

# AFRICA CDC WORKING GROUP LIBERIA 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

**1,129** Interviews in Liberia

**1/4** Quarterly fieldwork planned for 2022

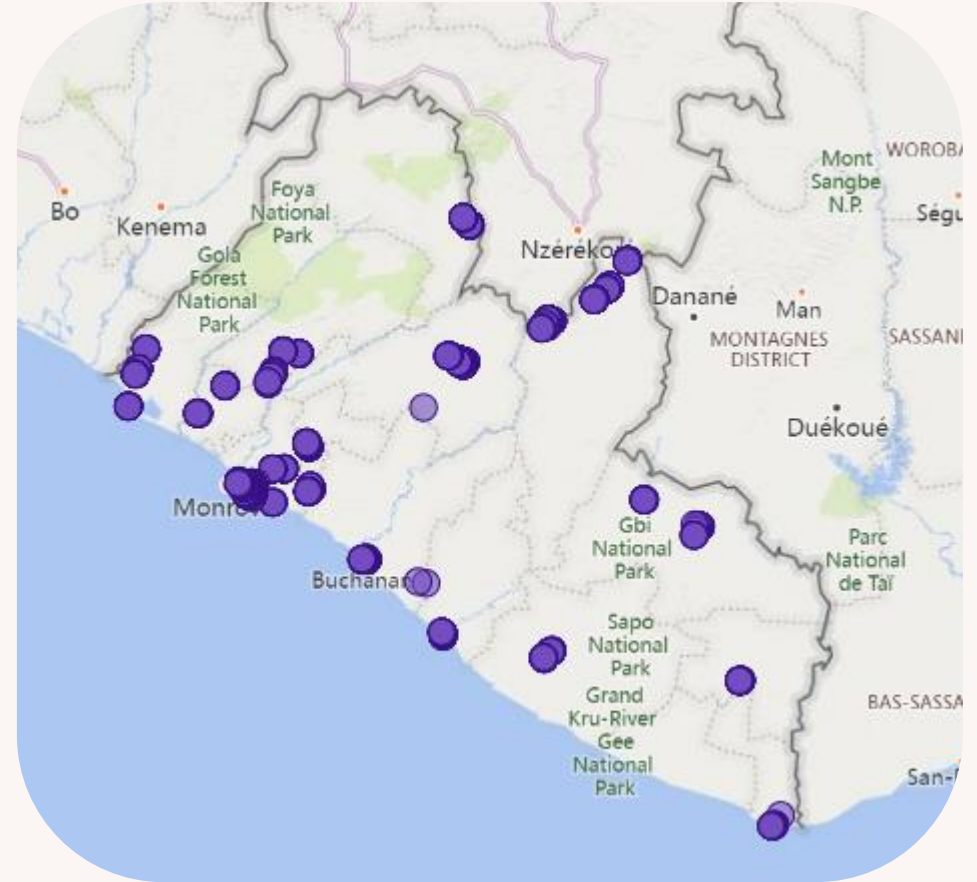
**QC** Quality control checked by in-country research teams and centrally in London, UK

**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 LIBERIA



● = 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

**6.5m** Vaccines delivered to Liberia

**438k** Vaccines administered in Liberia

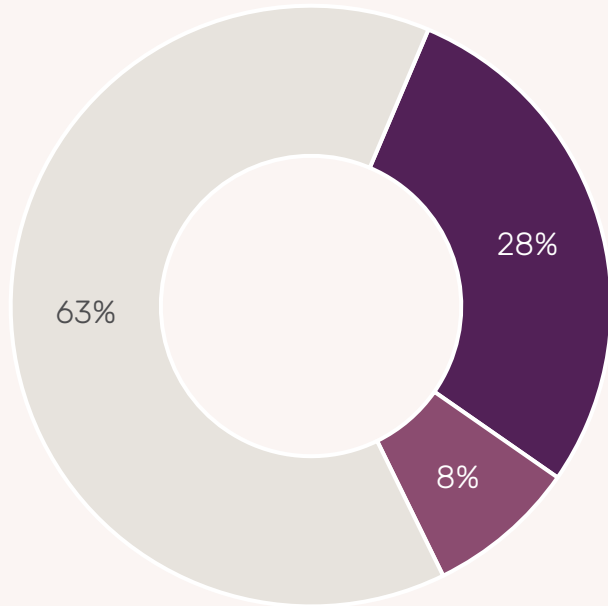
## COVID-19 VACCINES DEPLOYED VS ADMINISTERED JAN-22 BY COUNTRIES SURVEYED



Based on Africa CDC data provided to ORB International

# THE VACCINATED

36% of participants in Liberia have received either one or two doses of the COVID-19 vaccine.



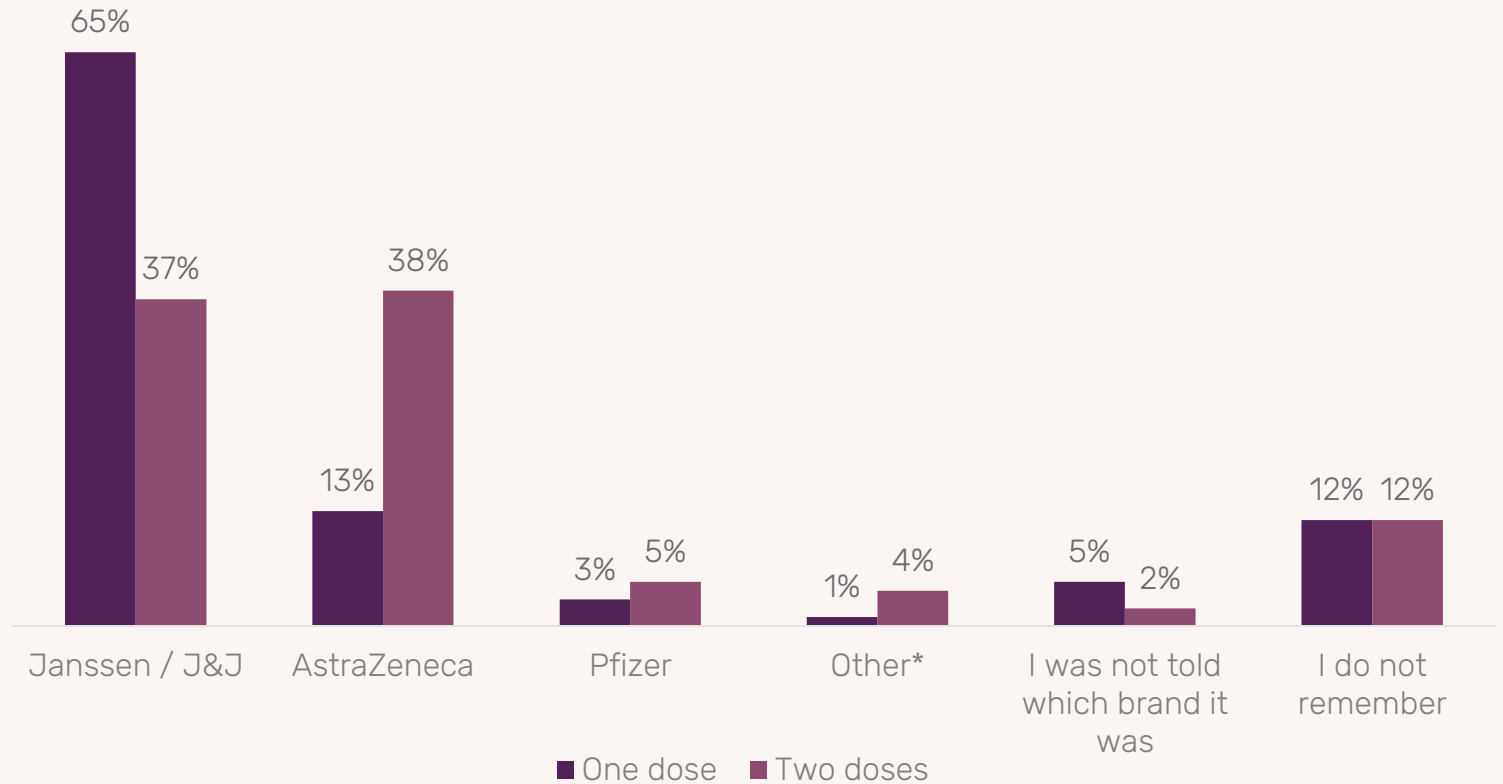
■ One dose ■ Two doses □ Unvaccinated

All interviews: n= 1,129

2 in 3 participants with one dose of vaccine were given the Janssen / J&J vaccine. Those with two doses were equally likely to receive AstraZeneca or Janssen / J&J as their second vaccine.

Around 1 in 10 of those with one or two doses did not remember which brand of vaccine they had been given.

## COVID-19 VACCINES ADMINISTERED: BY BRAND



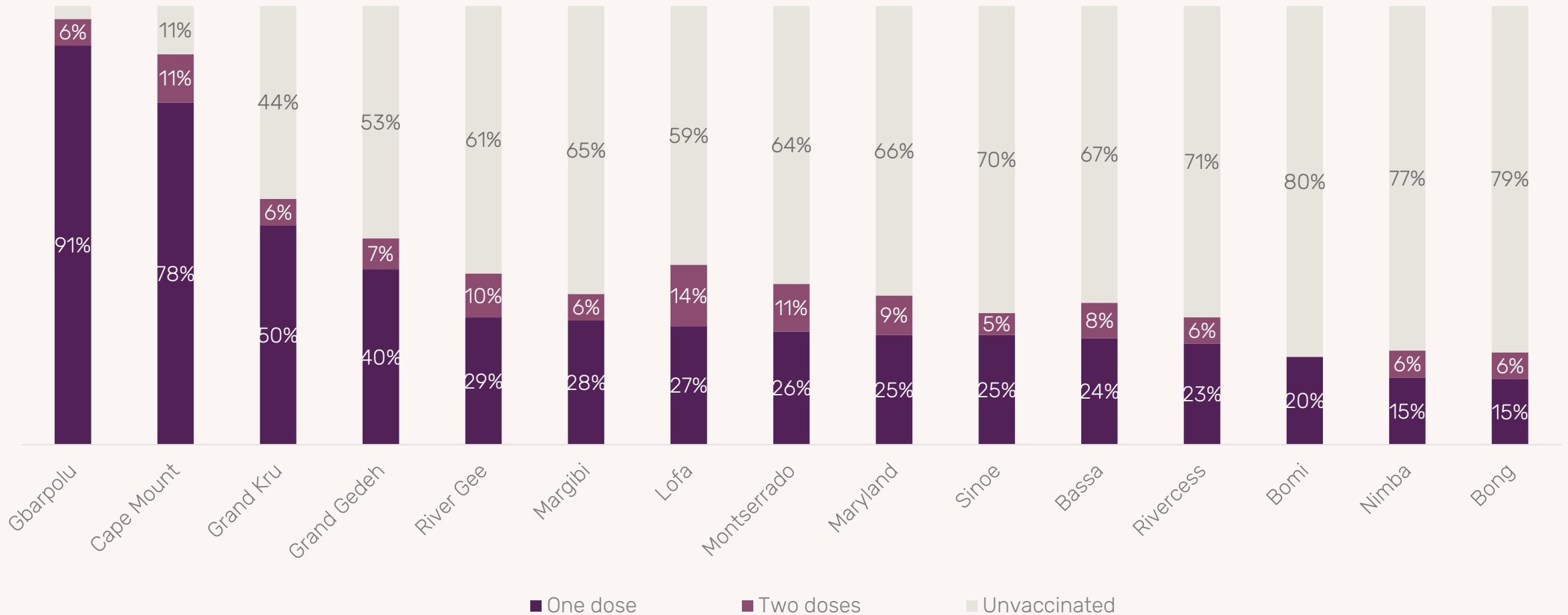
All vaccinated: n= 316

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

# THE VACCINATED

## COVID-19 VACCINES ADMINISTERED: LIBERIA

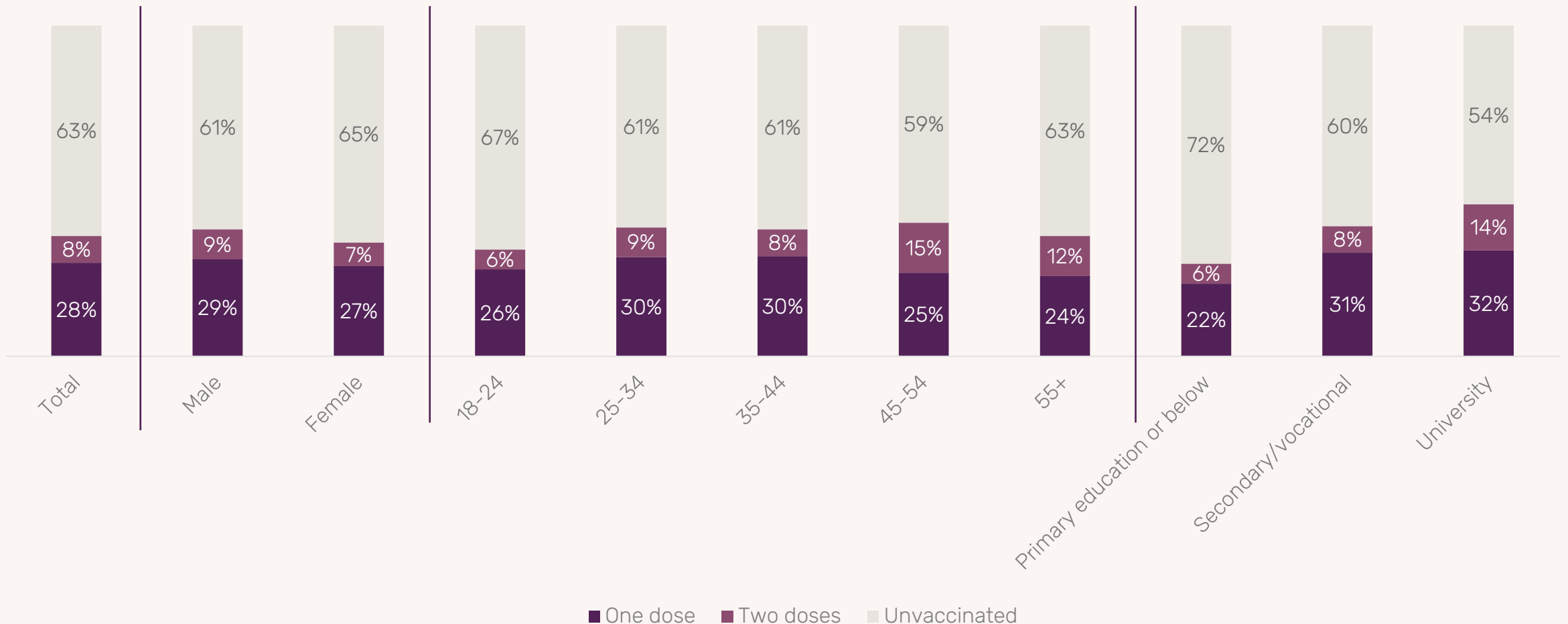
A breakdown of those who have received COVID-19 vaccines shows large differences between regions. In **Bomi** and **Bong**, around **4 in 5** respondents remain unvaccinated, whereas in **Gbarpolu** and **Cape Mount**, less than 11% of respondents remain unvaccinated.



# THE VACCINATED

## COVID-19 VACCINES ADMINISTERED: LIBERIA

Unsurprisingly, those in the **youngest** age group are **more likely to be unvaccinated than those in older age groups**. **Female** respondents in Liberia are also much **more likely to be unvaccinated than males**. The greatest variance is observed for level of education, where likelihood of being unvaccinated is correlated with level of achievement; **primary education or below** has the highest rate of unvaccinated respondents and **university educated** has the lowest.



# DEMAND FOR COVID-19 VACCINES: THE UNVACCINATED

Within the unvaccinated populations in Liberia, **56%** would either **definitely take a COVID-19 vaccine** or are **unsure leaning towards yes** – leaving **36%** who are likely to refuse a vaccine. More than **3 in 4** participants reported they are likely to accept a vaccine for children in their care.

## NET REFUSAL HIGHER AMONGST...

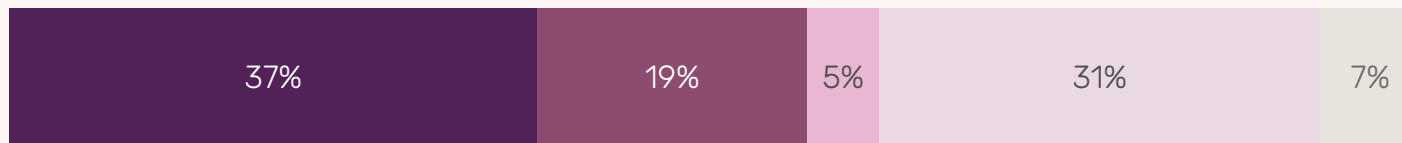
**55%** Those who are hesitant across the VCI Index (safety, effectiveness and importance)

**38%** Females

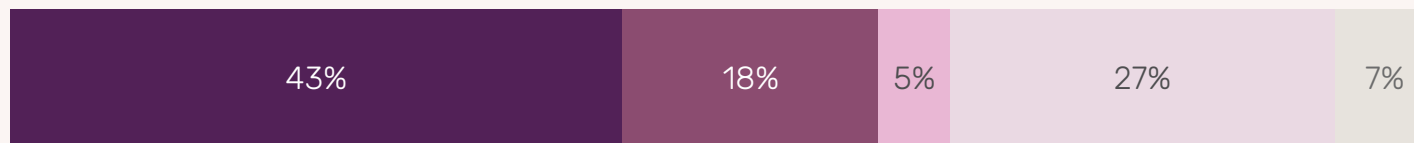
**47%** Those who disagree the government handled the pandemic 'well' (compared to 25% of think the government did)

**42%** Those who think the threat of COVID-19 is generally exaggerated

### 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\*



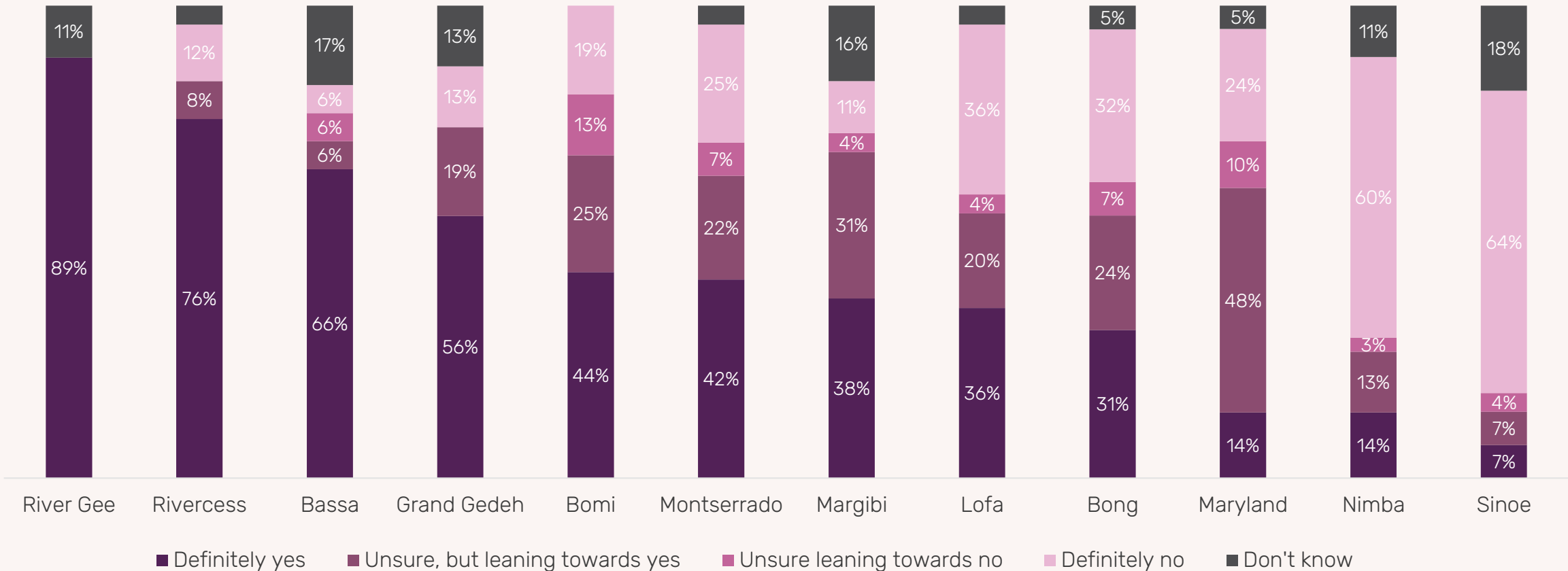
■ Definitely yes ■ Unsure, but leaning towards yes ■ Unsure leaning towards no ■ Definitely no ■ Don't know

# 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, 71% of respondents in **Rivercess** remain unvaccinated despite there being a clear demand for vaccines (84% would definitely accept a COVID-19 vaccine or were unsure but leaning towards yes). A high proportion of respondents in **Sinoe** also remain unvaccinated (70%), however only 14% agreed they would definitely accept a COVID-19 vaccine or were unsure but leaning towards yes.

**Gbarpolu** respondents have the highest vaccination rate (97% reporting to have one or two vaccines). The one respondent who had not been vaccinated said they would definitely accept a COVID-19 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...

**65%** Agree it is **important** that the brand is recommended by a trusted healthcare practitioner

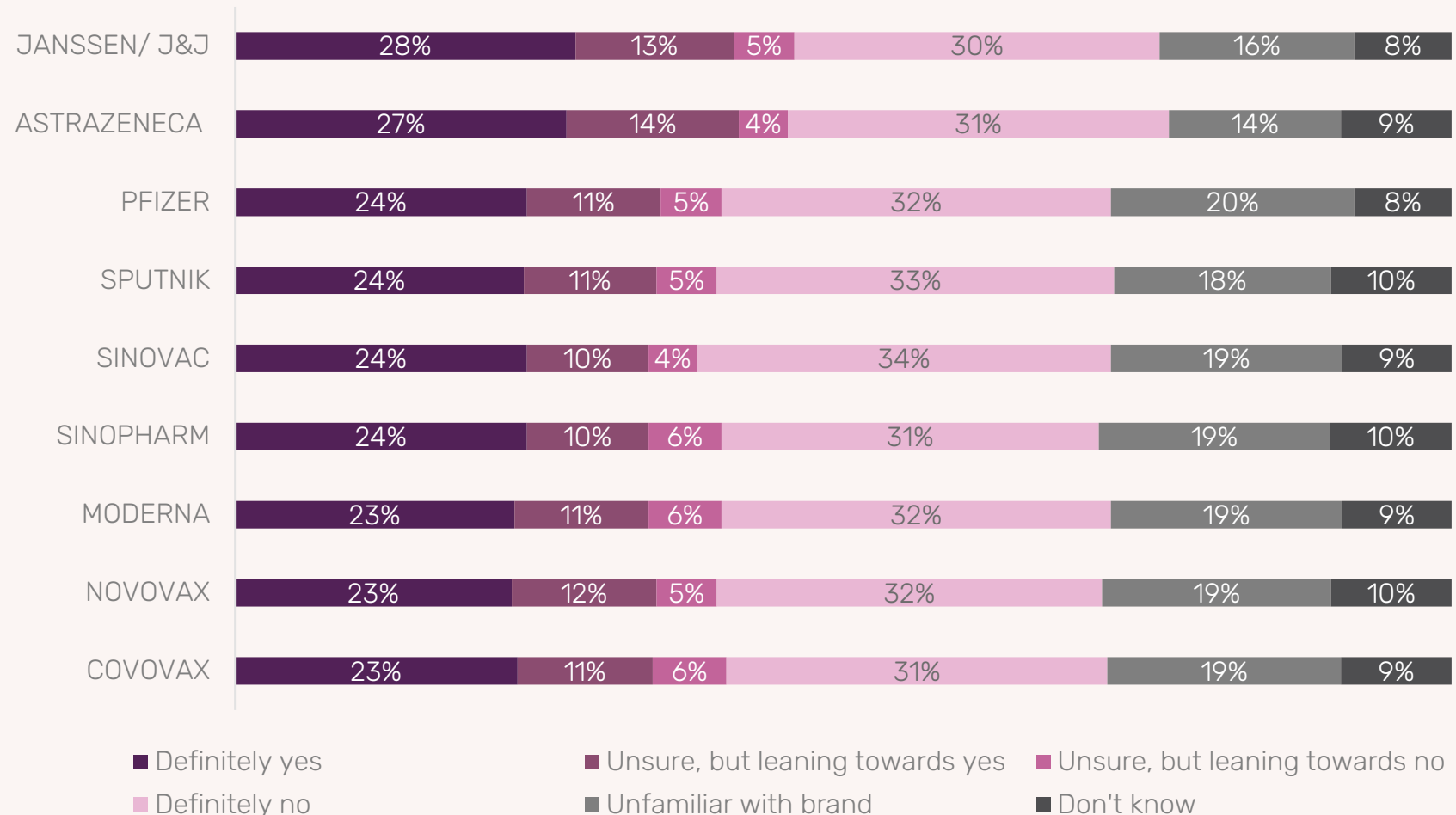
**65%** Agree that must be a **brand** that has a **good reputation**

**60%** Agree it must be developed in a country that makes them **confident of its quality**

**62%** Agree it is **important** it must be a **brand** they are **already familiar with**

All interviews: n= 1,129

## COVID-19 VACCINE ACCEPTANCE: BY BRAND



Unvaccinated: n= 718

# 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...

**19%** If the government made a vaccine mandatory

Highest amongst males, **University educated**, and **working populations**.

**17%** If the vaccine was proven to be safe

Highest amongst **women, rural populations**, and those who agree the **government has handled the COVID-19 pandemic well**.

**13%** If I needed to have a vaccine to access health services

Highest amongst **students**, those who have been exposed to **COVID-19 related disinformation**, and **urban populations**.

**8%** If my employer required me to get one

Highest amongst **women under 35, University educated**, and **healthcare workers**.

**22%** I do not feel I am at risk of catching the virus

Highest amongst **men over 35, women under 35**, and **working populations**.

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

Highest amongst **males** and those aged **55 and over, University educated** and those who have been **exposed to Covid-19 related misinformation**.

**16%** I am worried that I will get seriously ill/die from the vaccine

Highest amongst **women over 35, the unemployed**, and those who think the **threat from COVID-19 is typically exaggerated**.

**3%** I do not believe the virus exists

Highest amongst **women, those with children <18 years old** and **University educated**.

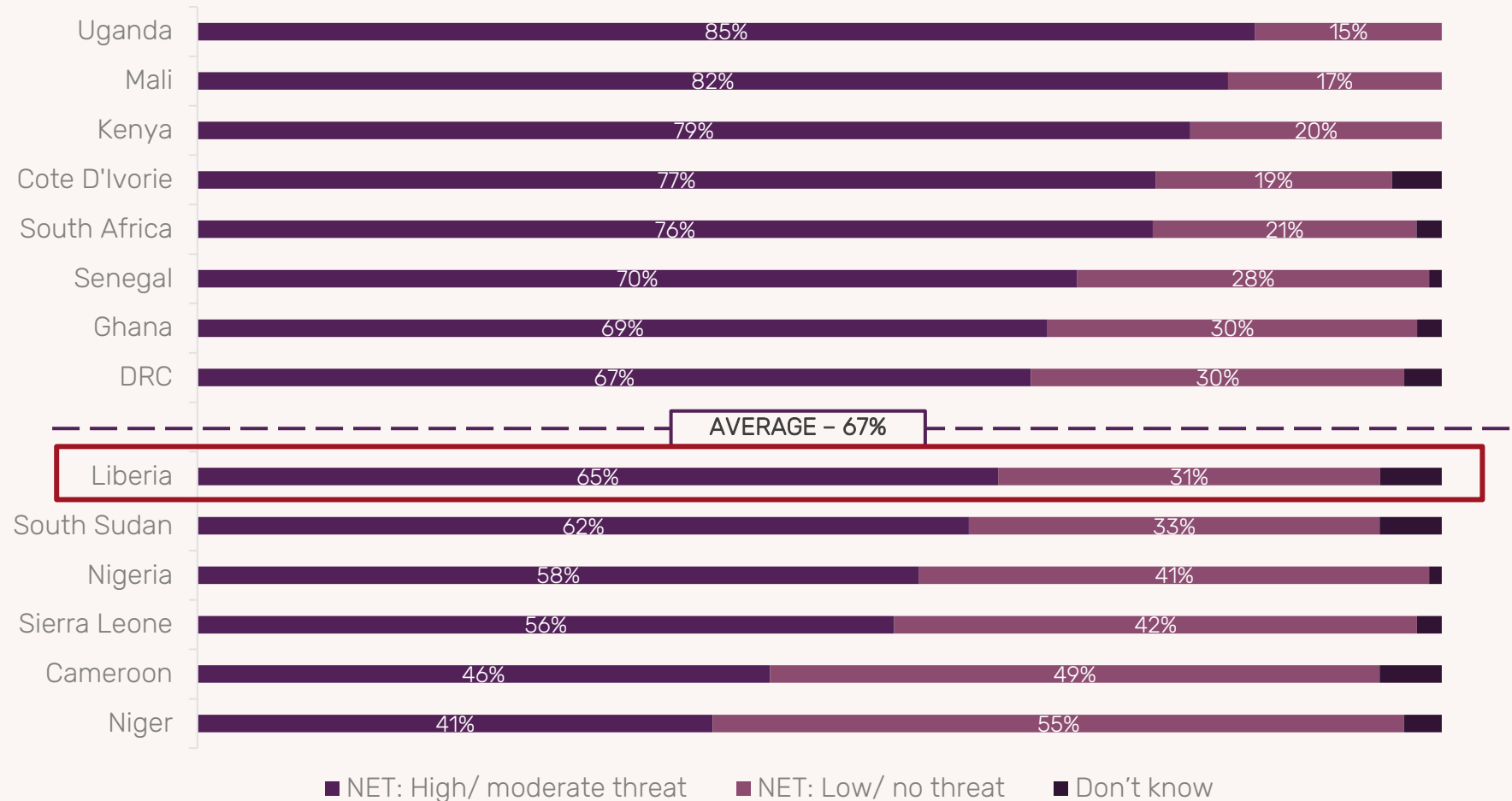
# PERCEIVED THREAT OF COVID-19: ALL COUNTRIES

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

- 74%** Malaria
- 77%** Lack of access to food
- 74%** Lack of access to clean water
- 65%** COVID-19
- 57%** Tuberculosis
- 56%** HIV/AIDs

Liberia: n= 1,129

## PERSONAL THREAT FROM COVID-19: BY COUNTRIES SURVEYED



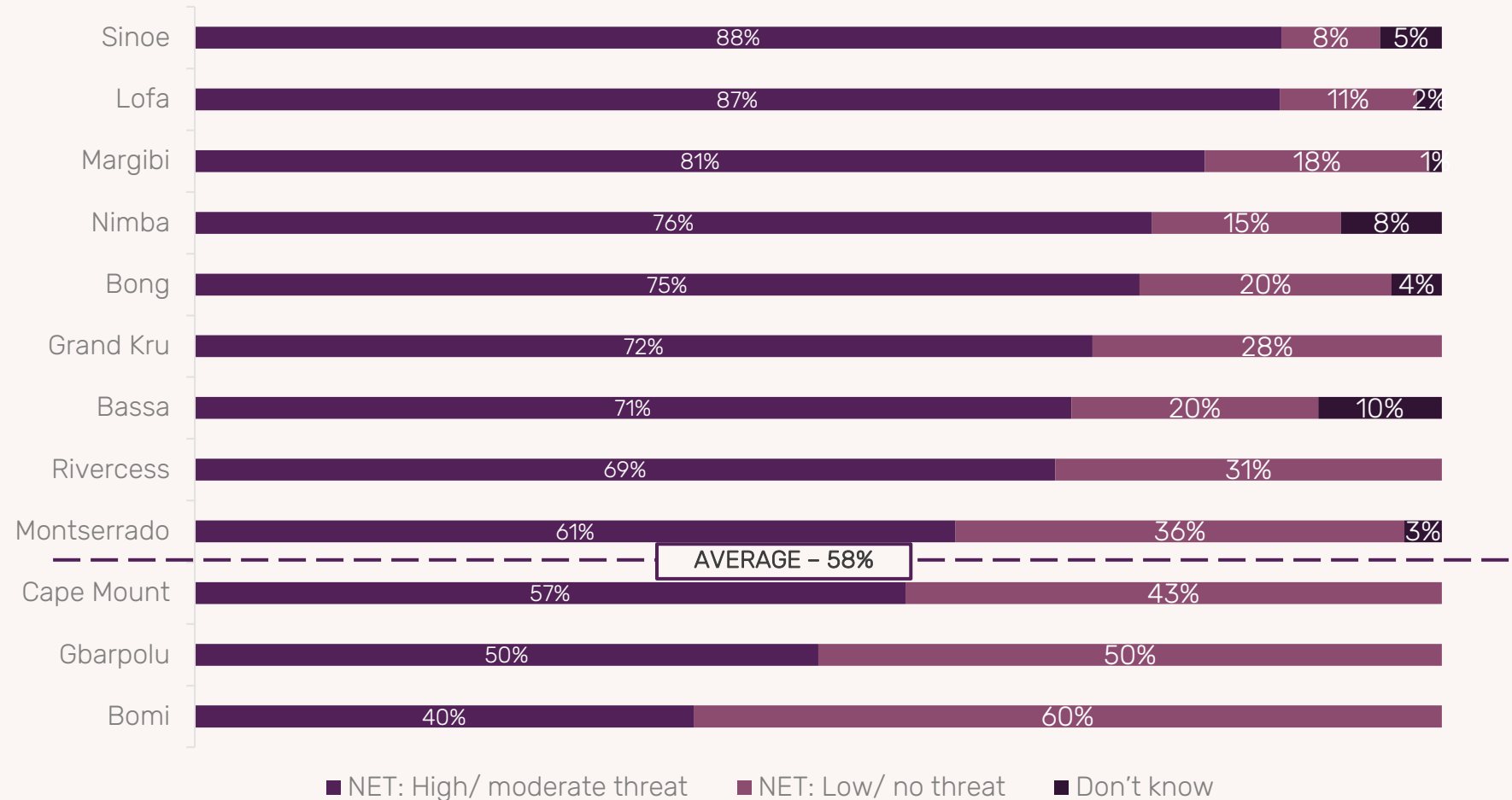
All interviews: n= 15,375

# PERCEIVED THREAT OF COVID-19: LIBERIA

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

- 81%** Healthcare workers
- 79%** Stay-at-home parents
- 69%** University educated
- 69%** Under 35s

## PERSONAL THREAT FROM COVID-19: BY REGION



All interviews: n= 1,129

All interviews: n= 1,129

# PERCEPTIONS OF THE EXAGGERATION OF COVID-19

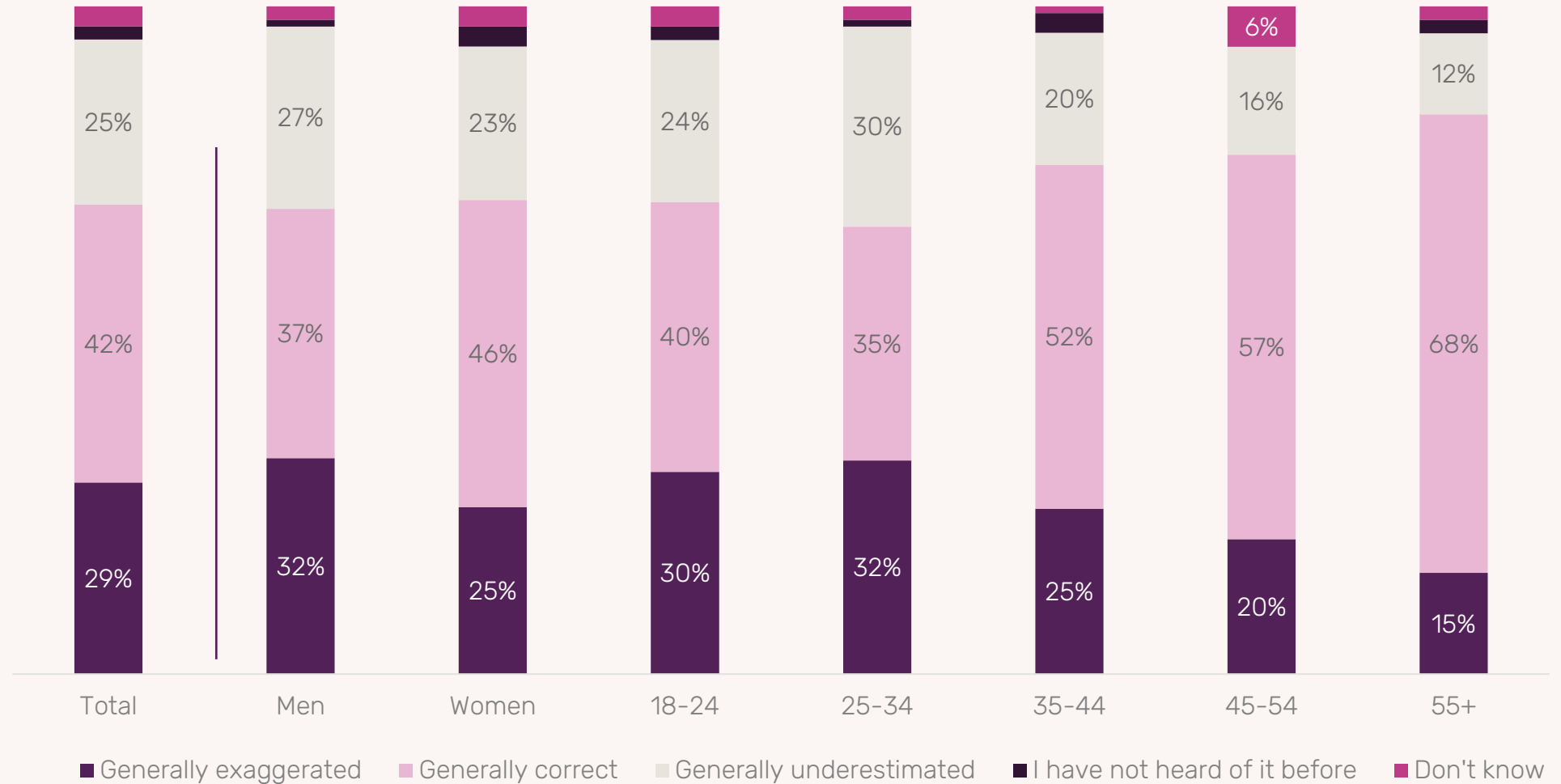
## PROPORTION OF PARTICIPANTS WHO BELIEVE THAT THREAT FROM COVID-19 IS EXAGGERATED, UNDERESTIMATED OR ABOUT RIGHT

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

As well as men and under 35s agreeing with the sentiment that the threat is exaggerated, it is also higher amongst:

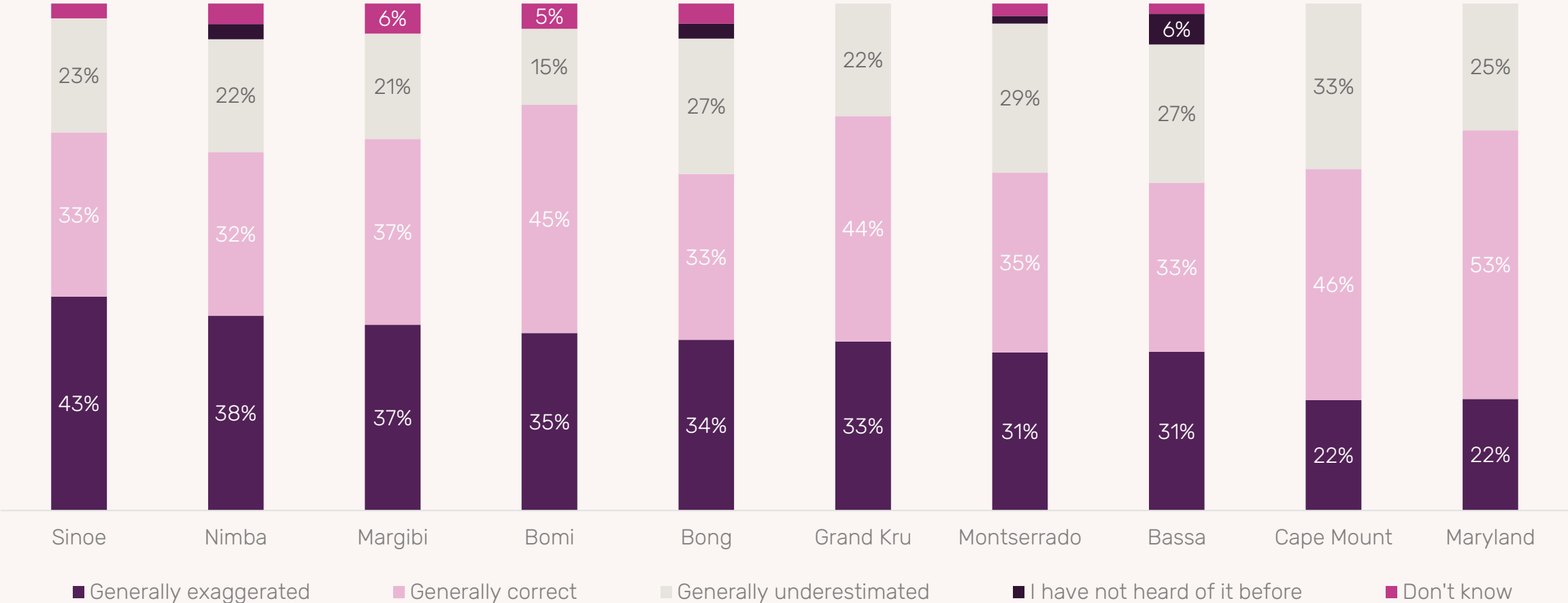
- Those who **disagree** that the government handled the pandemic well
- Those from **urban populations**

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



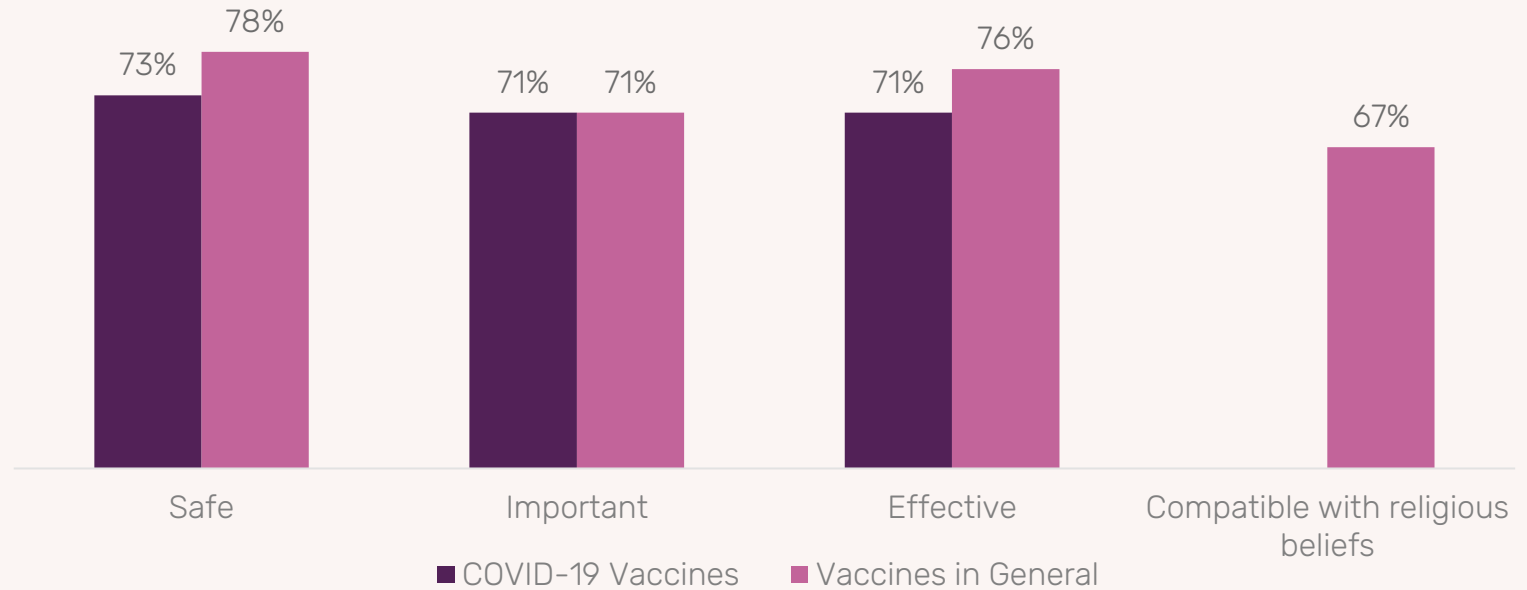
# VCI INDEX: LIBERIA

There are minimal differences in the extent to which participants NET agree with statements on the VCI Index for COVID-19 vaccines vs. vaccines in general. However, a greater percentage of participants agreed that **vaccines in general** are safe and effective, compared to COVID-19 vaccines specifically.

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

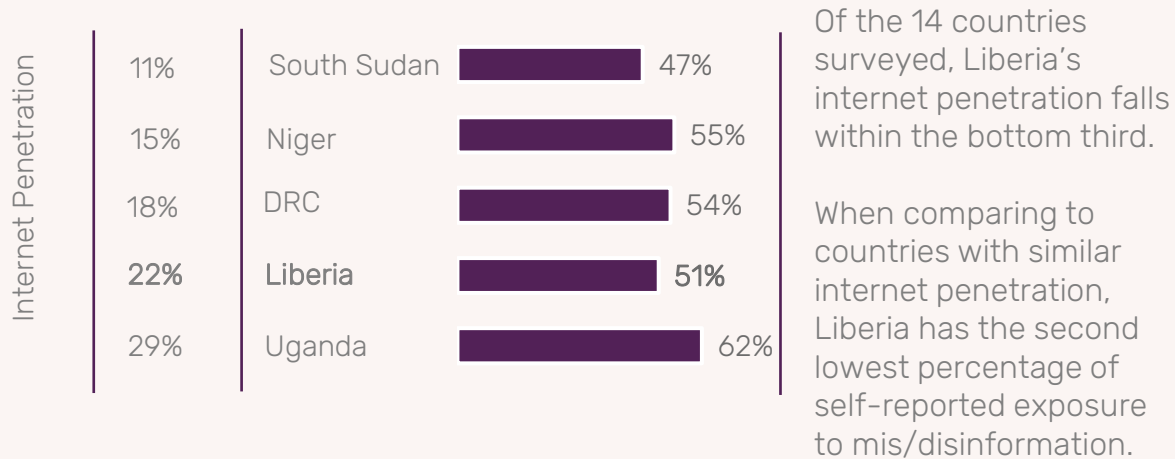
- Men under 35
- Stay-at-home parents
- Those who think the threat of COVID-19 is generally exaggerated
- Unvaccinated against COVID-19

### COVID-19 VACCINES & VACCINES IN GENERAL



# MIS/DISINFORMATION

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



## SOURCES OF MIS/DISINFORMATION

38% Radio

24% Social media

23% Family or friends

16% Internet

7% TV

**76%** of respondents also cited that they trust their family or friends for reassurance about the COVID-19 vaccine.

This was on par with the religious leaders (76%), and just behind the WHO at 80%.

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

