

AFRICA CDC WORKING GROUP

NIGER REPORT



METHODOLOGY

1,219 Interviews in Niger

1/4 Quarterly fieldwork planned for 2022

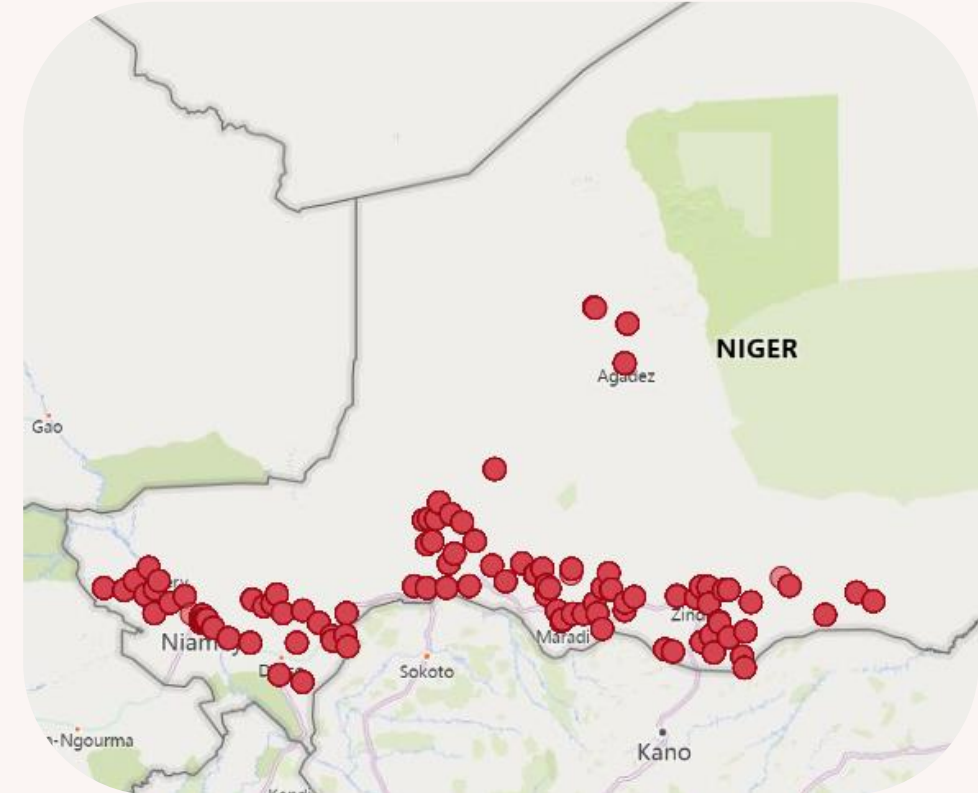
QC Quality control checked by in-country research teams and centrally in London, UK

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 NIGER



● = 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

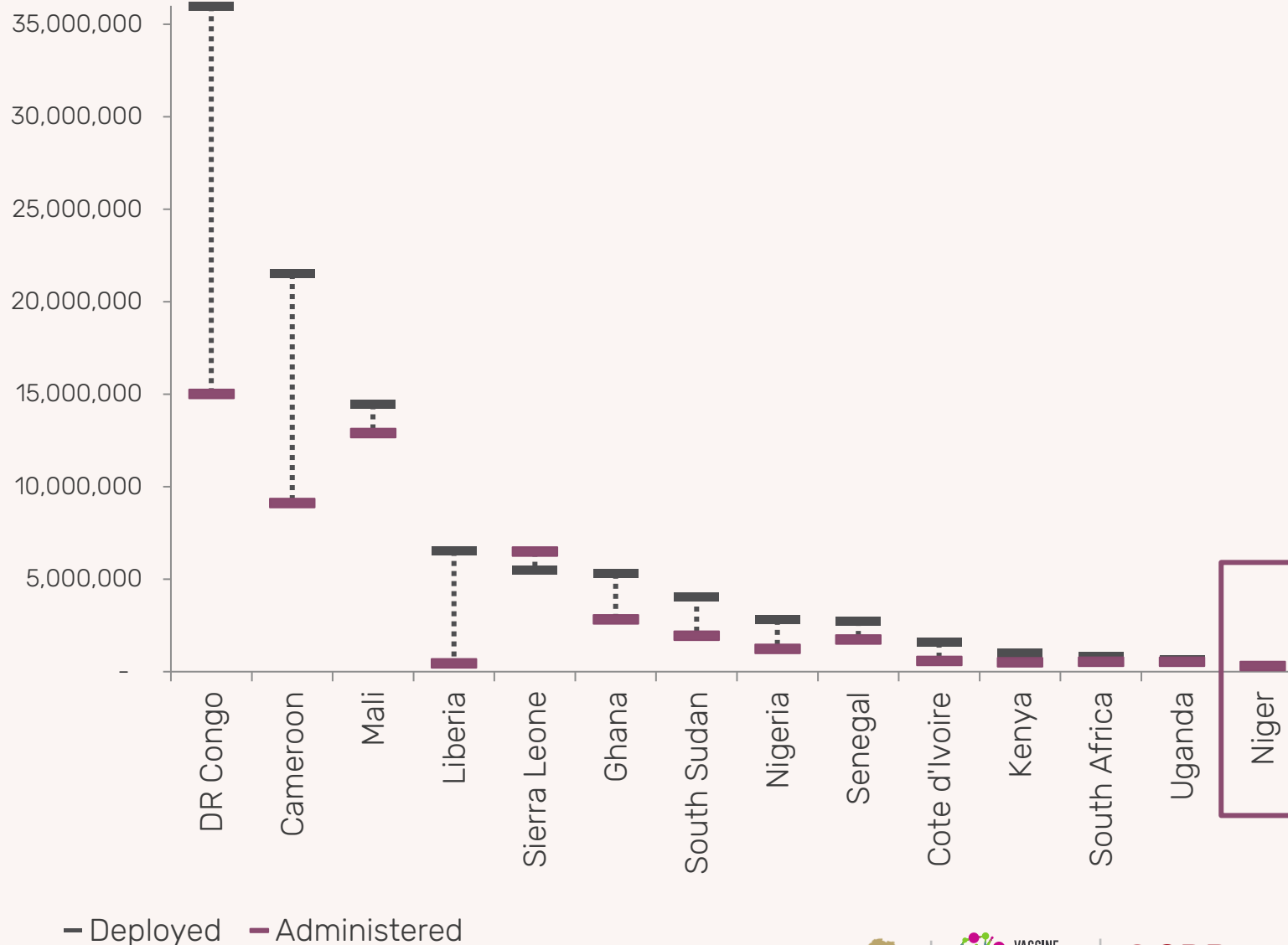
61% Of delivered vaccines in Jan-22 have been administered

0.31m Vaccines delivered to Niger

0.29m Vaccines administered in Niger

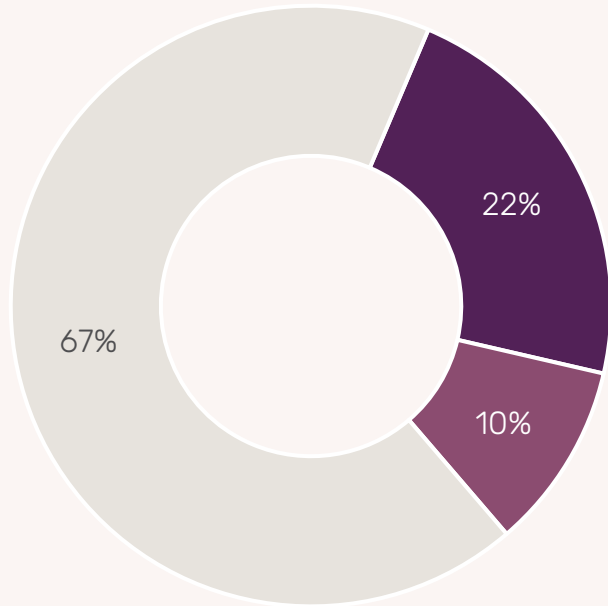
Based on Africa CDC data provided to ORB International

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



THE VACCINATED

33% of participants in Niger have received either one or two doses of the COVID-19 vaccine.



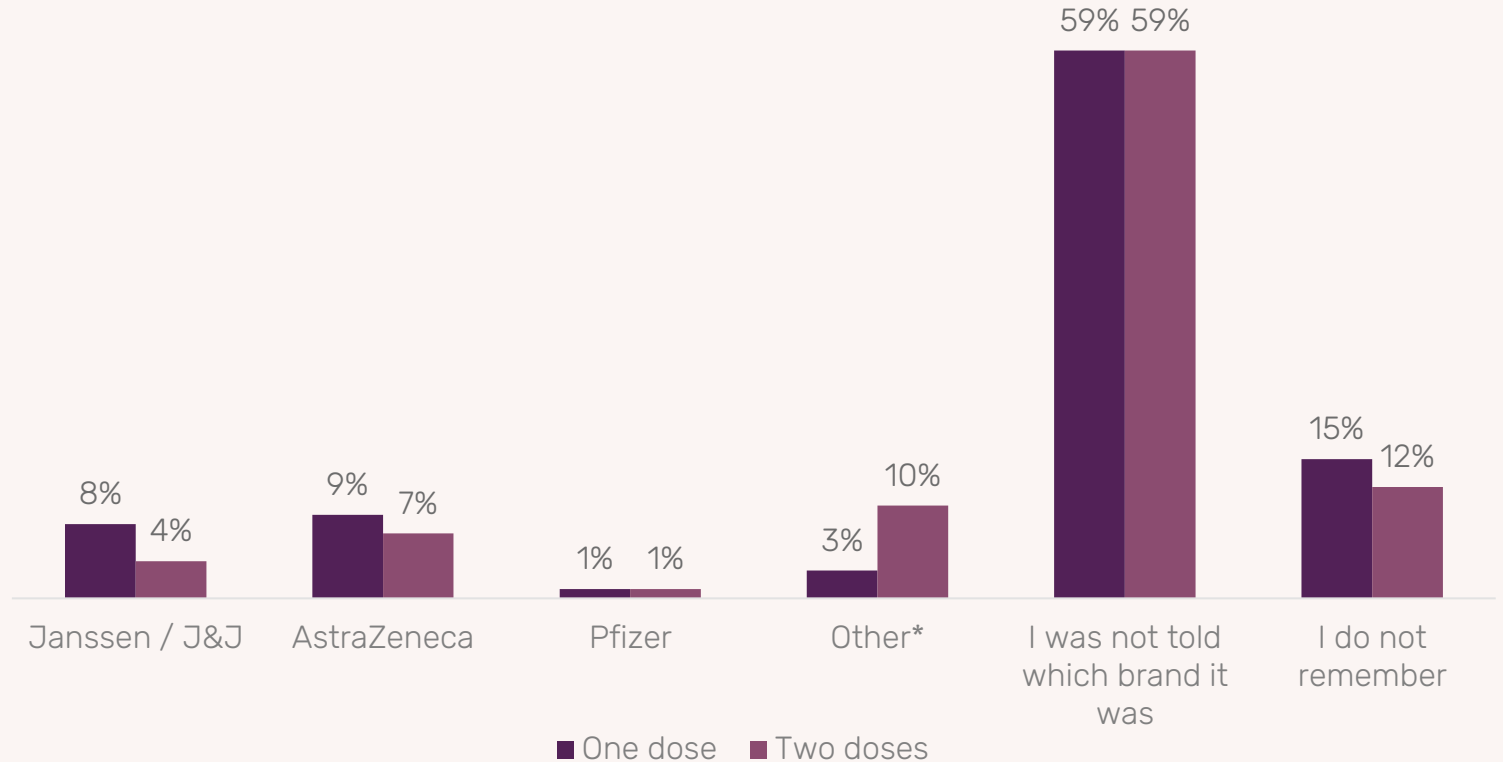
■ One dose ■ Two doses □ Unvaccinated

All interviews: n= 1,219

9% of those with two doses received a Sinopharm vaccine, whilst 9% with one dose received an AstraZeneca.

60% of participants were not told which brand they received for either doses – the highest across the whole dataset (33% in Mali and Cameroon).

COVID-19 VACCINES ADMINISTERED: BY BRAND



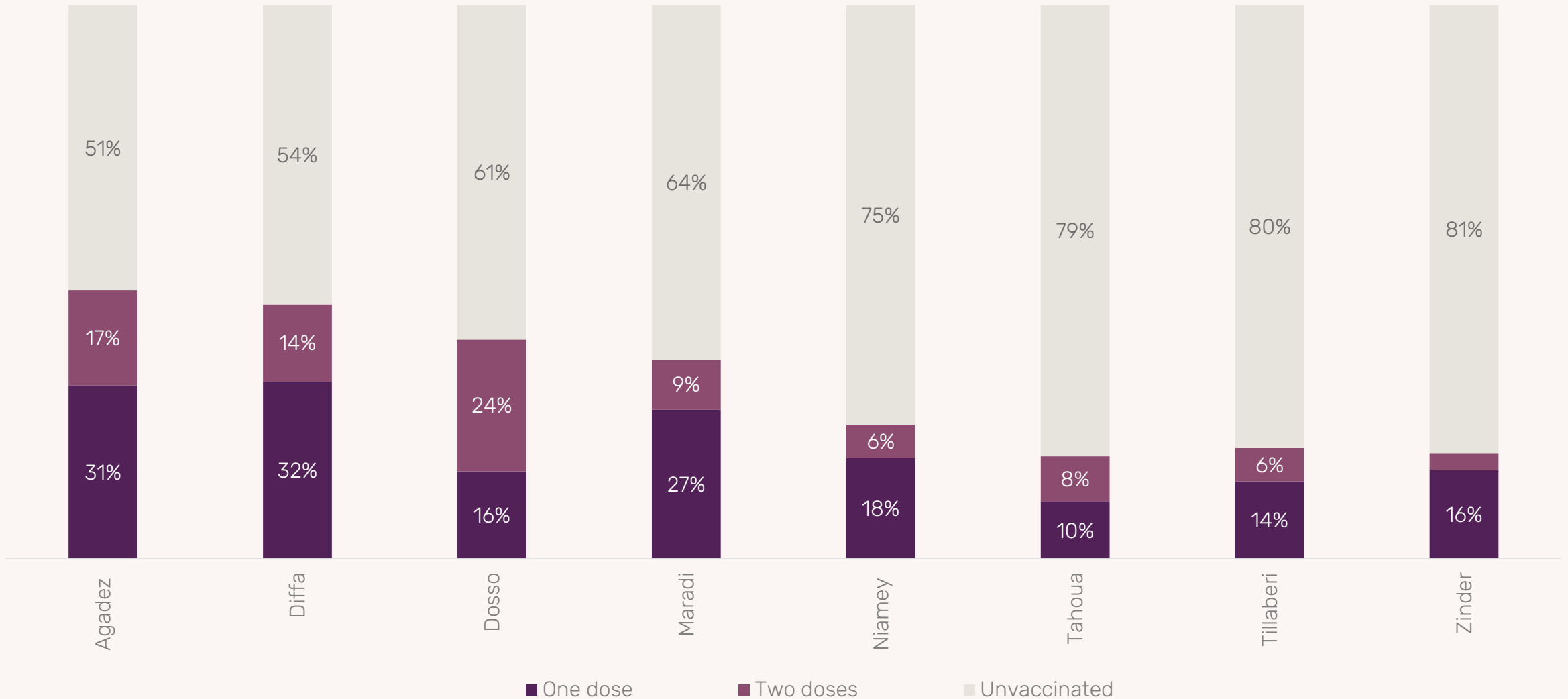
■ One dose ■ Two doses

All vaccinated: n=399

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

THE VACCINATED

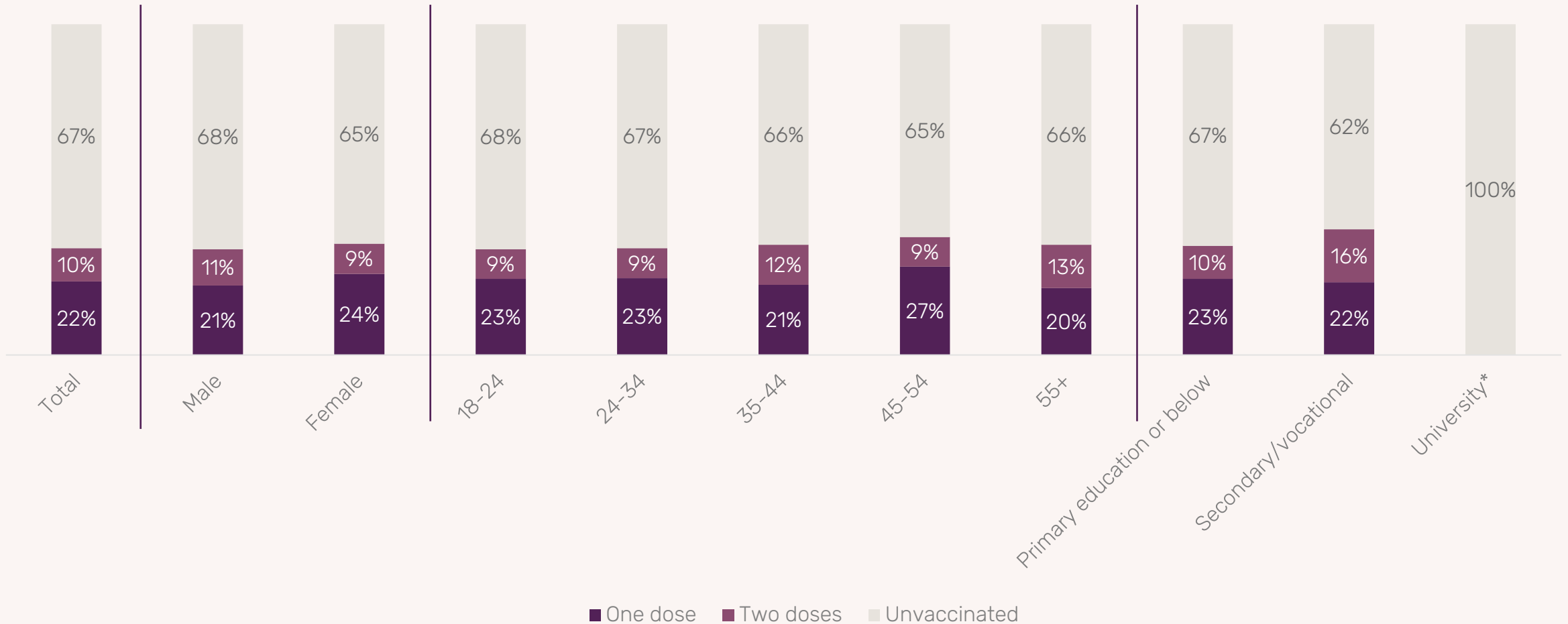
COVID-19 VACCINES ADMINISTERED: NIGER



THE VACCINATED

COVID-19 VACCINES ADMINISTERED: NIGER

A demographic breakdown of those who have received vaccines shows little difference between men and women. Those with secondary education are the most likely to have either received one or two doses, while those with university education are the most unlikely group to have had received either dose of the vaccine.



DEMAND FOR COVID-19 VACCINES: THE UNVACCINATED

Within the unvaccinated populations in Niger, 70% would either definitely take a COVID-19 vaccine or are unsure leaning towards yes – leaving 25% who are likely to refuse a vaccine.

NET REFUSAL HIGHER AMONGST...

49% Those who are hesitant across the VCI Index (safety, effectiveness and importance)

46% Those with University Education

45% Retired population

44% Students

42% Those living in urban settings

COVID-19 VACCINE ACCEPTANCE: TO PROTECT MYSELF



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



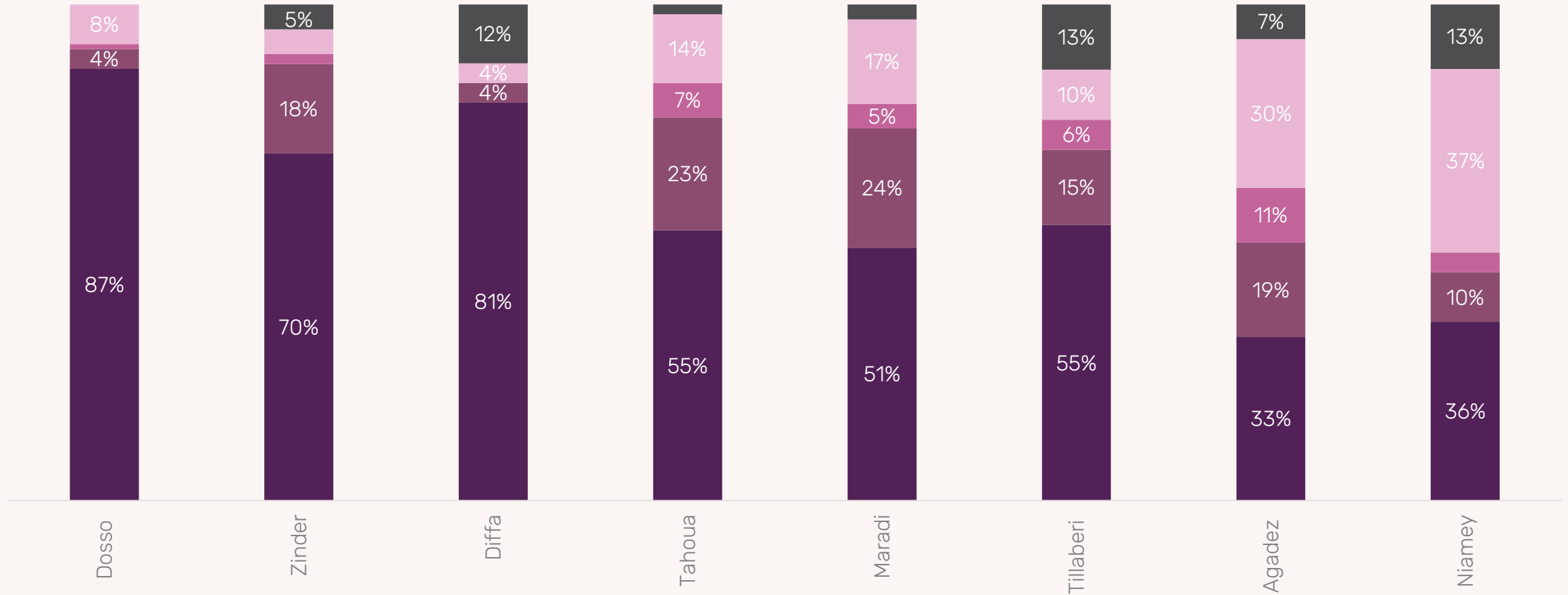
COVID-19 VACCINE ACCEPTANCE: FOR CHILDREN IN PARTICIPANTS CARE*



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

DEMAND FOR COVID-19 VACCINES: THE UNVACCINATED

COVID-19 VACCINE ACCEPTANCE: TO PROTECT YOURSELF - NIGER*



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

DEMAND FOR DIFFERENT COVID-19 VACCINE BRANDS

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

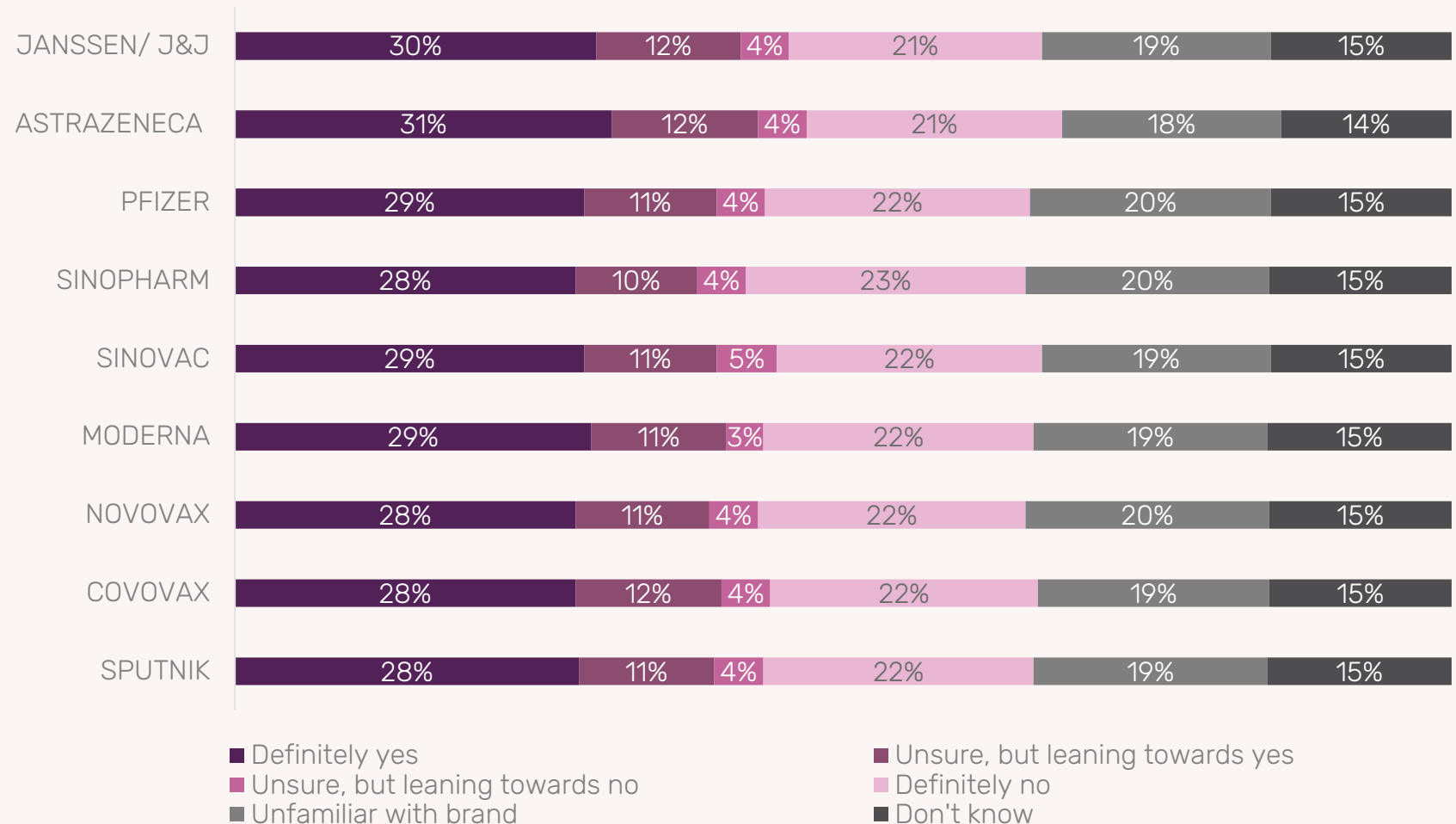
88% Agree it is **important** that the vaccine must be **safe** and **effective** against COVID-19

87% Agree it is **important** that the vaccine is **convenient** to take

86% Agree it is **important** that the brand is recommended by a **trusted healthcare practitioner**

84% Agree it is **important** it must be a brand with a **good reputation**

COVID-19 VACCINE ACCEPTANCE: BY BRAND



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...

Of the unvaccinated and COVID-19 vaccine hesitant population – **9%** cited that nothing would make them more likely to take a COVID-19 vaccine.

31%

If the vaccine was proven to be safe

Highest amongst those **unemployed** and **stay at home parent**

14%

To protect me if I get ill from COVID-19

Highest amongst **those with university education** and **those working**.

13%

If the government made a vaccine mandatory

Highest amongst **students** and the **healthcare workers**.

11%

If it was recommended to me by a religious or community leader

Highest amongst **disabled population** and **stay at home parent**.

25%

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

Highest amongst **healthcare workers**, those who **believe the threat from COVID-19 is generally underestimated**.

18%

I do not feel at risk of catching the virus

Highest amongst **those who have seen some COVID-19 related disinformation**, and score **"hesitant"** on the VCI Index.

17%

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

Highest amongst **those with university education** and **those who are unemployed**.

12%

I do not believe the virus exists.

Highest amongst **those who are retired** and **those who believe that the threat from COVID-19 is generally exaggerated**.

PERCEIVED THREAT OF COVID-19

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

98% Lack of access to food

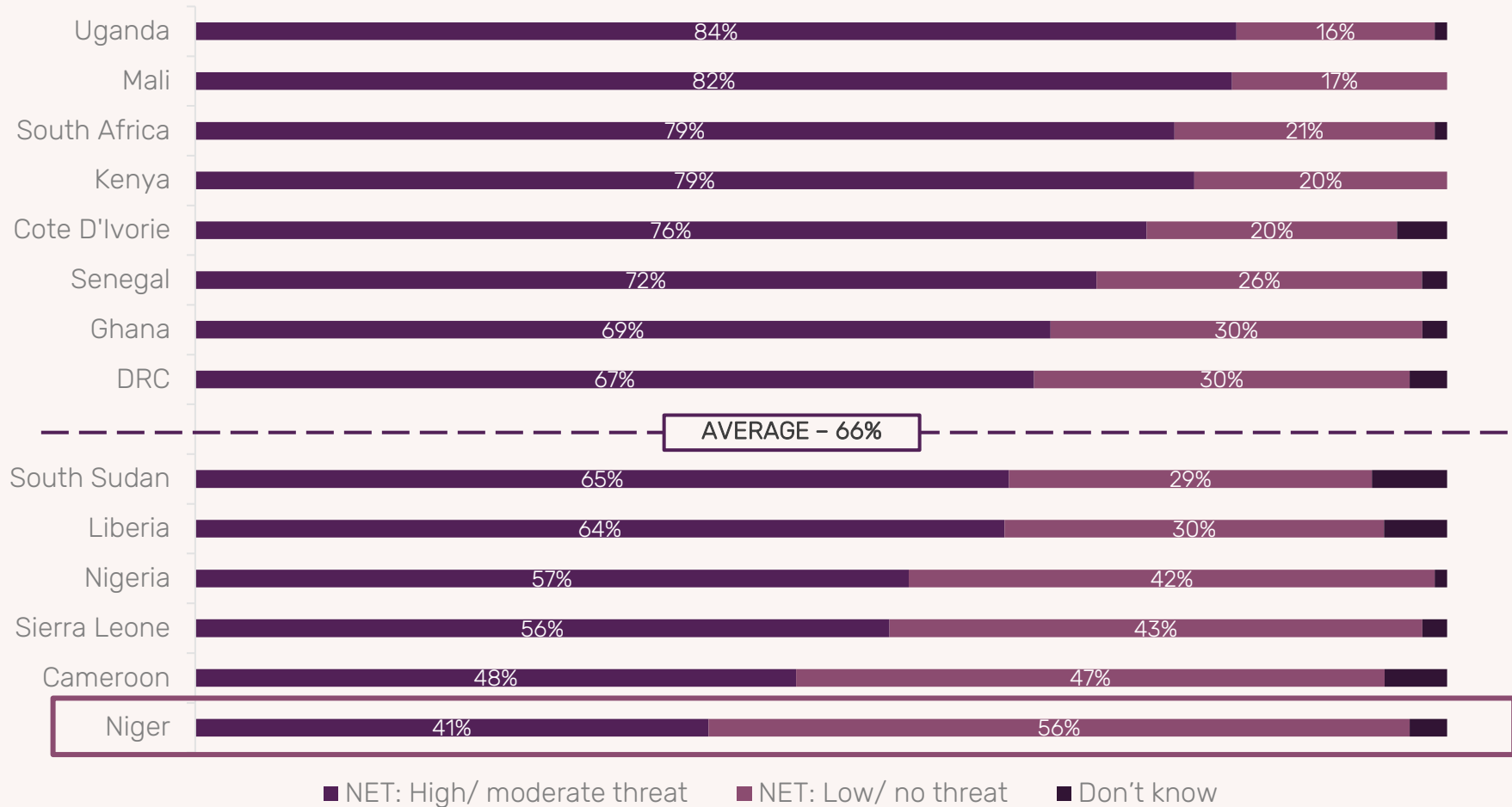
97% Malaria

84% Lack of access to clean water

45% Tuberculosis

41% COVID-19

PERSONAL THREAT FROM COVID-19: BY COUNTRIES SURVEYED



All interviews: n= 1,190

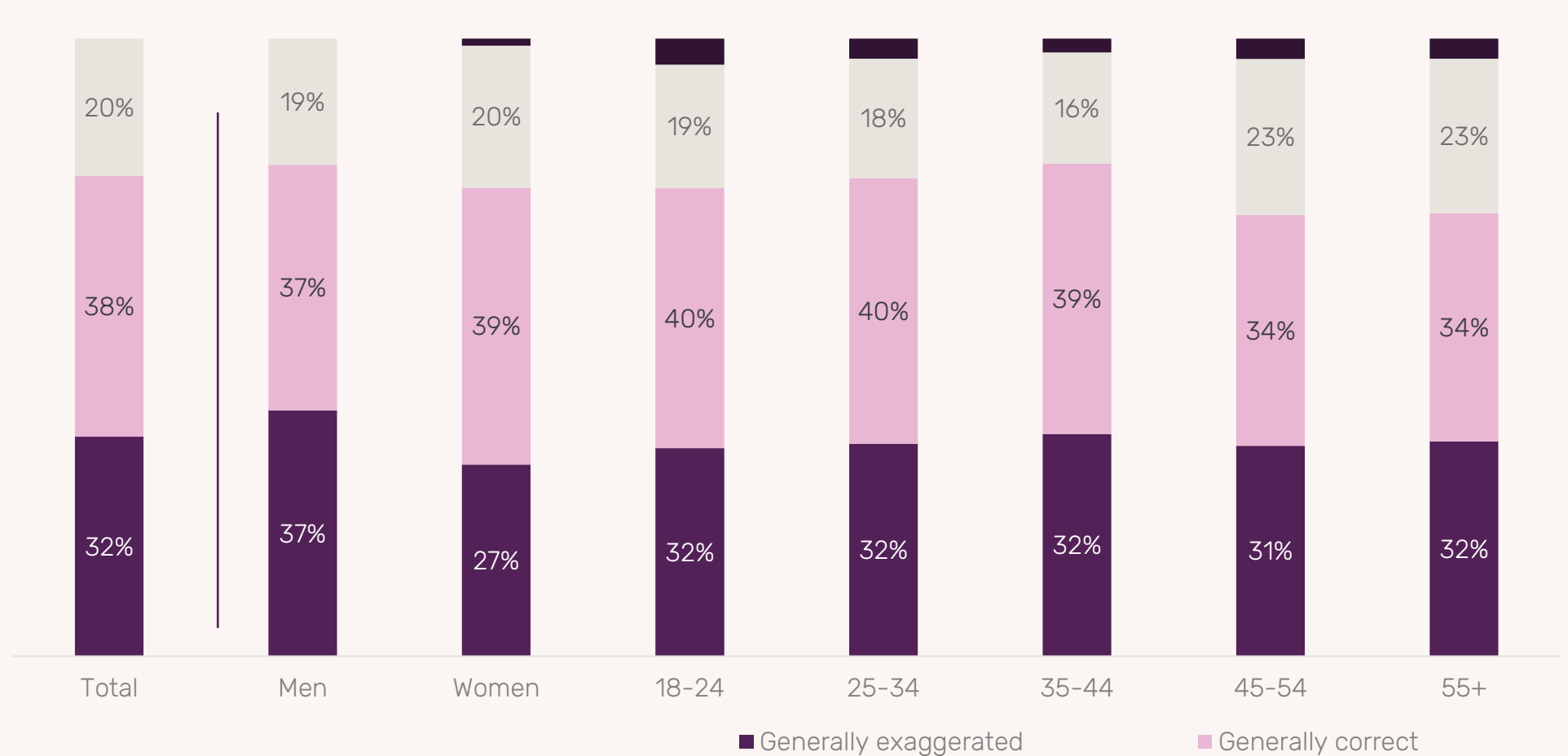
All interviews: n= 13,914

PERCEPTIONS OF THE EXAGGERATION OF COVID-19

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

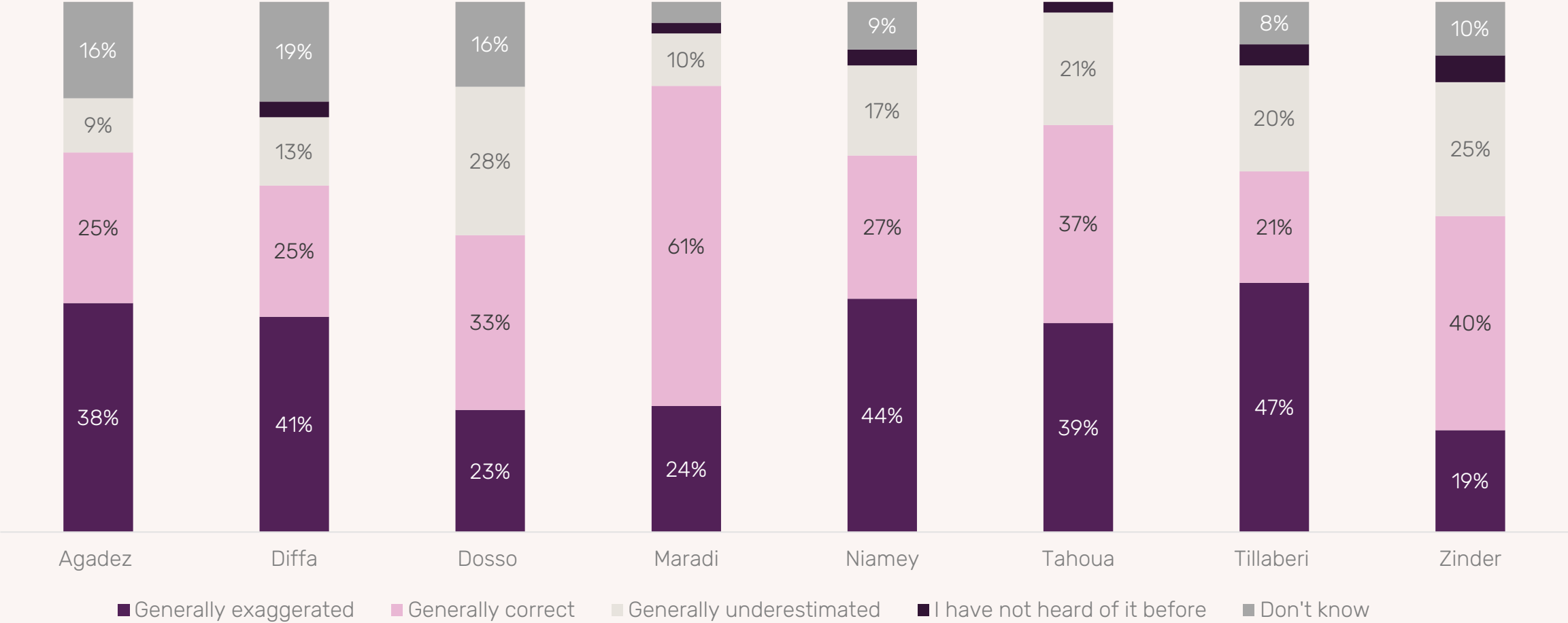
Survey data shows there is some variation in demographics amongst those who feel the threat from COVID-19 is exaggerated, it is higher amongst:

- Men aged under 35
- Those living in urban settings
- Healthcare workers
- Those who believe vaccines are not safe
- Those who are unemployed



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

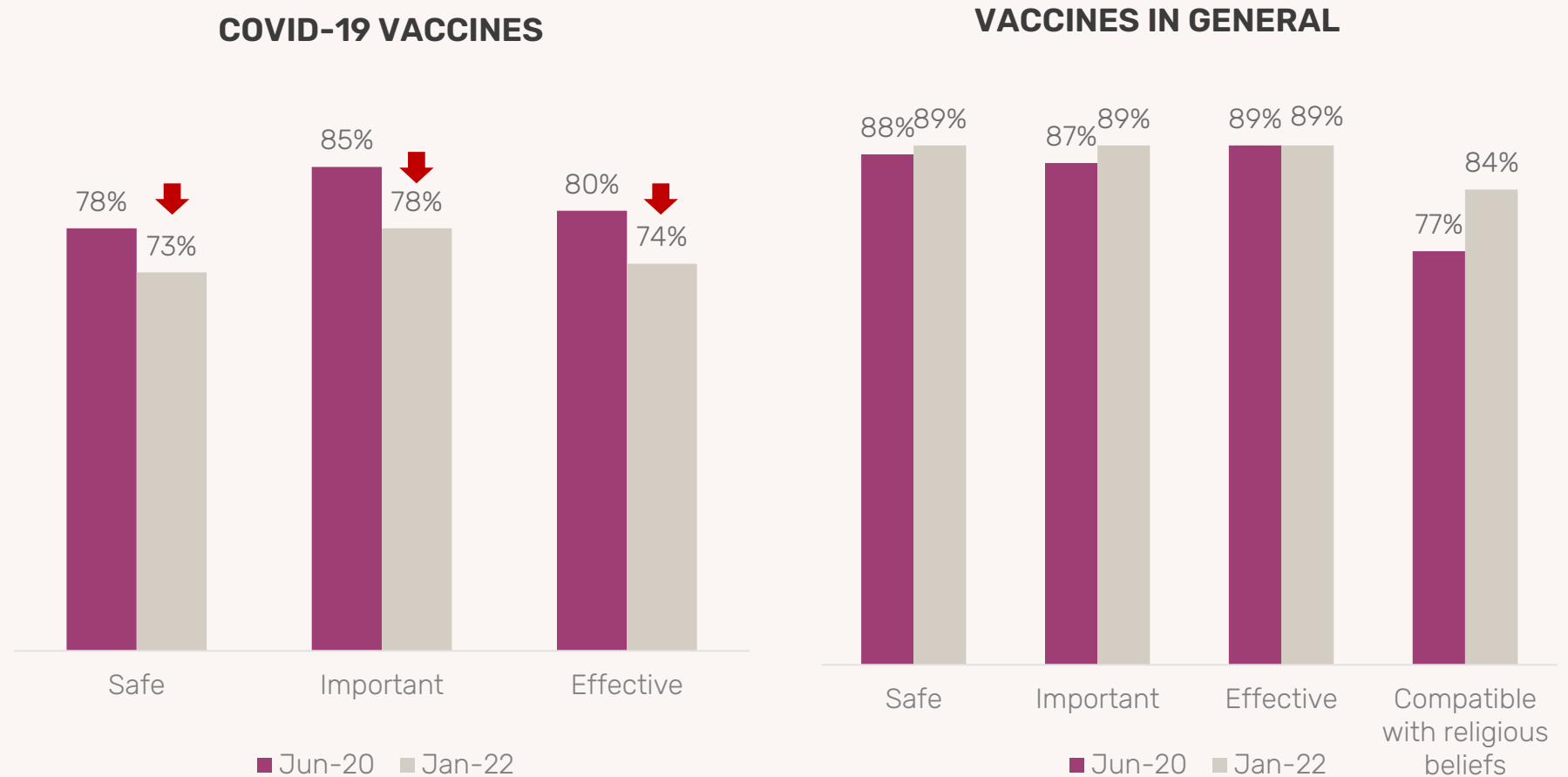


VCI INDEX: OVERALL

There has been a general decrease across the VCI Index in 2 years regarding the belief in the safety, effectiveness and importance of COVID-19 vaccines and vaccines in general. A greater percentage of participants agreed that **vaccines in general** are safe and effective, compared to COVID-19 vaccines specifically.

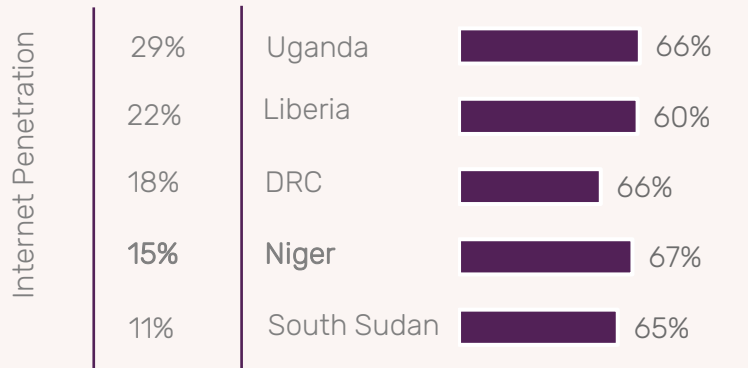
Those who are less likely to agree with statements in the index are...

- Younger generations, particularly men **under 35**
- Those in **urban** settings
- **Students** and those who are **unemployed**
- Those who are **hesitant across the VCI Index** (safety, effectiveness and importance)



MIS/DISINFORMATION

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



When comparing to countries with similar internet penetration, people report similar exposure to disinformation.

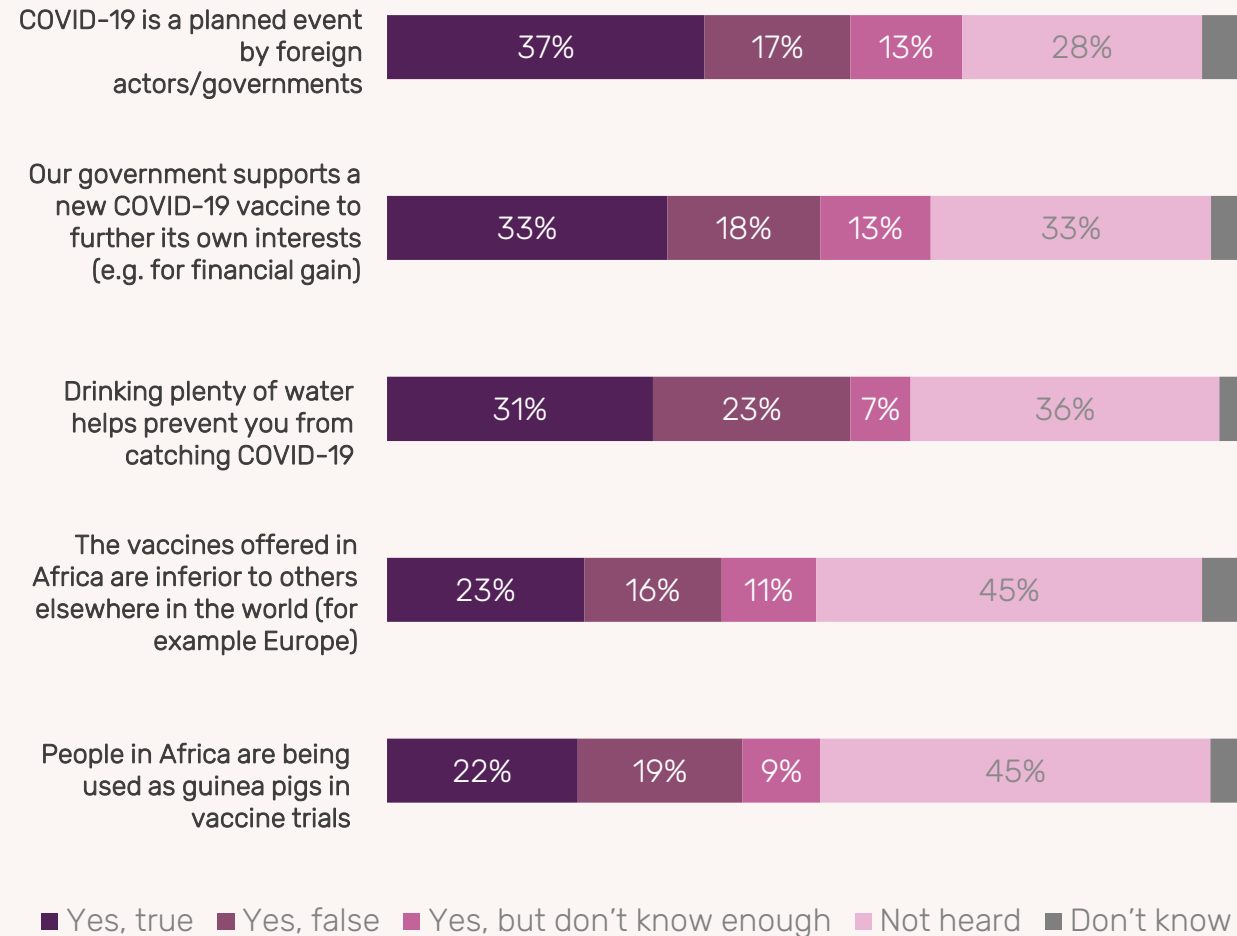
SOURCES OF MIS/DISINFORMATION

- 45% Radio
- 41% Family or friends
- 23% Television
- 20% Social media
- 10% Internet



79% of respondents cited that they trust their family or friends for reassurance about the COVID-19 vaccine. Most trusted sources are the World Health Organization (WHO) and the government.

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



■ Yes, true ■ Yes, false ■ Yes, but don't know enough ■ Not heard ■ Don't know