narratives particularly persuasive to non-specialist audiences.

Rather than creating a new narrative, the dengue outbreak increased the velocity and visibility of a pre-existing one, allowing it to escape its earlier ideological niches.

5.5



Case Study One: NAMRU-6/ NAMRU-SOUTH, Lima, Peru

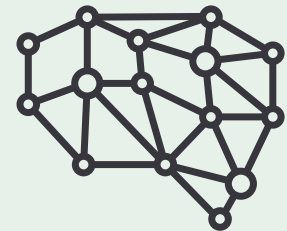
The NAMRU-SOUTH narrative draws on Cold War biowarfare imagery, particularly insect-based delivery systems and covert experimentation¹¹⁶ that remains embedded in how foreign laboratories have been imagined in Latin America. These themes are continuously reinforced by Russian state-aligned media, which frames US overseas laboratories as dual-use or militarised. Although not always mentioning Peru directly, this global framing provides the ideological scaffolding that makes NAMRU-SOUTH legible as part of a worldwide biolab network¹¹⁷.

By 2024, the allegations had migrated into the international alternative press. *CounterPunch*¹¹⁸ and *People’s World*¹¹⁹ recycled earlier activist claims, situating NAMRU-SOUTH within a broader pattern of US military-biomedical activity. These outlets functioned as mid-tier amplifiers, carrying Latin American activist narratives into global ideological space. At the highest tier, Russian defence officials explicitly named NAMRU-SOUTH in briefings alleging a clandestine US biowarfare infrastructure¹²⁰. Sputnik¹²¹ and other state-linked outlets portrayed the lab as operating “under cover” of civilian science. Here, local suspicion became international “proof”.



NAMRU-SOUTH illustrates a classic Matryoshka architecture. At the innermost tier, local journalists, regional commentators, and activists reinterpret disease outbreaks and foreign research through domestic frames of sovereignty and exploitation. At the intermediate tier, activist networks and quasi-academic groups such as UNAM’s Geopolítica programme stabilise these claims into transnational narratives. At the outermost tier, Russian defence officials and state media incorporate NAMRU-SOUTH into the foundational global biolab story, treating Peruvian discourse as corroboration. These tiers reinforce one another cyclically: domestic rumours generate material; activist framing gives it ideological form; state actors elevate it into geopolitical evidence, which then flows back downward as validation.

5.6

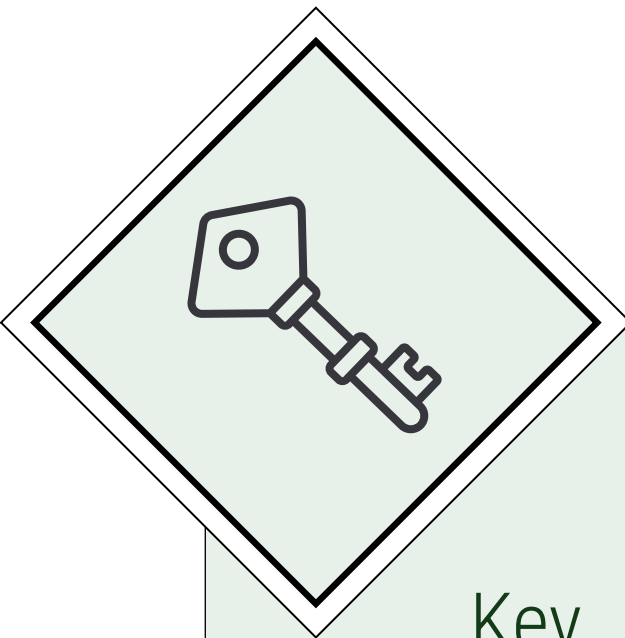


Why the Narrative Resonates

Case Study One: NAMRU-6/ NAMRU-SOUTH, Lima, Peru

NAMRU-SOUTH resonates because it sits at the intersection of foreign military presence, advanced biotechnology, and limited public visibility in a region marked by historical intervention and biomedical exploitation.

The technical opacity of pathogen research and dual-use science allows routine laboratory practices to be recast as secrecy or weapons development. During outbreaks such as dengue, Zika and COVID-19, these narratives gain emotional traction by offering simple explanations for complex failures. NAMRU-SOUTH persists not because of evidence, but because its institutional profile aligns perfectly with the expectations of the foundational biolab narrative.



Key Takeaways

- ◆ **NARRATIVE PATHWAY**
NNAMRU-SOUTH reflects a hybrid Matryoshka dynamic, in which activist and regional narratives were later captured and elevated by Russian state-linked disinformation.
- ◆ **REGIONAL RESONANCE**
Longstanding anti-imperialist memory, military distrust and epidemic vulnerability make the narrative locally credible.
- ◆ **LOCAL VULNERABILITIES**
Military affiliation, foreign funding and technical opacity allowed routine biosurveillance to be reframed as pathogen manipulation.

5.7



Case Study Two: Anthrax, Dominican Republic-Haiti

In mid-2023, reports emerged from local Haitian media¹²² of an anthrax outbreak, prompting concern in the Dominican Republic and across the Caribbean. Health authorities linked cases to the consumption and handling of meat¹²³ from animals that had died suddenly. Several individuals were hospitalised and a small number of deaths were reported¹²⁴. While some cases were laboratory-confirmed, the outbreak

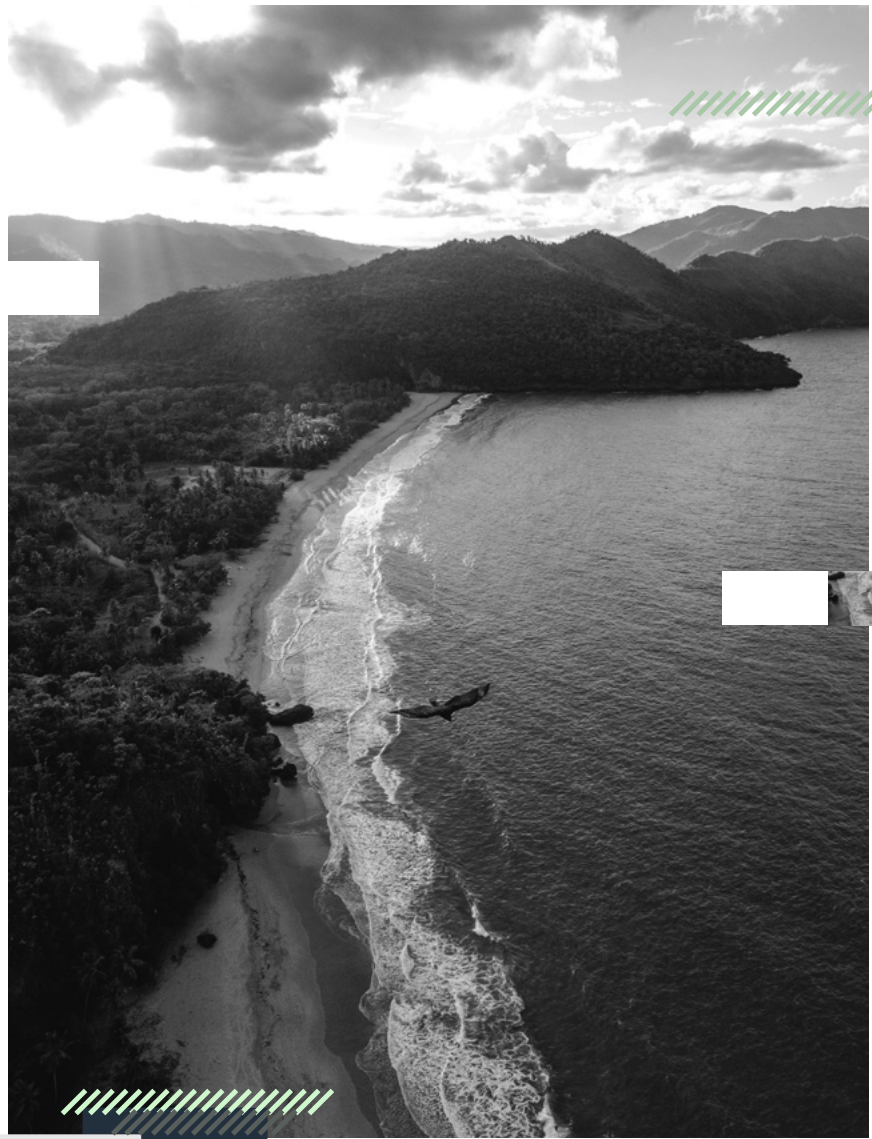
remained under investigation and the full transmission chain was not definitively established.

Dominican authorities, concerned about cross-border spread, enacted preventive health and security measures at key border crossings such as El Carrizal and Dajabón¹²⁵. Given the volume of informal trade and daily movement between Haiti and the Dominican Republic, these measures were deemed legitimate public-health responses.

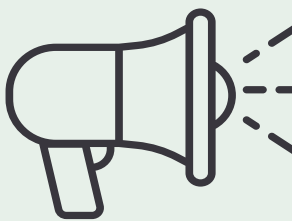
However, this outbreak entered an information environment already conditioned by the global “biolab” narrative. As news circulated online¹²⁶, unverified claims began circulating that

an infected Haitian individual intended to cross the border to “deliberately spread”¹²⁷ anthrax as a biological weapon. The claim did not draw on medical evidence but on the global repertoire of bioterrorism imagery that often accompanies disease outbreaks.

Although the rumour circulated mainly through fringe digital platforms and informal social-media networks, it demonstrated how a foundational bioweapon frame can rapidly attach itself to routine public-health events.



5.8



Escalation and Official Response

Case Study Two: Anthrax, Dominican Republic-Haiti

In response to the rumour, the Dominican Ministry of Defense and Ministry of Public Health launched an investigation into the alleged “bioweapon carrier”.¹²⁸ Field teams were deployed and international partners, including the Centers for Disease Control and Prevention (CDC) and the Pan American Health Organisation (PAHO), were consulted. The Ministry of Public Health issued an official statement confirming that the claim was false. The Haitian citizen had been examined, including at the Air Force Hospital, and no anthrax infection was found. There was no evidence of deliberate spread or bioterrorism.

At the same time, legitimate precautionary measures such as restrictions on meat and agricultural imports from Haiti¹²⁹ were implemented to mitigate real zoonotic risk. These public-health actions were then misread by some audiences as confirmation that something sinister had occurred, illustrating how official responses can be absorbed into disinformation ecosystems. Although the false bioweapon rumour was not the primary driver, it contributed to a broader atmosphere of insecurity. Haitian traders protested and blocked border crossings, halting trade and inflaming political tensions. Tourism

and border economies experienced short-term disruption at a politically sensitive moment, coinciding with the inauguration of the Dominican Republic’s new president. In this context, biosecurity narratives carried symbolic weight, shaping perceptions of state competence and national vulnerability.

Haitian traders protested and blocked border crossings, halting trade and inflaming political tensions.

5.9



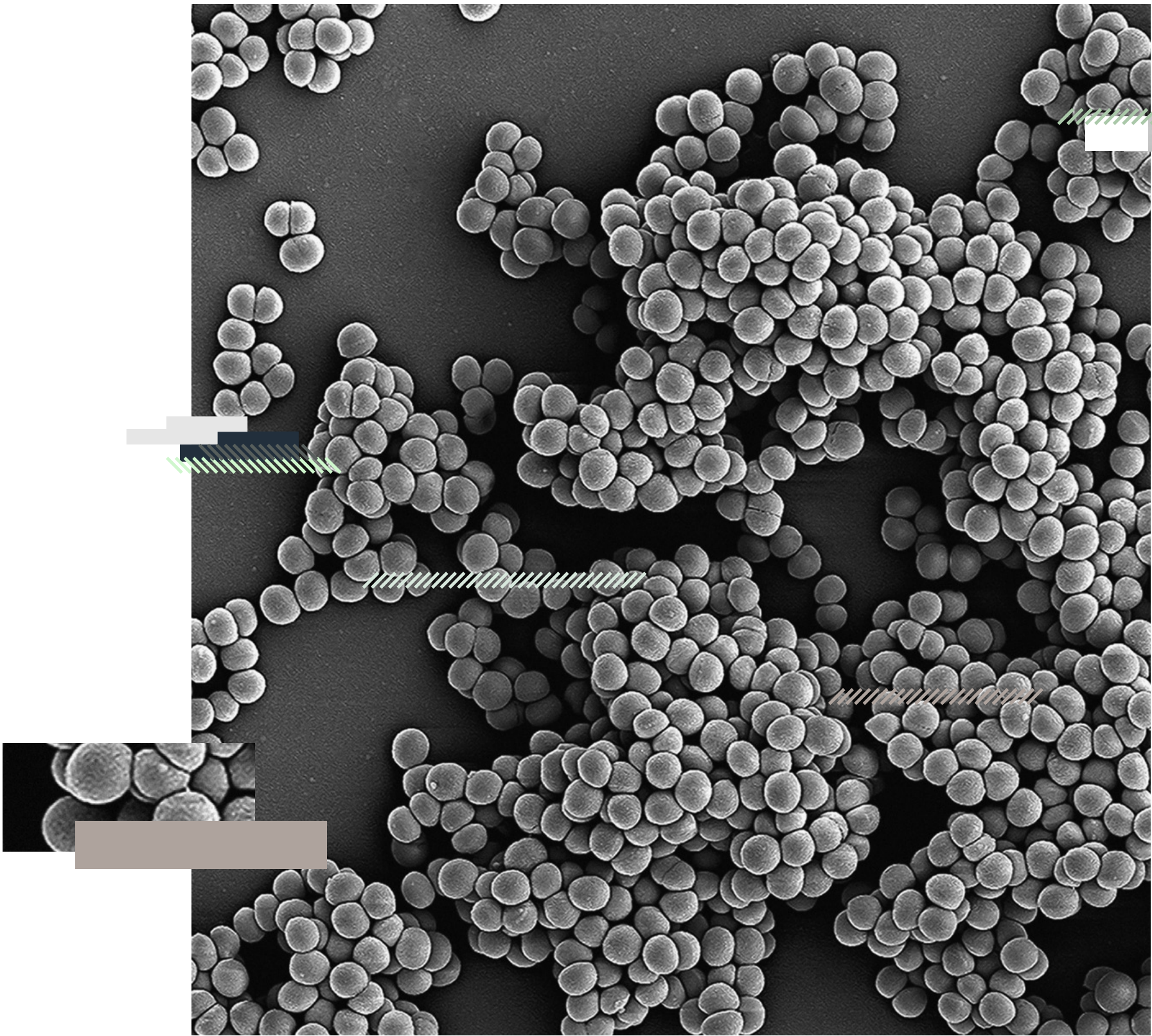
Case Study Two: Anthrax, Dominican Republic-Haiti

The anthrax rumour exemplifies a lowest-tier Matryoshka dynamic. At the innermost tier, community-level fears about disease, food safety, migration and cross-border health risks generated a rumour that an infected person was being used as a biological weapon. This narrative did not arise independently—it drew on the same global bioterrorism and biolab frames circulating internationally.

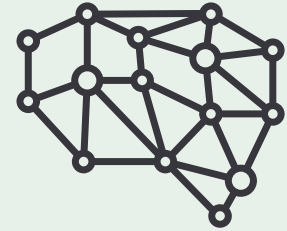
At the intermediate tier, official investigations, border measures and health advisories became incorporated into the narrative as perceived confirmation.

At the outer tier, the foundational global biolab narrative provided the interpretive framework that made the rumour intelligible amidst spiralling anxieties relating to disease outbreaks and border control.

Even without direct Russian amplification, the architecture of the Matryoshka model was present: global narratives shaped local interpretation, local reaction created apparent evidence, and official responses became part of the story.



5.10

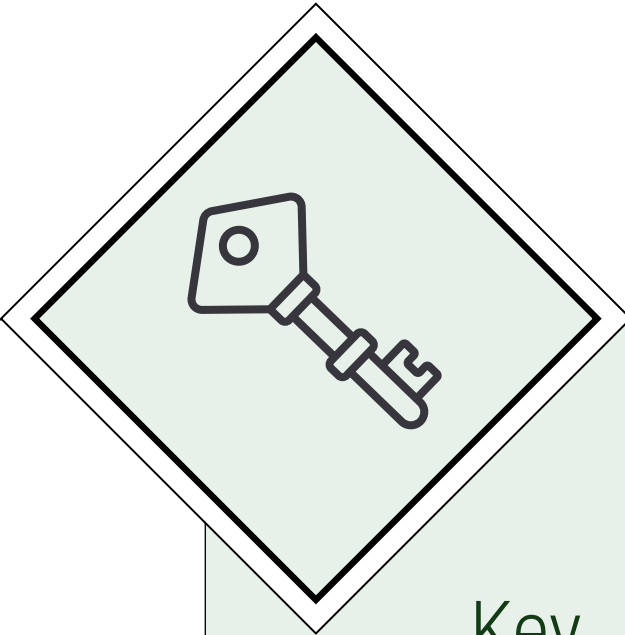


Why the Narrative Resonates

Case Study Two: Anthrax, Dominican Republic-Haiti

The rumour resonated because it aligned with deep anxieties about migration, poverty, food safety and disease transmission along the Haiti–Dominican Republic border. Anthrax, a disease already associated with bioterrorism in global popular culture, made the claim emotionally powerful.

In a region shaped by inequality and institutional fragility, the idea that disease could be weaponised felt intuitively plausible, even in the absence of evidence. The case shows that disinformation does not require foreign instigation to operate; global narrative templates are now locally internalised.



Key Takeaways

- ◆ **NARRATIVE PATHWAY**
The anthrax case reflects a bottom-tier Matryoshka dynamic, in which local rumours draw on global bioweapon narratives and gain traction through official response.
- ◆ **REGIONAL RESONANCE**
Cross-border migration, food insecurity and historical mistrust made the rumour emotionally persuasive.
- ◆ **LOCAL VULNERABILITIES**
Limited trust, informal trade networks and high disease anxiety allowed a false bioterror frame to attach to a real outbreak.

5.11



Cross-Case Synthesis: Latin America in the Matryoshka System

FROM LABORATORIES AND BORDERS INTO ONE NARRATIVE SYSTEM

NAMRU-SOUTH in Peru and the Haiti–Dominican Republic anthrax scare appear very different. One centres on a US military research laboratory, the other on a fleeting border rumour. Yet both are absorbed into the same disinformation system because disease, sovereignty and foreign presence are already politically charged. Once a laboratory or outbreak becomes interpretable through the biolab frame, it enters the Matryoshka and begins reinforcing it.

THE BIOLAB FRAME AS A REGIONAL INTERPRETIVE LENS

At the outer tier, Russian state actors apply the same global narrative used elsewhere: US-funded health cooperation conceals military biological activity. NAMRU-SOUTH is explicitly named within this frame, while the anthrax rumour draws its meaning from the same global bioterror grammar.

HOW ACTIVISM AND CRISIS BECOME STRATEGIC CURRENCY

In Peru, activist and quasi-academic networks embedded NAMRU-SOUTH within anti-imperialist and sovereignty-based discourse, which Russian officials later elevated into geopolitical proof. In the Caribbean case, official investigations and border measures

became inadvertent mid-tier amplifiers, allowing a local rumour to gain apparent legitimacy.

WHERE FEAR, DISEASE AND SOVEREIGNTY CONVERGE

At the innermost layer, dengue outbreaks, migration, weak institutional trust and histories of intervention give these narratives emotional power. Disease is not just a health threat; it is experienced as a political and territorial one.

FEEDBACK LOOPS ACROSS THE HEMISPHERE

Activist claims, official responses and Russian amplification circulate through the system, transforming local anxiety into global evidence and back again. The result is a self-sustaining narrative machine.

WHAT LATIN AMERICA REVEALS ABOUT THE GLOBAL BIOLAB NARRATIVE

Latin America shows how borders, ideology and intervention history give biological disinformation political durability. Here, laboratories and outbreaks do not need to be invented, they may instead be recast and reinterpreted widely.

6.0

Key Take Aways: How Disease, Science and Sovereignty Became a Geopolitical Weapon

Across Africa, Southeast Asia and Latin America, very different laboratories, outbreaks and political systems have been drawn into a single strategic narrative: that foreign-supported biosecurity and public-health cooperation conceals hostile geopolitical intent. Ebola treatment units in West Africa, agricultural laboratories in the Philippines, influenza and dengue surveillance in Indonesia and Peru, and even anthrax rumours on the Hispaniola border have all been absorbed into the same narrative family.

What unites these cases is not the pathogens involved, the institutions targeted or the local politics surrounding them. It is the way biological risk has been reframed as political threat. In each region,

routine activities of disease surveillance, laboratory upgrading and scientific collaboration are reinterpreted through a lens of sovereignty, suspicion and strategic rivalry. Once this lens is applied, public-health infrastructure no longer appears as a collective good; it becomes a potential instrument of foreign control.

The Matryoshka architecture allows this reframing to operate simultaneously at multiple levels. At the outer shell, powerful state actors promote a global narrative in which biological cooperation is recoded as military activity. At intermediate tiers, domestic political actors, activist networks, journalists and online communities translate that narrative into locally meaningful claims about exploitation, secrecy or national vulnerability.

At the innermost layer, ordinary people encountering disease, border insecurity, food shortages or fragile health systems experience these stories as common-sense explanations of risk.

This nested structure makes biological disinformation unusually resilient. When an outbreak occurs, when a laboratory opens, or when a border closes, the event is immediately legible as evidence of hidden intent. Local reactions generate emotional proof; national debates give political shape; international disinformation networks elevate these fragments into supposed confirmation of a global pattern. Each tier feeds the next.

Africa shows how outbreak trauma and colonial memory make disease narratives emotionally powerful. ASEAN shows how dual-use science, agriculture

and sovereignty give them technical plausibility. Latin America shows how histories of intervention, extraction and border insecurity give them political durability. In every case, health becomes a carrier of geopolitical meaning.

What the three-region case studies ultimately reveal is the centrality of science within multipolar contests and confrontations. Laboratories, genomes, pathogens and surveillance systems have become adopted as symbols of sovereignty, security and strategic competition at times of convenience to hostile actors. The Matryoshka system exploits that reality, turning the very infrastructure designed to protect populations into an instrument of narrative warfare.



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Disclaimer: The Matryoshka dolls featured in this report were created using AI-assisted image generation tools and further refined through human creative direction and design.



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