

AFRICA CDC WORKING GROUP DRC REPORT

LONDON
SCHOOL of
HYGIENE
& TROPICAL
MEDICINE



AFRICA CDC
Centres for Disease Control and Prevention
Safeguarding Africa's Health



VACCINE
CONFIDENCE
PROJECT™

ORIB
International



METHODOLOGY

1,139 Interviews in DRC

1/4 Quarterly fieldwork planned for 2022

QC Quality control checked by in-country research teams and centrally in London, UK

F2F Face-to-face methodology using random household probability sampling

TOPLINE FINDINGS STRUCTURE

- 1. VACCINES DEPLOYED VS VACCINES ADMINISTERED**
- 2. DEMAND FOR COVID-19 VACCINES**
- 3. VCI INDEX**
- 4. MIS/DISINFORMATION**

LOCATIONS SURVEYED IN DRC



● = Sampling units

COVID-19 VACCINES DEPLOYED VS ADMINISTERED

585m COVID-19 vaccines delivered across 54 countries in Africa

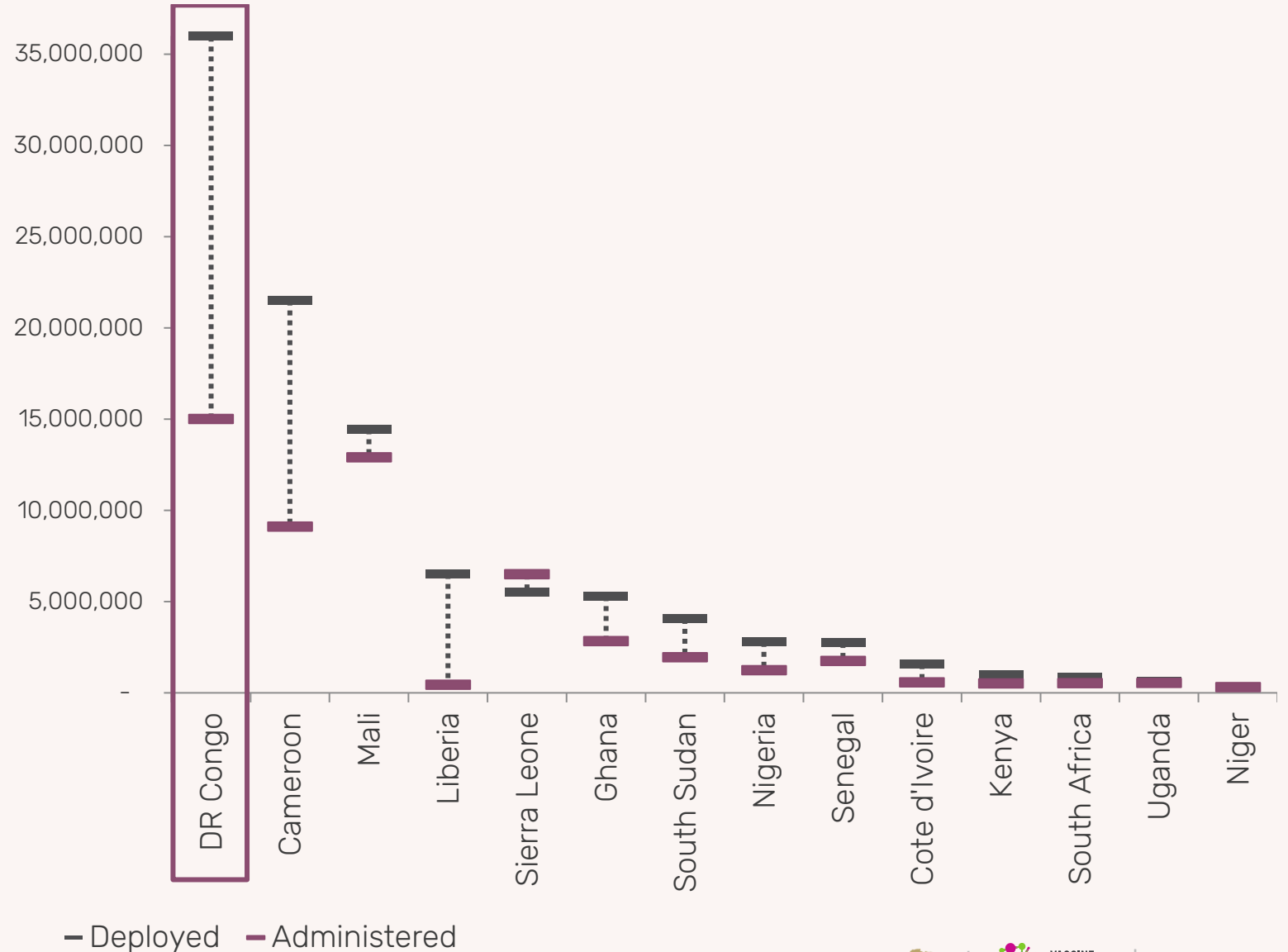
227m More than twice the amount delivered since Nov-21

61% Of delivered vaccines in Jan-22 have been administered

36m Vaccines delivered to DRC

15m Vaccines administered in DRC

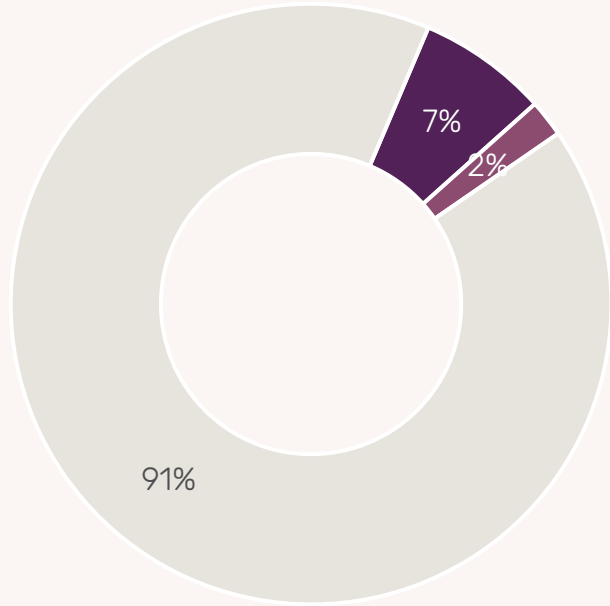
COVID-19 VACCINES DEPLOYED VS ADMINISTERED JAN-22 BY COUNTRIES SURVEYED



Based on Africa CDC data provided to ORB International

THE VACCINATED

Only 9% of participants in DRC have received either one or two doses of the COVID-19 vaccine.



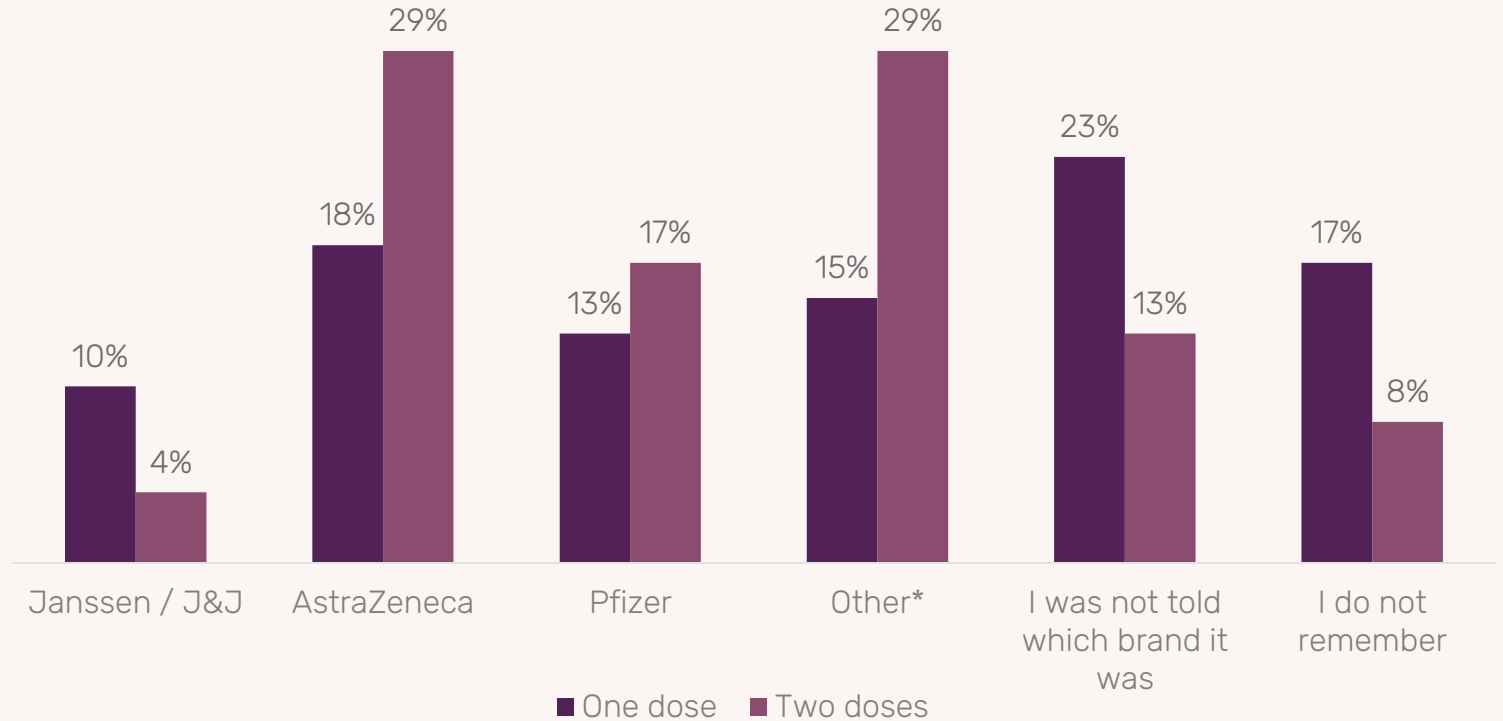
■ One dose ■ Two doses □ Unvaccinated

All interviews: n= 1,139

Around 3 in 10 vaccinated respondents had **AstraZeneca** as their second dose. The same amount were administered a vaccine **other than Pfizer, J&J, or AstraZeneca** as their second dose.

Participants were less likely to be told which brand they had received at their first dose compared to their second dose.

COVID-19 VACCINES ADMINISTERED: BY BRAND



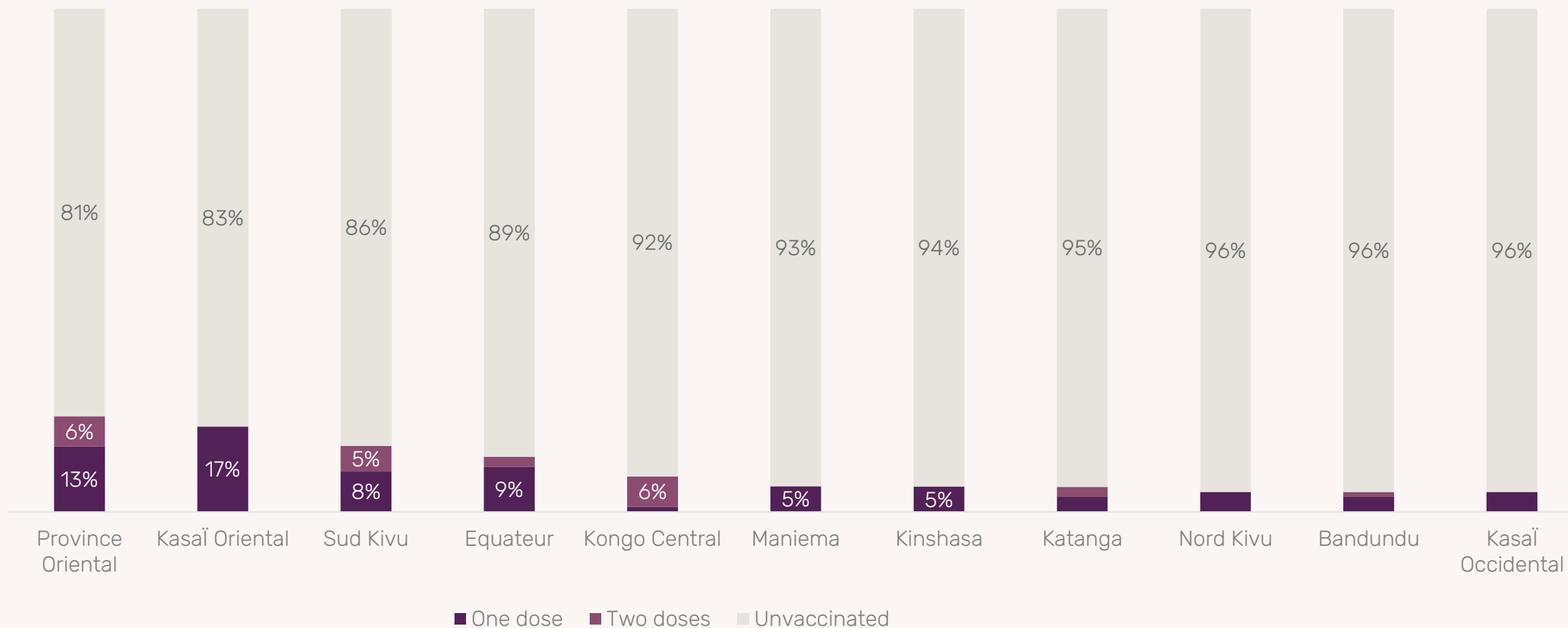
All vaccinated: n= 78

*Other includes Covovax, Novovax, Moderna, Sinovac, Sinopharm and Sputnik

THE VACCINATED

COVID-19 VACCINES ADMINISTERED: DRC

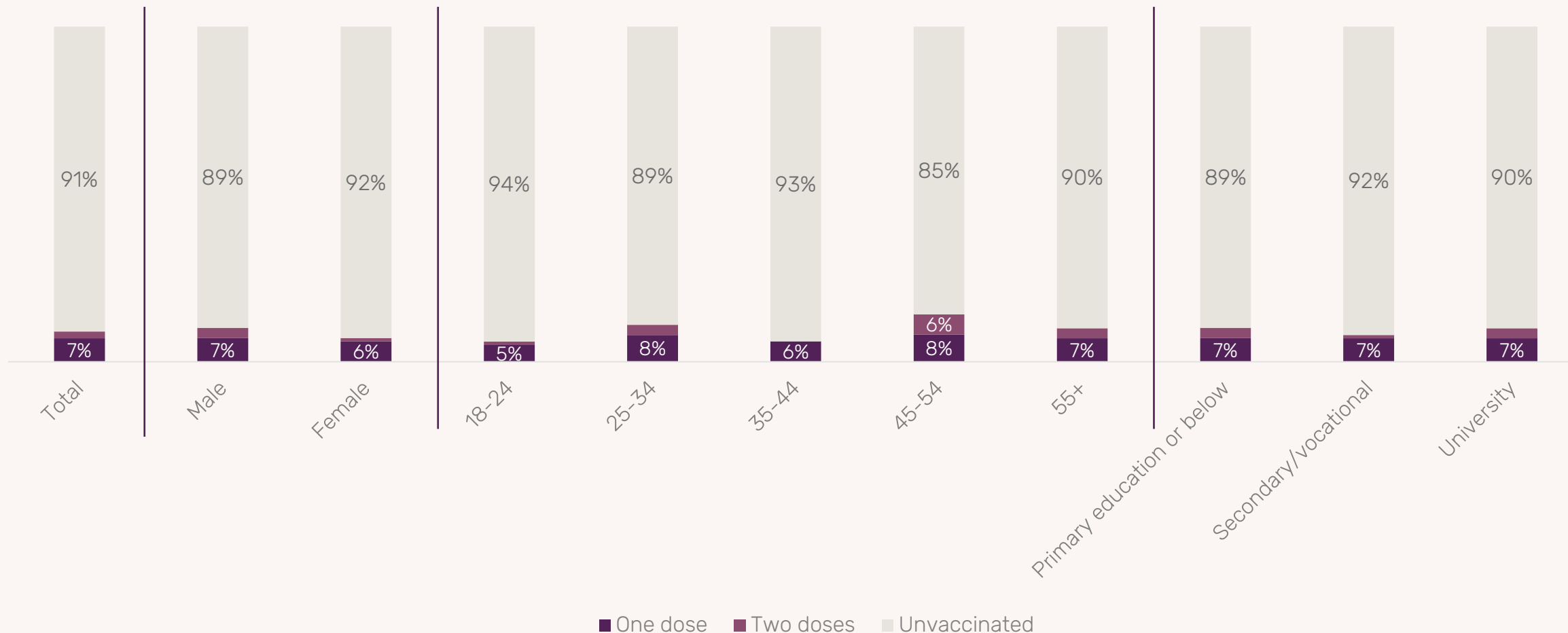
A breakdown of those who have received COVID-19 vaccines shows differences between the regions. In **Province Oriental, Sud Kivu, and Kongo Central**, it seems those with access to a vaccine have been able to receive two doses. However, those in regions such as **Kasaï Oriental, Maniema, Kinshasa, Nord Kivu, and Kasaï Occidental** have only received one dose.



THE VACCINATED

COVID-19 VACCINES ADMINISTERED: DRC

Compared with males, there is a **greater percentage of female respondents unvaccinated against COVID-19 in DRC**. Those aged **18-24 and 35-44** are also **less likely to be vaccinated** than those in other age groups. There are minimal differences for level of education, but those with secondary/vocational education are less likely to have received a dose of vaccine.



DEMAND FOR COVID-19 VACCINES: THE UNVACCINATED

Unvaccinated respondents are more likely to accept a vaccine to protect their friends, family and/or at-risk groups than to protect themselves. Compared to other countries, there is quite a large percentage of respondents who fall within the **unsure** category or say they don't know if they would accept the vaccine. More than 6 in 10 participants reported they are likely to accept a vaccine for children in their care.

NET REFUSAL HIGHER AMONGST...

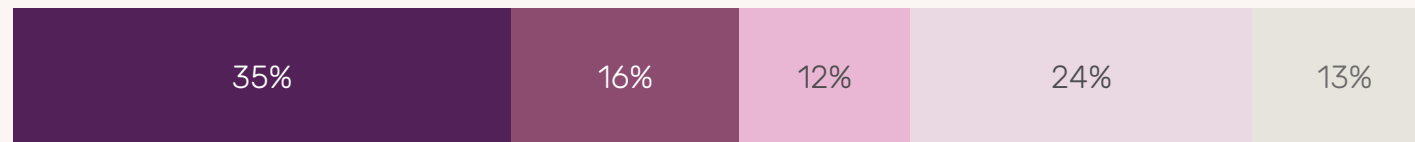
50% Stay-at-home parents

49% Those who think COVID-19 vaccines are unsafe

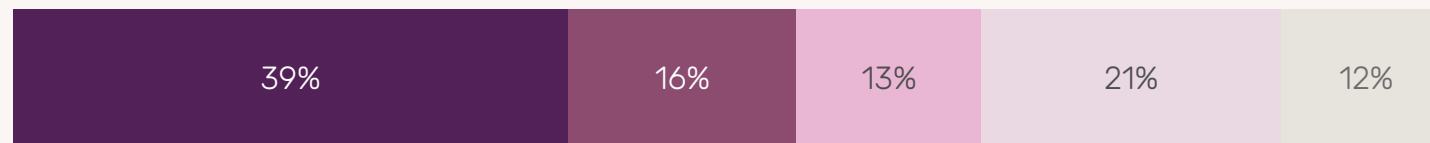
45% Those who are hesitant across the VCI Index (safety, effectiveness and importance)

41% Those who disagree the government handled the pandemic 'well' (compared to 37% of think the government did)

COVID-19 VACCINE ACCEPTANCE: TO PROTECT MYSELF



COVID-19 VACCINE ACCEPTANCE: TO PROTECT FRIENDS, FAMILY AND/OR AT-RISK GROUPS



COVID-19 VACCINE ACCEPTANCE: FOR CHILDREN IN PARTICIPANTS CARE*



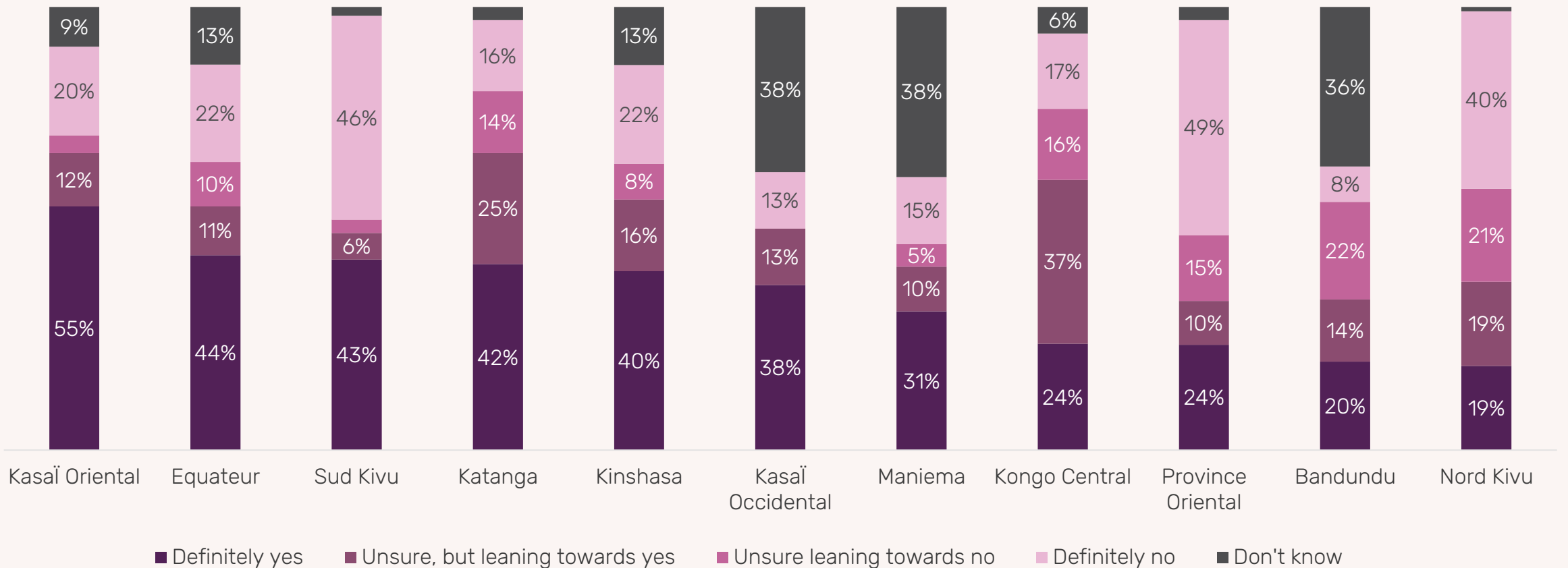
■ Definitely yes ■ Unsure, but leaning towards yes ■ Unsure leaning towards no ■ Definitely no ■ Don't know

DEMAND FOR COVID-19 VACCINES: THE UNVACCINATED

There are clear regional differences for those who are **unvaccinated and willing to accept a COVID-19 vaccine**. For example, in regions such as **Province Oriental** and **Nord Kivu** there is a large percentage of respondents **unlikely to accept a COVID-19 vaccine**. Whereas, in **Kasaï Oriental** and **Katanga** quite a high proportion say they would be **likely to accept a vaccine**.

In **Kasaï Occidental**, **Maniema** and **Bandundu** more than 1 in 3 respondents were unable to provide an answer and report they don't know if they would accept a vaccine or not, and regions such as **Kongo Central**, **Katanga**, **Bandundu** and **Nord Kivu** have a high percentage of unsure respondents. This suggests there's quite a lot of uncertainty around accepting the vaccine.

COVID-19 VACCINE ACCEPTANCE: TO PROTECT YOURSELF – BY REGION



DEMAND FOR DIFFERENT COVID-19 VACCINE BRANDS

PARTICIPANTS RANKED THE IMPORTANCE OF ATTRIBUTES IF THEY WERE TO DECIDE WHICH BRAND OF VACCINE TO TAKE...

42% Agree it is **important** that the brand is recommended by a trusted healthcare practitioner

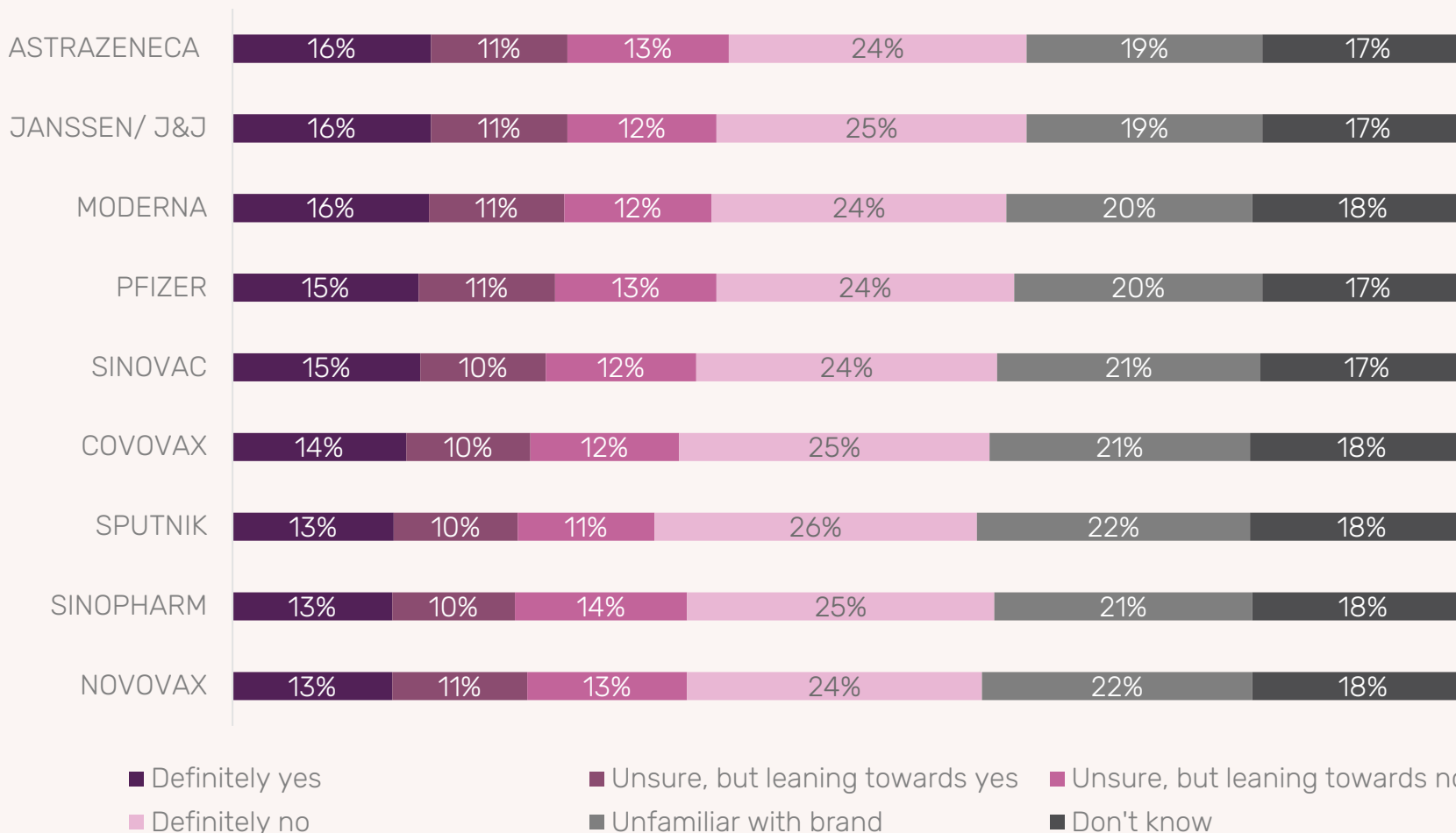
41% Agree that must be a **brand** that has a **good reputation**

38% Agree it must be developed in a country that makes them **confident of its quality**

39% Agree it is **important** it must be a **brand** they are **already familiar with**

All interviews: n= 1,139

COVID-19 VACCINE ACCEPTANCE: BY BRAND



Unvaccinated: n= 1,037

MOTIVATION AND REASONS FOR REFUSAL

Amongst those who are unvaccinated and are either unsure about getting a COVID-19 vaccine or outright refused, we asked them what would **make them more likely to get a vaccine**, and secondly what their **reasons for refusing a vaccine** are...

23% If the government made a vaccine mandatory

Highest amongst **women under 35, primary educated (or below), and retired** respondents.

21% If the vaccine was proven to be safe

Highest amongst **University educated, stay-at-home parents, and those who think the threat of COVID is typically correct.**

19% If my employer required me to get one

Highest amongst **45-54 year olds, primary educated (or below), and rural** populations.

15% If I needed to have a vaccine to access health services

Highest amongst **women, over 55s, primary educated (or below), healthcare workers, and rural** populations.

35% I do not feel I am at risk of catching the virus

Highest amongst **women, primary educated (or below), healthcare workers, and rural** populations.

19% I do not yet know enough about the vaccine to make a decision

Highest amongst **men under 35, primary educated (or below), unemployed, stay-at-home parents, and urban** populations.

15% I am worried that I will get seriously ill/die from the vaccine

Highest amongst **women, older age groups, primary educated (or below), and rural** populations.

15% I do not believe the virus exists

Highest amongst **men over 35 and stay-at-home parents,**

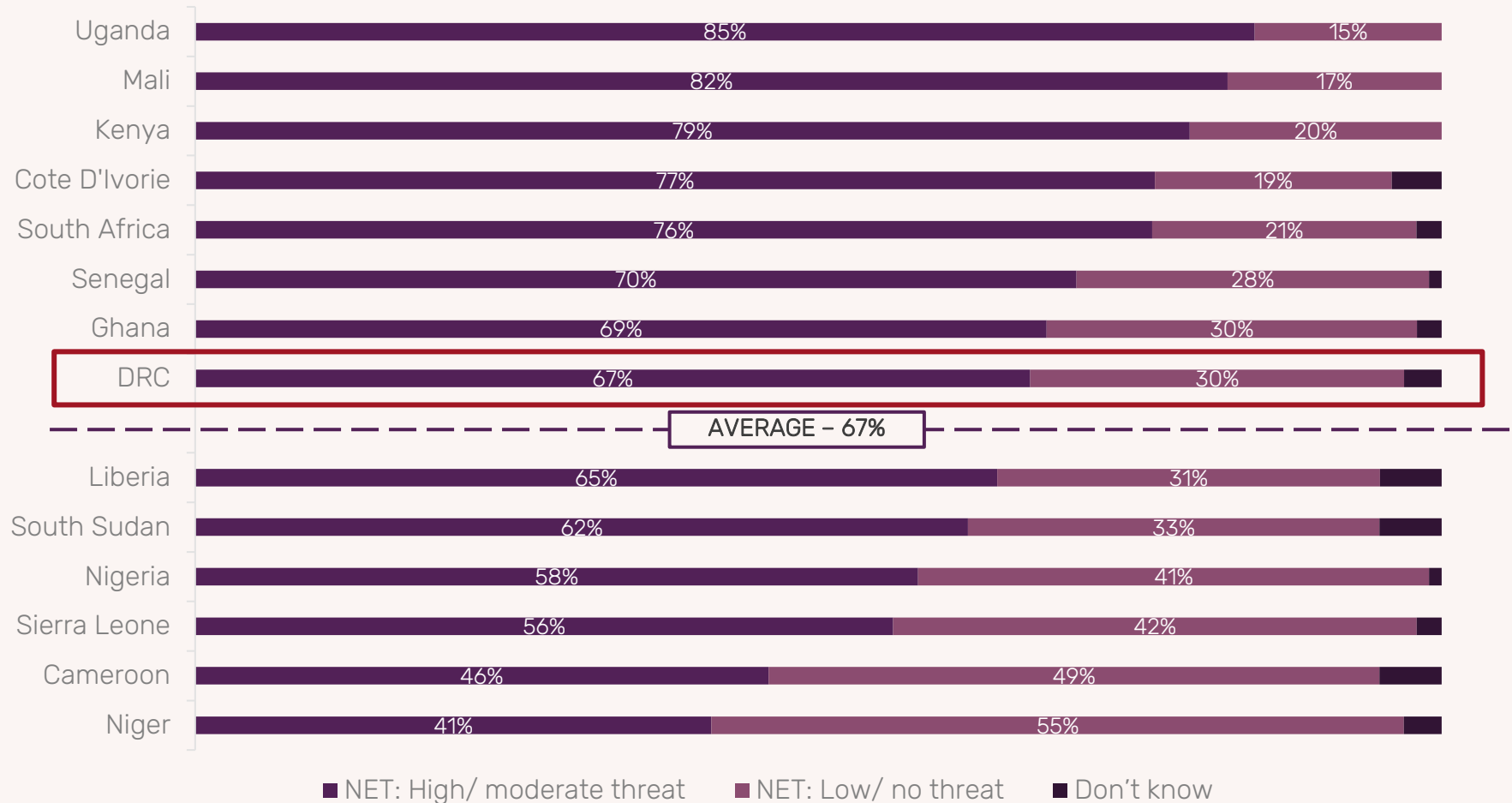
PERCEIVED THREAT OF COVID-19: ALL COUNTRIES

RANKING THE LEVEL OF PERSONAL THREAT... THOSE WHO NET AGREE THERE IS HIGH/MODERATE THREAT...

- 85%** Malaria
- 74%** Lack of access to clean water
- 70%** Lack of access to food
- 67%** COVID-19
- 64%** Tuberculosis
- 63%** HIV/AIDs

DRC: n= 1,139

PERSONAL THREAT FROM COVID-19: BY COUNTRIES SURVEYED



All interviews: n= 15,375

PERCEIVED THREAT OF COVID-19: DRC

THOSE WHO NET AGREE THERE IS HIGH/MODERATE THREAT FROM COVID-19

84% Stay-at-home parents

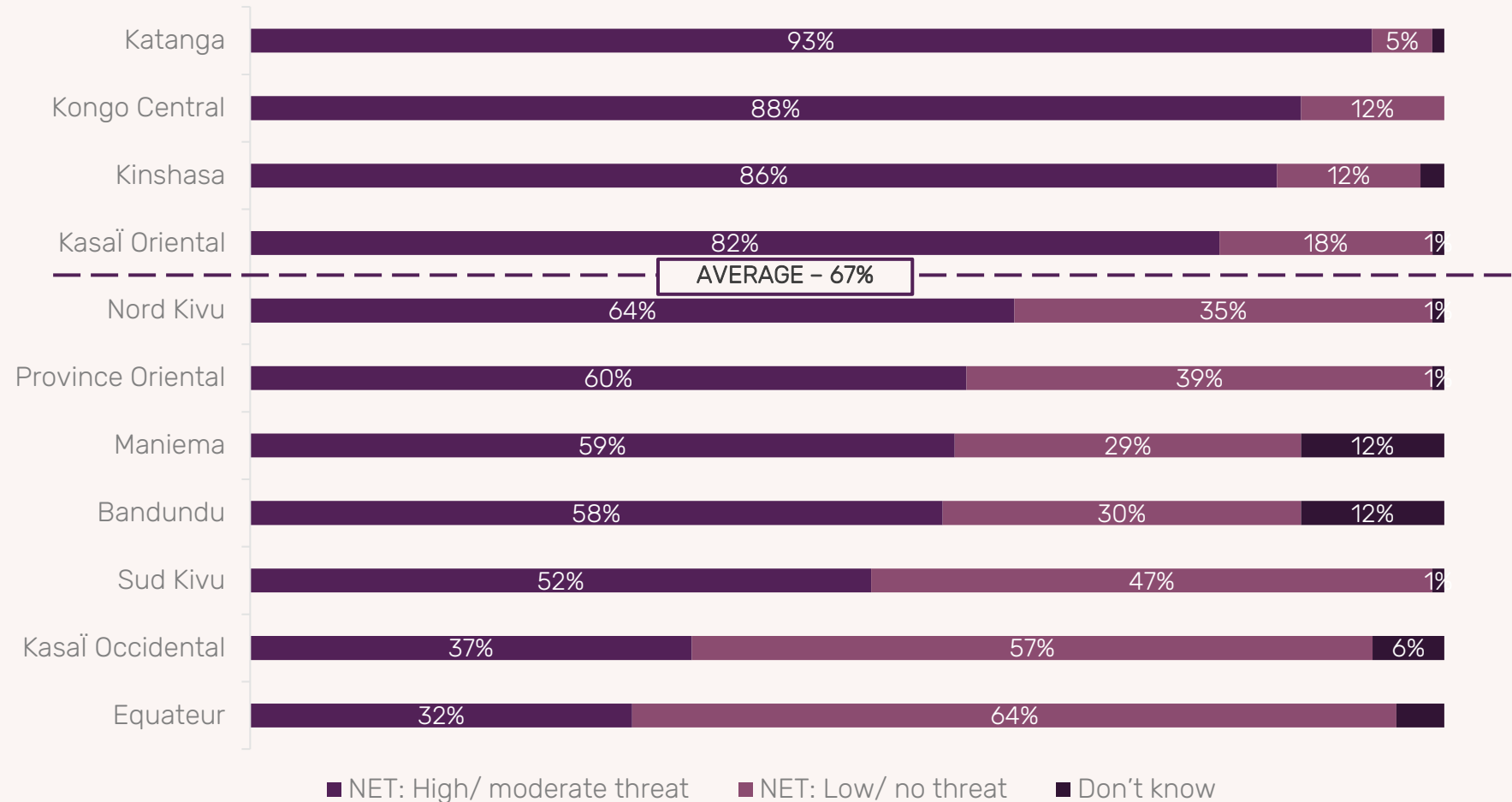
74% Urban

72% Women over 35

70% Vaccine confident group

All interviews: n= 1,139

PERSONAL THREAT FROM COVID-19: BY REGION



All interviews: n= 1,139

PERCEPTIONS OF THE EXAGGERATION OF COVID-19

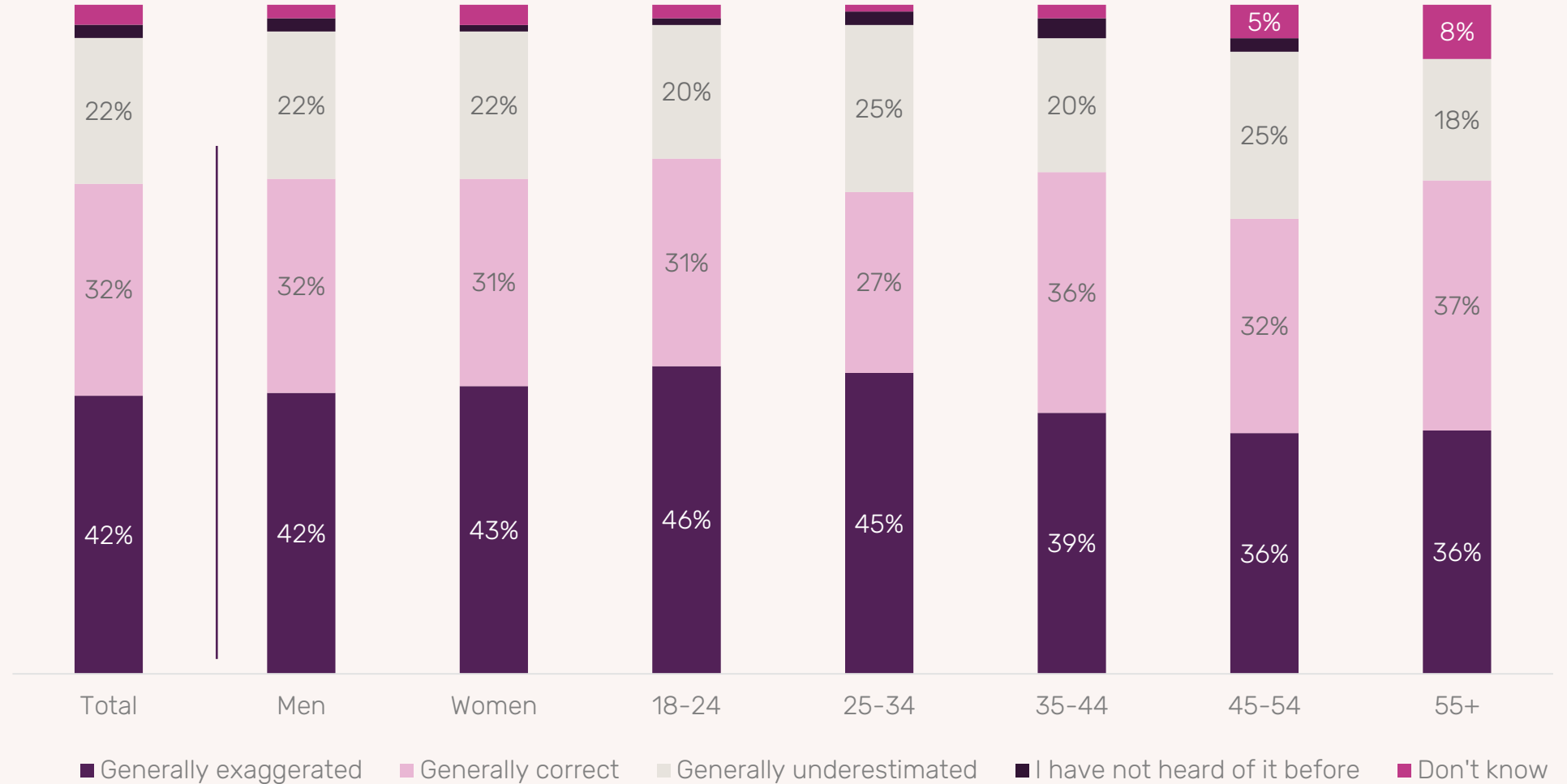
PROPORTION OF PARTICIPANTS WHO BELIEVE THAT THREAT FROM COVID-19 IS EXAGGERATED, UNDERESTIMATED OR ABOUT RIGHT

Survey data shows there is variation in demographics amongst those who feel the threat from COVID-19 is exaggerated.

Those who are more likely to agree the threat is exaggerated:

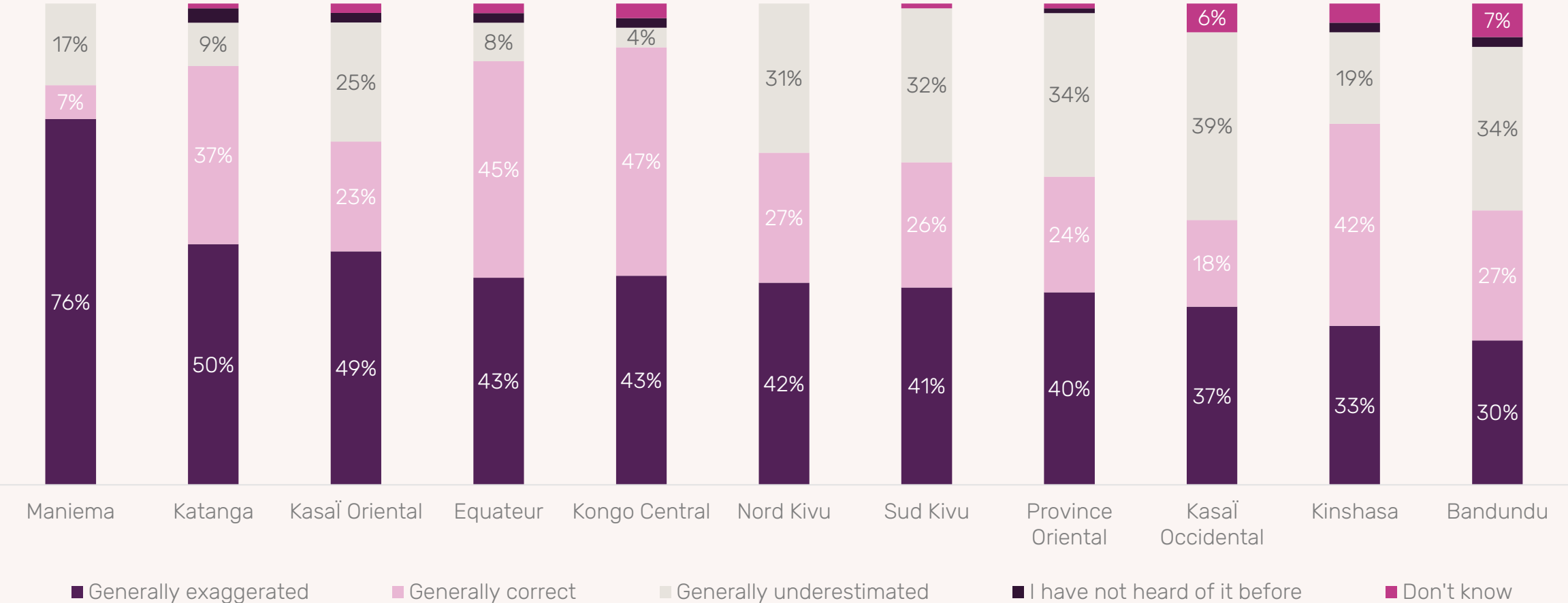
- Under 35s
- Stay-at-home parents
- Vaccine hesitant
- Those who disagree the government has handled the pandemic well

The main differences we observe are across regions (see next slide).



PERCEPTIONS OF THE EXAGGERATION OF COVID-19

PROPORTION OF PARTICIPANTS WHO BELIEVE THAT THREAT FROM COVID-19 IS EXAGGERATED, UNDERESTIMATED OR ABOUT RIGHT: BY REGION

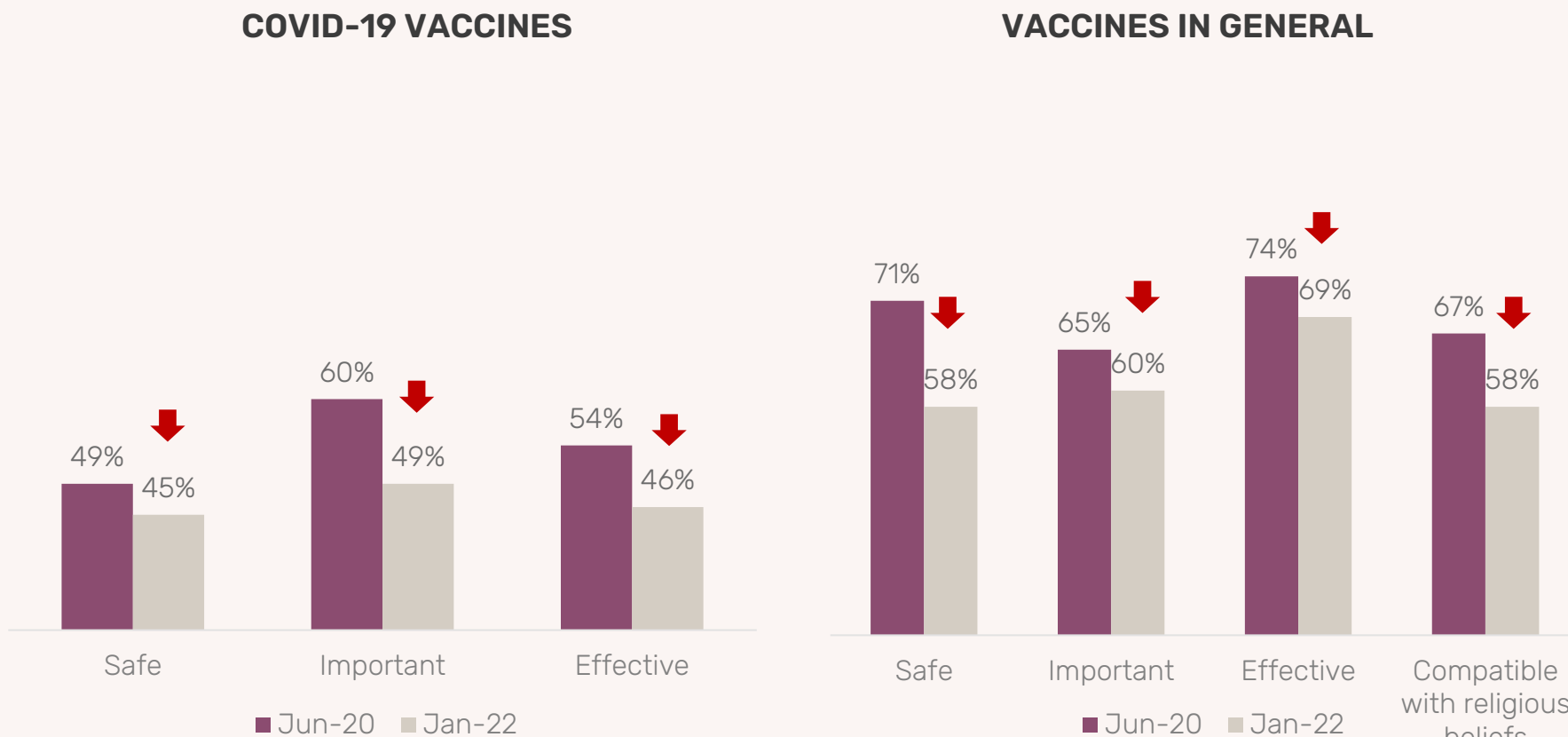


VCI INDEX: COTE D'IVOIRE

Between June 2020 and January 2022, there has been a decrease in the percentage of participants who NET agree with statements in the VCI index (for both COVID-19 vaccines and vaccines in general).

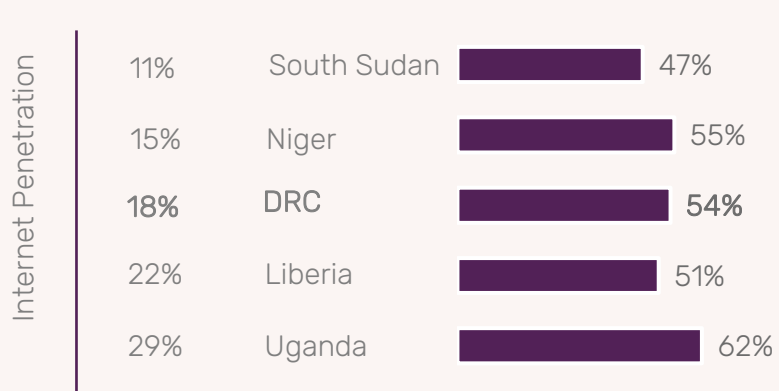
Those who are less likely to agree with statements in the index are...

- University educated
- Urban populations
- Non-healthcare workers
- Those who think the government have not handled the pandemic well
- Unvaccinated against COVID-19



MIS/DISINFORMATION

EXPOSURE TO COVID-19 DISINFORMATION (A LOT/SOME) – SIMILAR INTERNET PENETRATION COMPARISON



Of the 14 countries surveyed, DRC's internet penetration falls within the bottom quartile.

When comparing to countries with similar internet penetration, DRC has an average amount of self-reported exposure to mis/disinformation.

SOURCES OF MIS/DISINFORMATION

40% Social media

38% Family or friends

33% TV

39% Radio

22% Internet



74% of respondents also cited that they trust their family or friends for reassurance about the COVID-19 vaccine.

This was at the top with religious leaders (74%) and ahead of the WHO (64%).

PROPORTION OF PEOPLE WHO BELIEVE STORIES OR INFORMATION AROUND COVID-19 TO BE TRUE OR FALSE

