AFRICA CDC WORKING GROUP
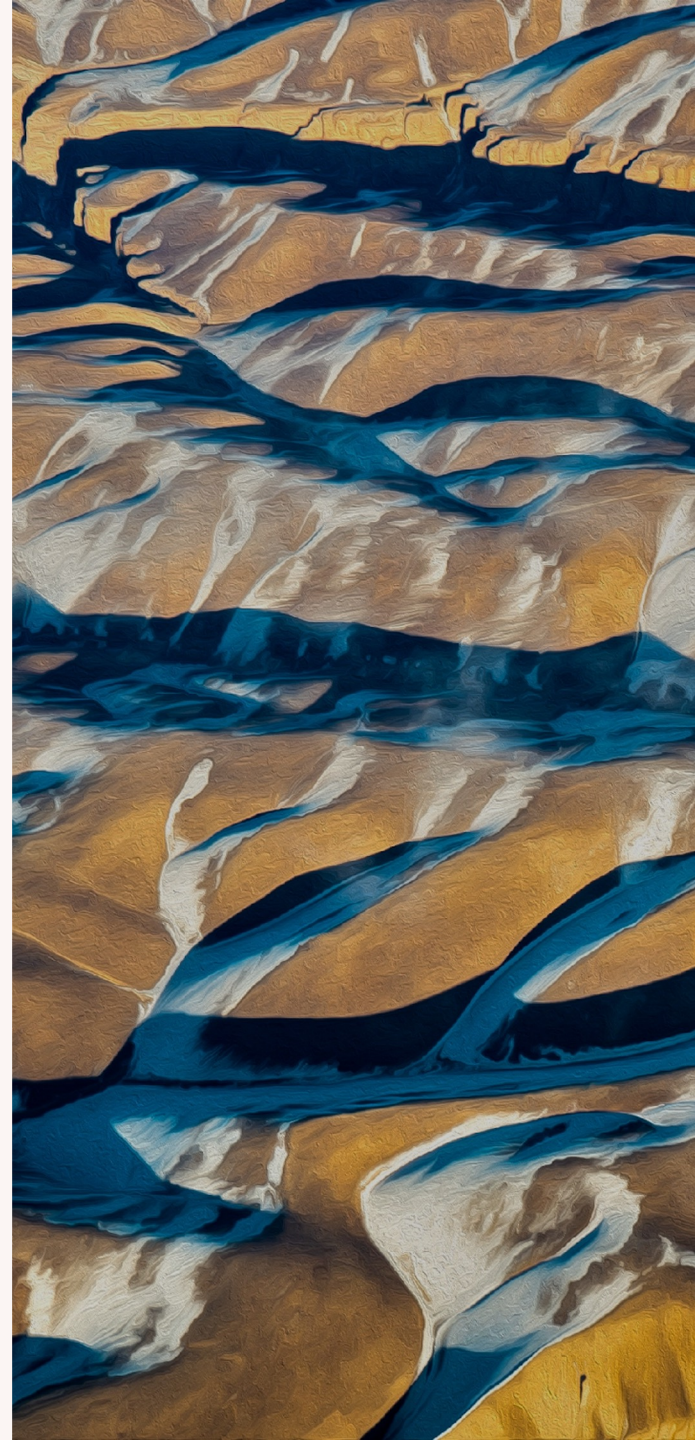## ALL COUNTRY REPORT

CONTENTS

INTRODUCTION
- Research design
- Vaccines deployed vs administered

INTERIM FINDINGS
- The vaccinated
- The unvaccinated
- Vaccinating children
- VCI Index and other vaccines
- Threat from COVID-19
- Trust
- Mis/disinformation

RESEARCH DESIGN

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METHODOLOGY

1k — N=7,179 interviews; nationally representative sample in each country

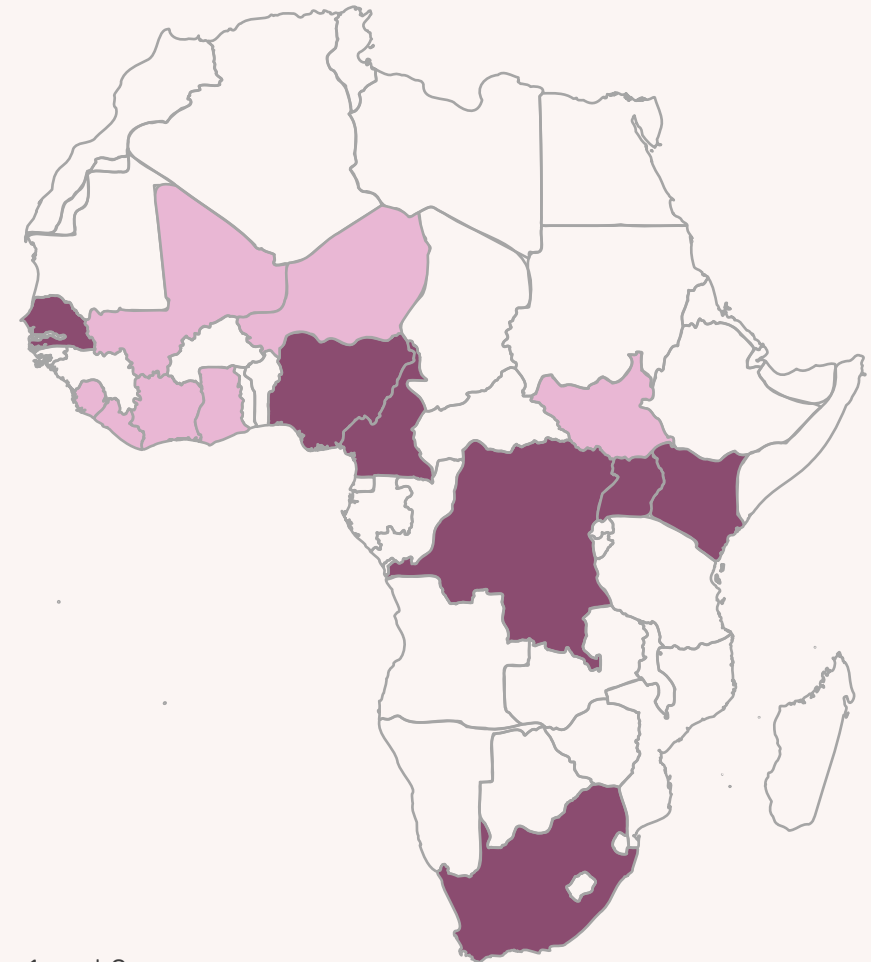**QC** — Quality control checked by in-country research teams and centrally in London, UK

¼ — Quarterly fieldwork planned for 2022

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

WAVE 2 PRIMARY SAMPLING POINTS:

COUNTRIES SURVEYED:

■ Wave 1 and 2
■ Wave 1 only

Reporting note:

Due to the changing country selection throughout this research, on certain slides in the following report there will be a reference to 'Core Countries' these are countries that were included the baseline wave in June 20 through Wave 1 and Wave 2 in Jan-22 and Aug-22. These are: South Africa, Kenya, Uganda, Nigeria, DR Congo and Senegal.

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COVID-19 VACCINES DEPLOYED VS ADMINISTERED (AUGUST 2022)

Deployed — Administered
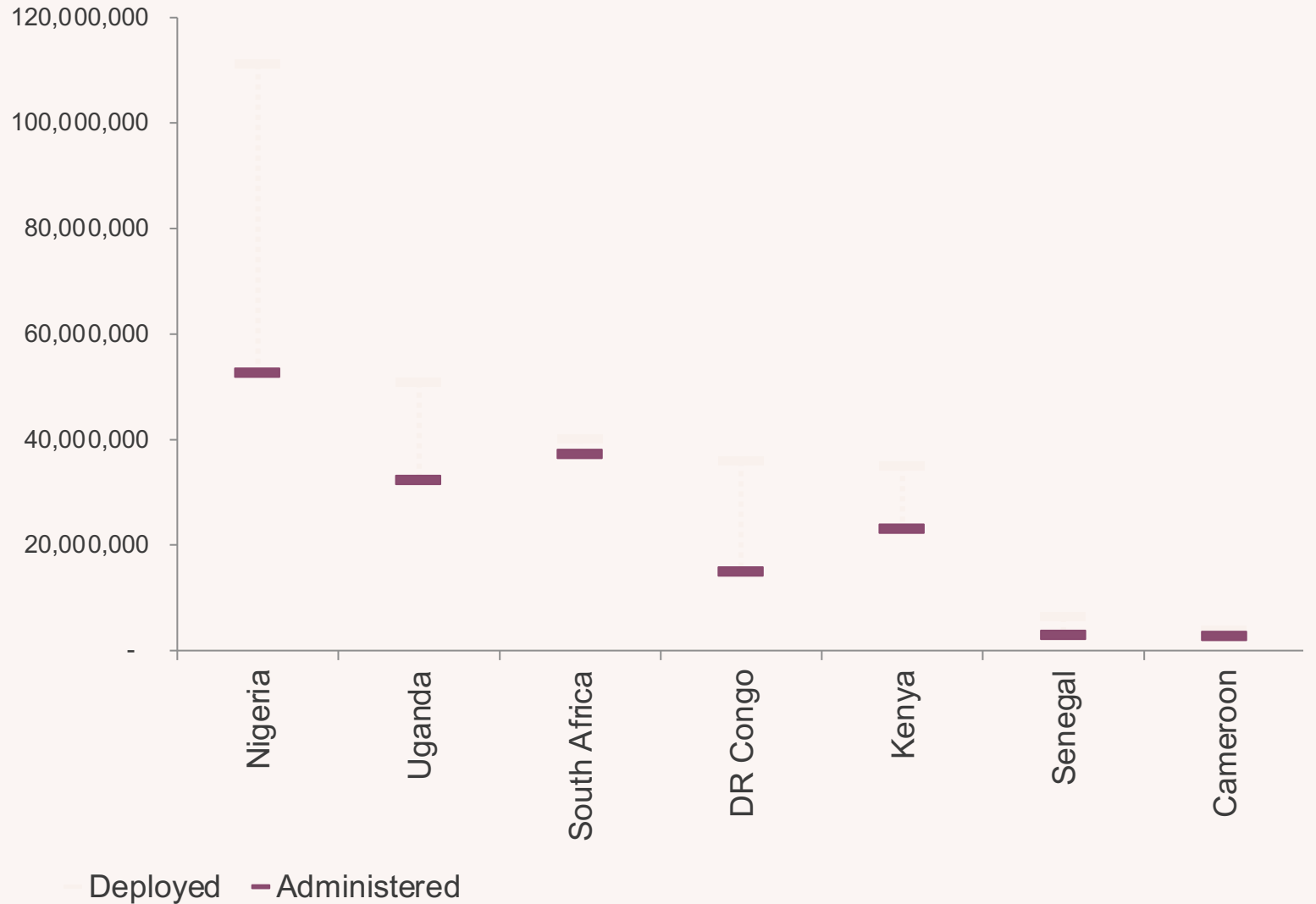
DEMOGRAPHICS

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DEMOGRAPHICS

GENDER:

- Male
- Female

51% / 49%

EDUCATION:

Primary or below	Secondary education	University/Tertiary education	Vocational post-secondary education	Masters/PhD
25%	43%	20%	10%	1%

AGE GROUP:

18-24	25-34	35-44	45-54	55+
29%	33%	19%	11%	8%
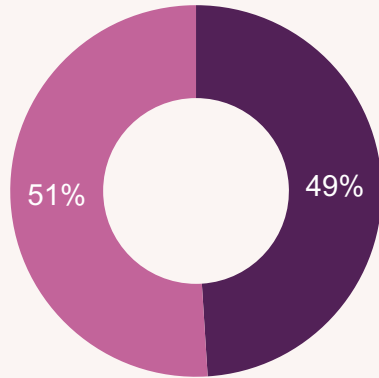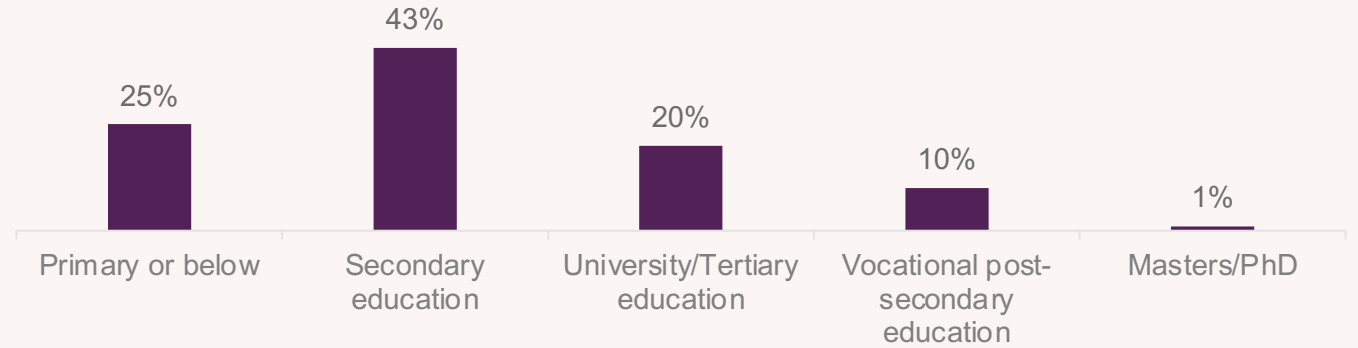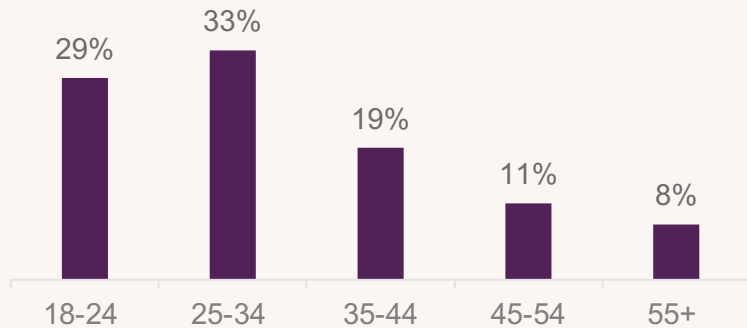
LOCALITY:

- Urban
- Rural

45% / 55%
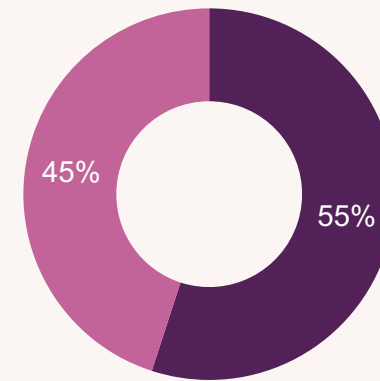
All interviews: n= 7,179

DEMOGRAPHICS

64% Have children in the household under 18

12% Healthcare workers

EMPLOYMENT STATUS:

Working	Unemployed	Student	Stay-at-home parent	Retired
48%	21%	13%	10%	2%

RELIGION:

Christian	Muslim	Catholic	Protestant	Anglican	Pentecostal	Roman Catholic
29%	27%	16%	5%	4%	3%	2%
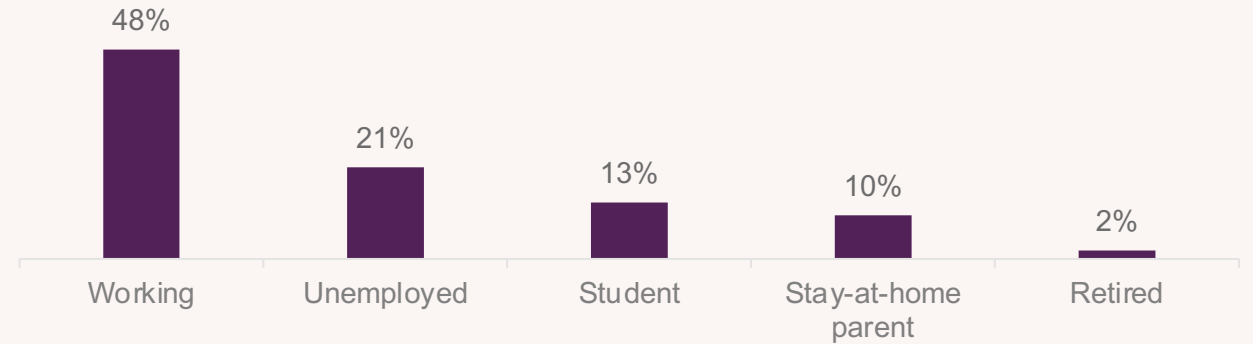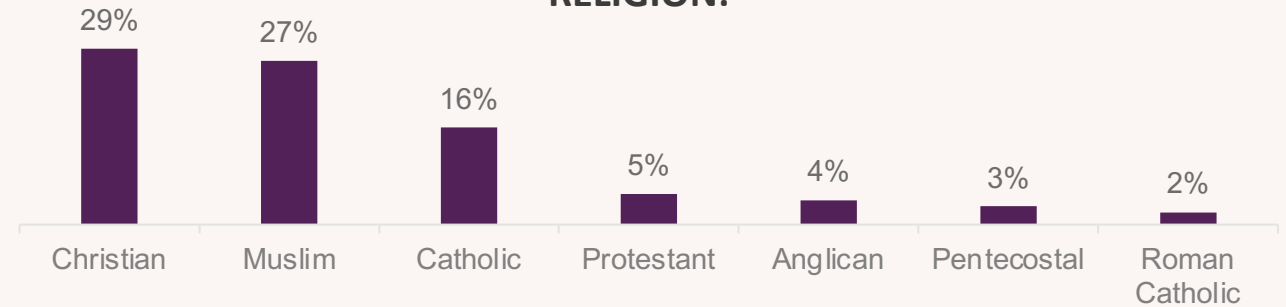
All interviews: n= 7,179

THE VACCINATED

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THE VACCINATED

Data collected in August-22 across the 7 countries in Africa shows that 22% of the total populations have now had one dose of the vaccine, with a further 20% having a second dose.

Looking specifically at the Core Countries (those that are consistent across baseline to wave 2 – see report note in introduction); there has been a significant increase in the number of participants who report having received two doses of the COVID-19 vaccine. The unvaccinated population has dropped from 59% to 50%.

Uganda leads the way with the highest proportion of the population vaccinated – 86%. Followed by South Africa at 70% and Kenya at 58%. DRC and Cameroon are at the bottom of the chart however data from Jan-22 to Aug-22 in DRC shows significant differences in the number of those with at least one dose.

COVID-19 VACCINES ADMINISTERED:
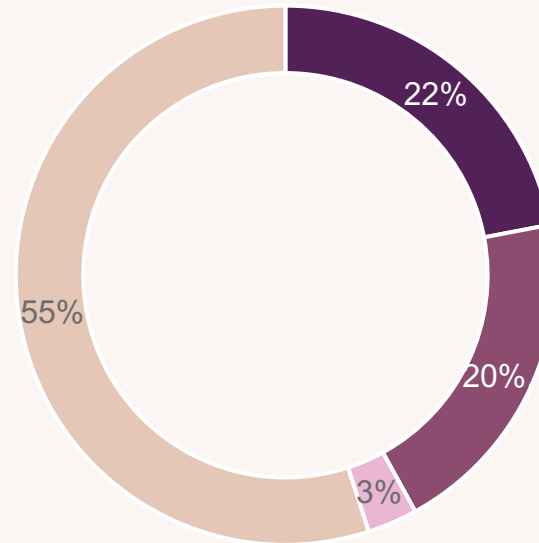
- One dose
- Two doses
- Additional/booster dose
- Unvaccinated

COVID-19 VACCINES ADMINISTERED BY CORE COUNTRIES:

One dose: 22% / 23%
Two doses: 19% / 23%
Additional/booster dose: 3%
Unvaccinated: 59% / 50%

Jan-22   Aug-22
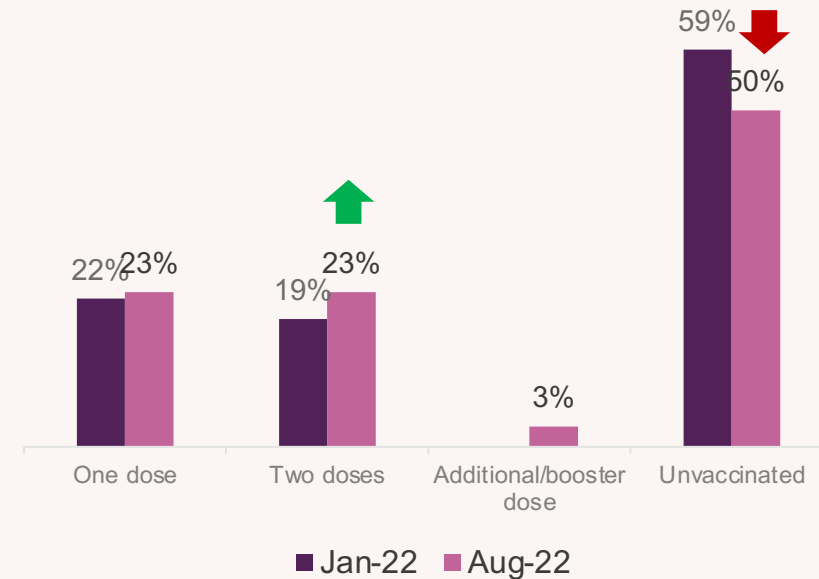
All interviews: n= 7,179

THE VACCINATED

Whilst there does not appear to be any difference by age for those who have been vaccinated and those who have not – there are clear differences in age.

Men and women aged over 35 are significantly more likely to be vaccinated – especially for having more than one dose.

Almost two thirds (63%) of those over 55 have had at least one dose compared to 34% of those aged 18-24.

There is also a clear geographic divide with just over half (52%) of those living in rural areas being vaccinated compared to 40% of those in urban settings. That said it is important to note that younger populations are higher in urban areas in this dataset.

NET COVID-19 VACCINE ACCEPTANCE:

	Unvaccinated	One or more dose
Men over 35	45%	55%
Women over 35	45%	55%
Men under 35	59%	41%
Women under 35	62%	38%

■ Unvaccinated ■ One or more dose

All interviews: n= 7,179

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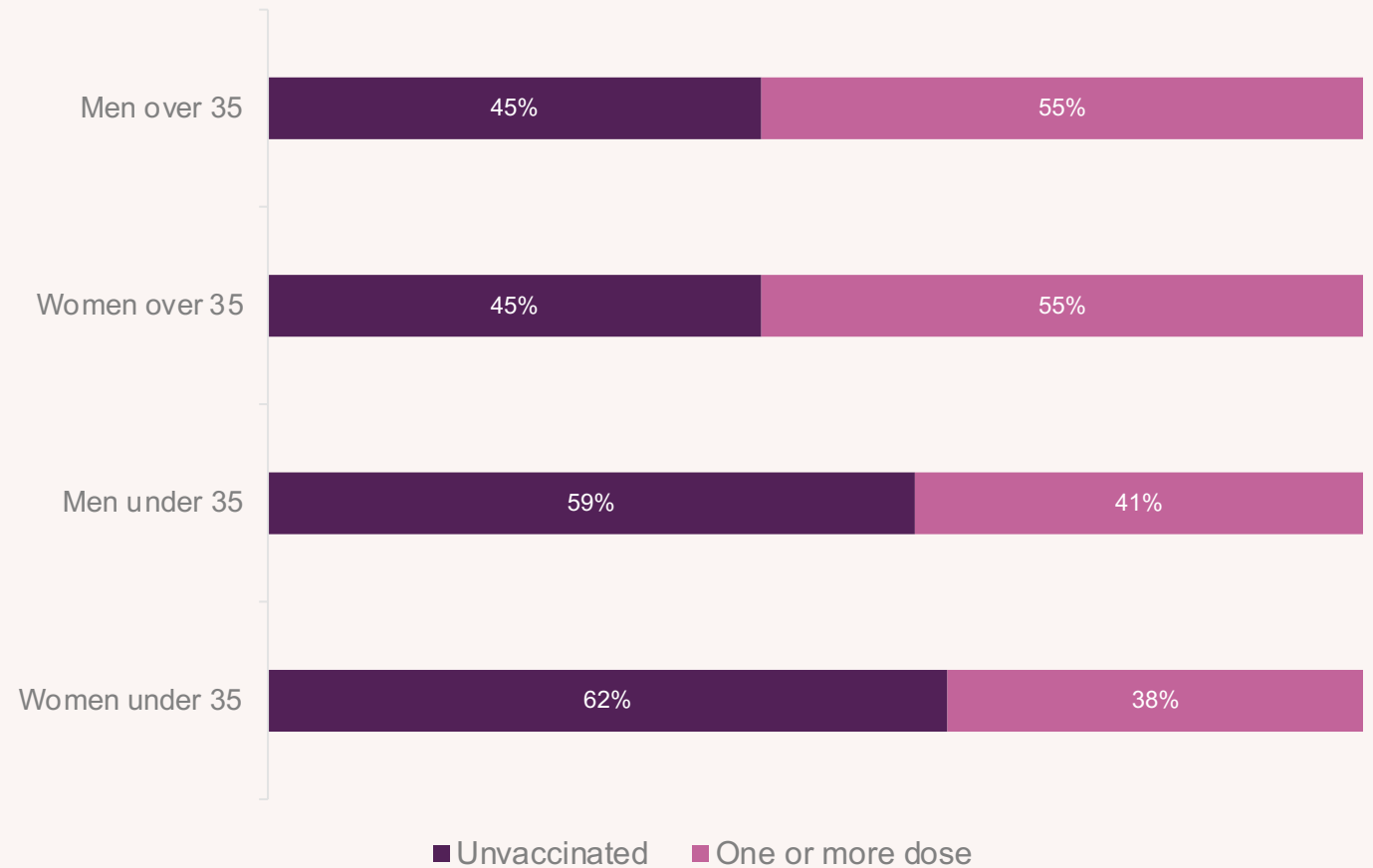
THE VACCINATED

NET COVID-19 VACCINE ACCEPTANCE: REGION

Country	One or more dose	Unvaccinated
Uganda	86%	14%
South Africa	70%	30%
Kenya	58%	42%
Senegal	34%	66%
Nigeria	27%	73%
DRC	20%	80%
Cameroon	18%	82%

■ One or more dose ■ Unvaccinated

All interviews: n= 7,179

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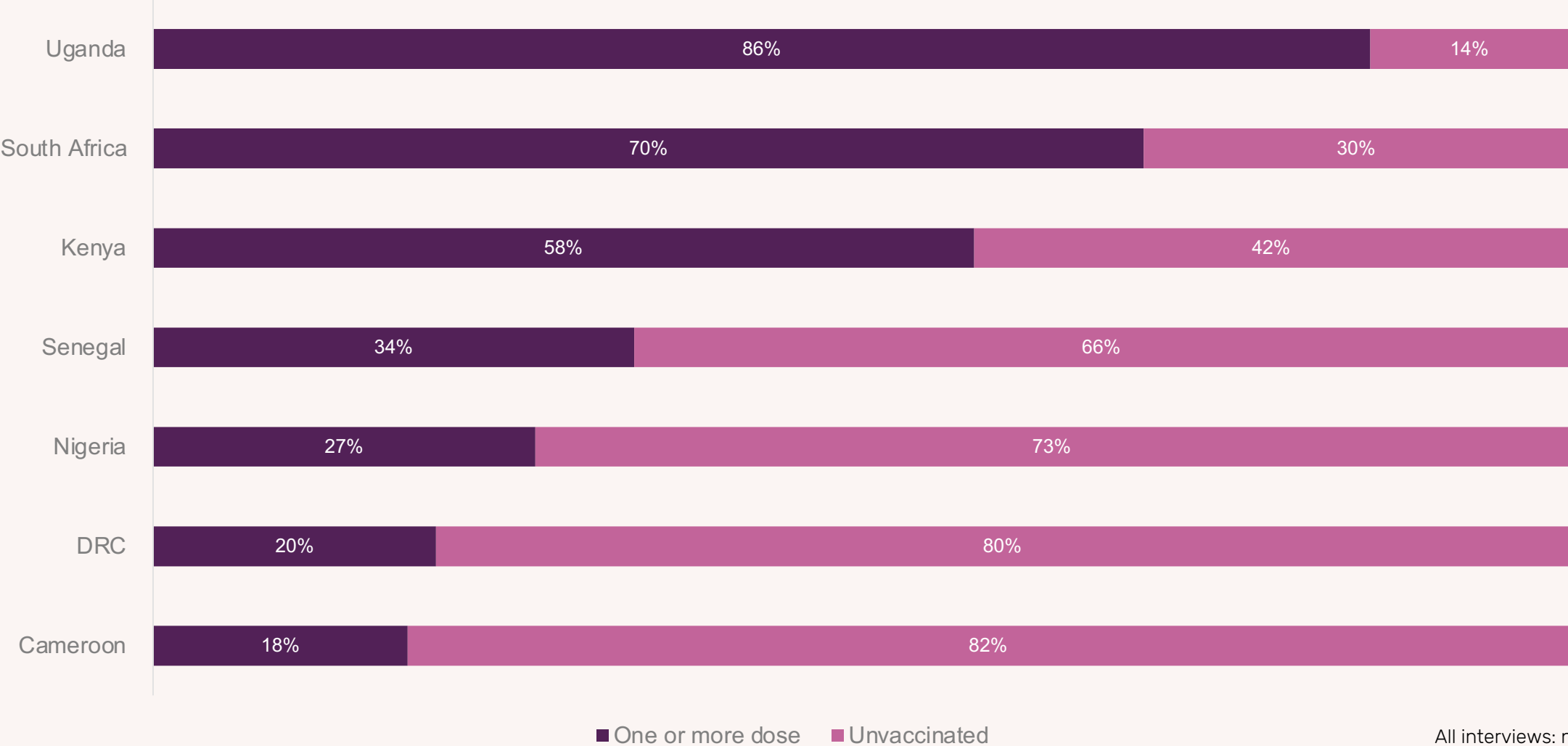
THE VACCINATED

The J&J/Janssen brand of COVID-19 vaccine is the most popular vaccine for participants first dose (consistent with Jan-22).

AstraZeneca edges Pfizer as the most popular second dose.

Around 1 in 5 do not remember which brand they took and a roughly 1 in 10 were not told.

There does not appear to be any significant demographic differences between brand of vaccine.

COVID-19 VACCINES ADMINISTERED: BY BRAND

Legend: ■ First dose ■ Second dose ■ Additional/booster dose

Brand	First dose	Second dose	Additional/booster dose
Pfizer	11%	22%	23%
AstraZeneca	10%	27%	14%
Janssen / J&J	41%	12%	14%
Moderna	3%	7%	6%
Other	3%	4%	7%
I was not told which brand it was	12%	7%	12%
I do not remember	19%	18%	21%
Dont know/ Refused	1%	2%	2%
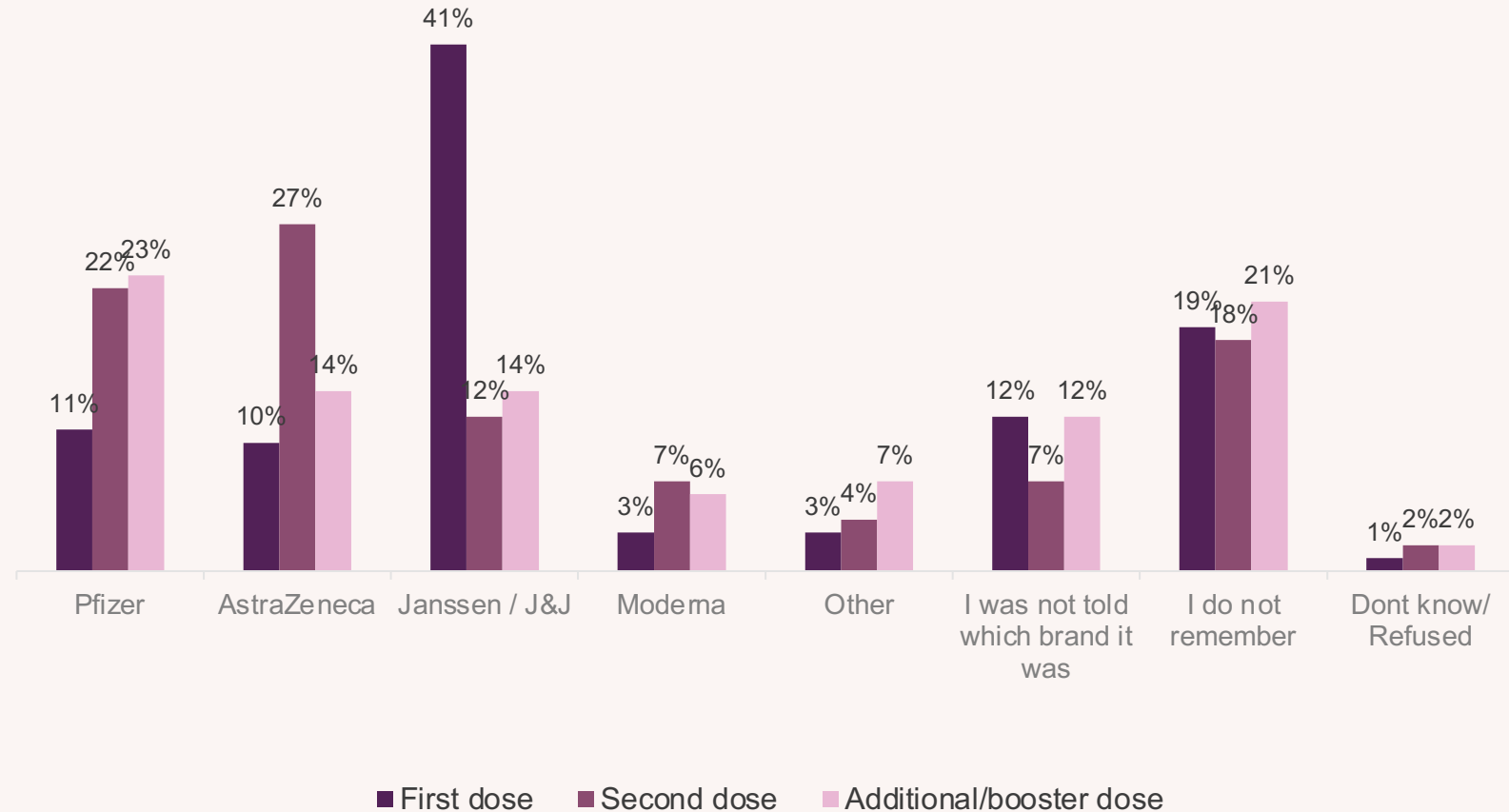
First dose: n= 1,569
Second dose: n= 1,451
Additional/booster dose: n= 215

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THE VACCINATED

TOP THREE REASONS FOR GETTING VACCINATED:
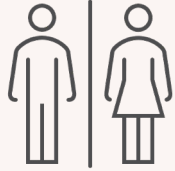
90% To protect myself

Highest amongst:

- Stay-at-home parents (95%)
- Non healthcare workers (90%)
- Those who are concerned about COVID-19 for themselves and for their family/friends (91%)

69% To protect family

Highest amongst:

- Those who are concerned about COVID-19 for themselves and for their family/friends (72%)

31% To gain access to spaces that require a COVID-19 vaccine

Highest amongst:

- University educated (38%)
- Students (35%)
- Workers (35%)

Those vaccinated: n=3,234

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THE VACCINATED

ATTITUDES TOWARDS BEING VACCINATED:

84%
Relieved about being vaccinated against COVID-19

63%
Doubts/reservations at the time of getting vaccinated

22%
Regret having been vaccinated

Over 8 in 10 of the total vaccinated population report being relieved about their decision to be vaccinated. This is generally consistent across demographics. It is when looking at doubts at the time of vaccination that there are clear differences: 7 in 10 of 18-24 year old's felt this compared to 5 in 10 aged 55+.

I am relieved since being vaccinated against COVID-19: 84%, 83%, 84%, 86%, 84%

I had doubts/reservations at the time of getting vaccinated against COVID-19: 70%, 63%, 61%, 60%, 53%

I regret being vaccinated against COVID-19: 19%, 23%, 24%, 22%, 21%

Legend: ■ 18-24 ■ 25-34 ■ 35-44 ■ 45-54 ■ 55+

Those vaccinated: n=3,234

AFRICA CDC — Centres for Disease Control and Prevention — Safeguarding Africa's Health | VACCINE CONFIDENCE PROJECT™ | ORB International
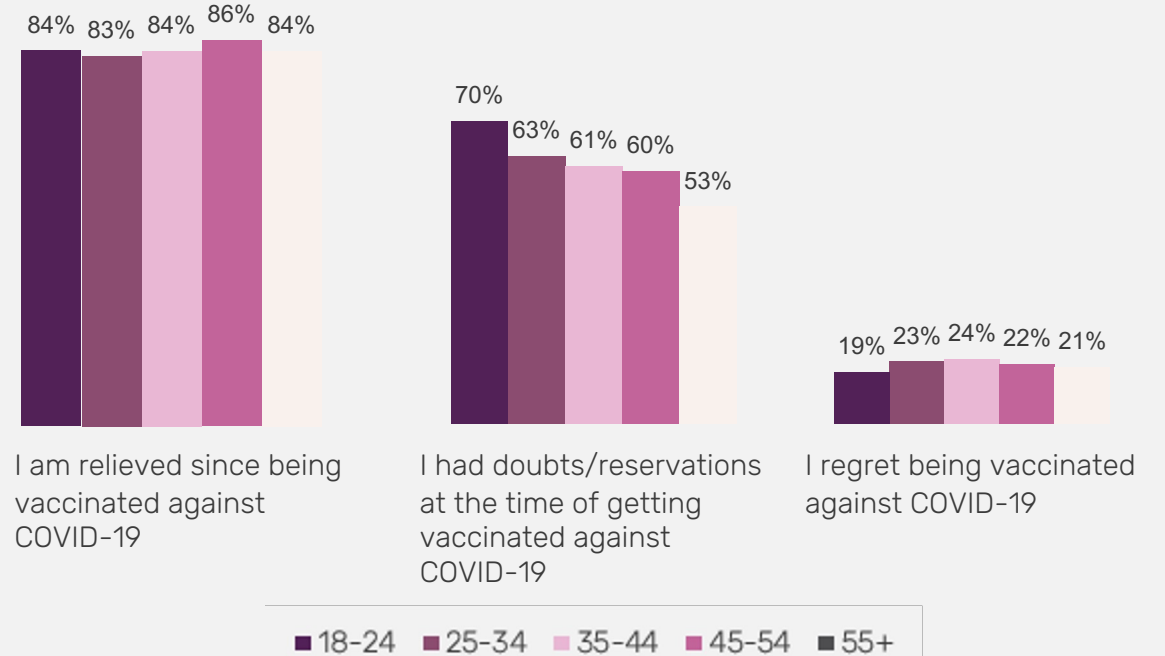
THE UNVACCINATED

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THE UNVACCINATED

Amongst the Core Countries there has been a significant drop in the number of unvaccinated respondents who would accept a COVID-19 vaccine to protect themselves.

The proportion of participants who said they would *definitely not* accept a vaccine in Jan-22 sat at 26% - in Aug-22 this increased to 36%. This shows that those yet to be vaccinated are strongly in their views against being vaccinated.

The fall in acceptance does not appear to be driven by any one demographic.

When those who are unvaccinated but are keen to be vaccinated are asked how soon they would accept one (if available) only 31% would do so 'as soon as it was available to them'. 20% would wait at least 6 months and 10% up to a year.

NET COVID-19 VACCINE ACCEPTANCE:
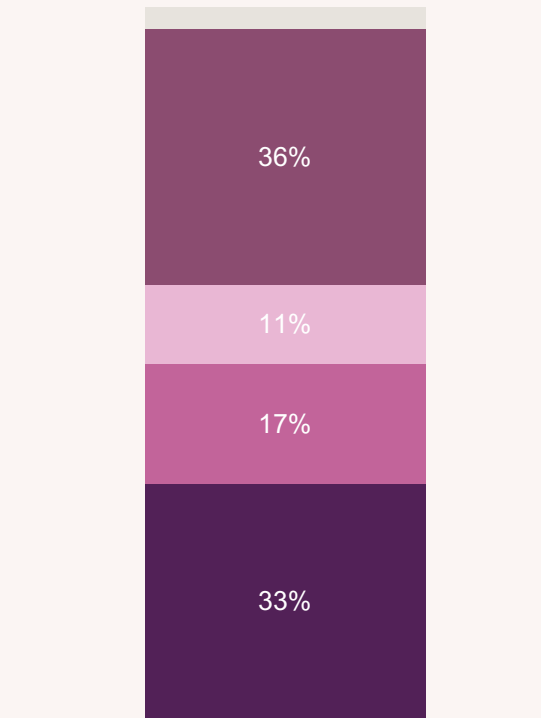
- Dont know/ Refused
- Definitely No
- Unsure but leaning towards no
- Unsure but leaning towards yes
- Definitely yes

Those unvaccinated: n=3,933

NET COVID-19 VACCINE ACCEPTANCE BY CORE COUNTRIES:
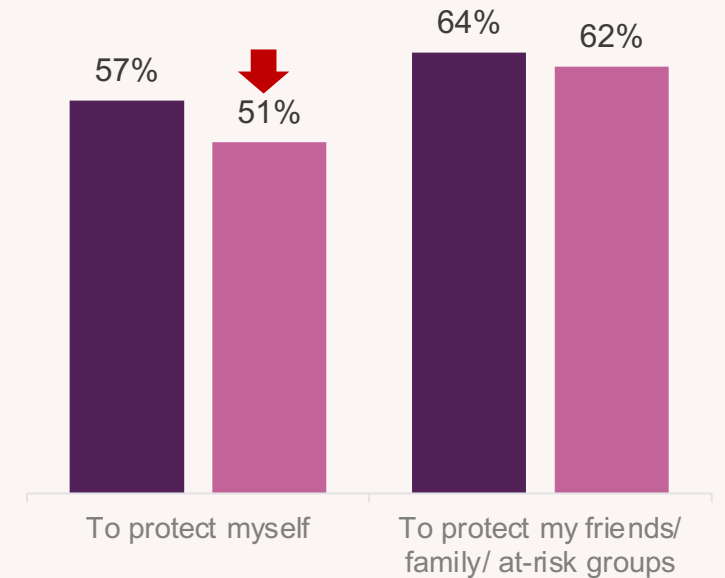
- Jan-22 - Aug-22

Those unvaccinated: W1 n=3,085; W2 n=3,124

THE UNVACCINATED

WOULD ACCEPT A COVID-19 VACCINE TO PROTECT THEMSELVES:

Country	Definitely yes	Unsure but leaning towards yes	Unsure but leaning towards no	Definitely No	Dont know/ Refused
Uganda	51%	16%	7%	21%	5%
Kenya	43%	21%	9%	25%	2%
DRC	38%	13%	8%	35%	7%
Nigeria	31%	22%	13%	33%	2%
Senegal	30%	14%	10%	44%	3%
South Africa	27%	8%	13%	51%	2%
Cameroon	24%	21%	14%	38%	3%

■ Definitely yes   ■ Unsure but leaning towards yes   ■ Unsure but leaning towards no   ■ Definitely No   □ Dont know/ Refused

Those unvaccinated: n=3,933

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THE UNVACCINATED

TOP THREE REASONS FOR REFUSAL:

28% Do not feel at risk of catching the virus

20% Worried about getting seriously ill/dying from the vaccine

19% Do not know enough about the vaccine to make a decision

Those unvaccinated: n=3,933

TOP THREE REASONS FOR REFUSAL BY CORE COUNTRIES:

The proportion of those who do not feel they are at risk of catching the virus has increased from 9% to 15% amongst the Core Countries.

Do not feel at risk of catching the virus — Jan-22: 9%, Aug-22: 15% ▲

Worried about getting seriously ill/dying from the vaccine — Jan-22: 14%, Aug-22: 16%

Do not know enough about the vaccine to make a decision — Jan-22: 10%, Aug-22: 10%

Do not believe the virus exists — Jan-22: 9%, Aug-22: 12% ▲

■ Jan-22 ■ Aug-22
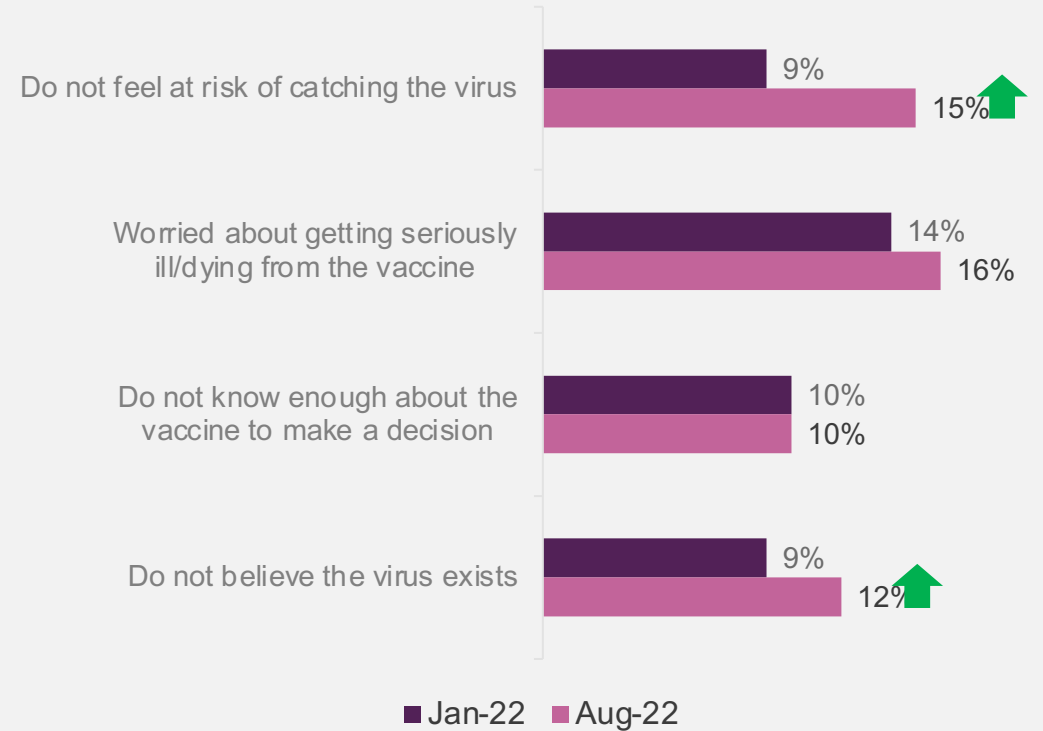
Those unvaccinated: W1 n=3,085; W2 n=3,124

THE UNVACCINATED

TOP THREE REASONS MOTIVATORS:

22% If the government made a vaccine mandatory

19% If the vaccine was proven safe

14% If my employer required me to get one

TOP THREE REASONS MOTIVATORS BY CORE COUNTRIES:

The proportion of respondents in the Core Countries who state that nothing would make them more likely to get a COVID-19 vaccine has increased 8% since Jan-22. This is in line with the 10% increase with those who would *definitely not* accept a COVID-19 vaccine.

Nothing would make me more likely to get a COVID-19 vaccine — 9% / 17%

If the vaccine was proven to be safe — 20% / 16%

If the government made a vaccine mandatory — 11% / 13%

If I needed to have a vaccine to access health services — 4% / 5%

■ Jan-22 ■ Aug-22
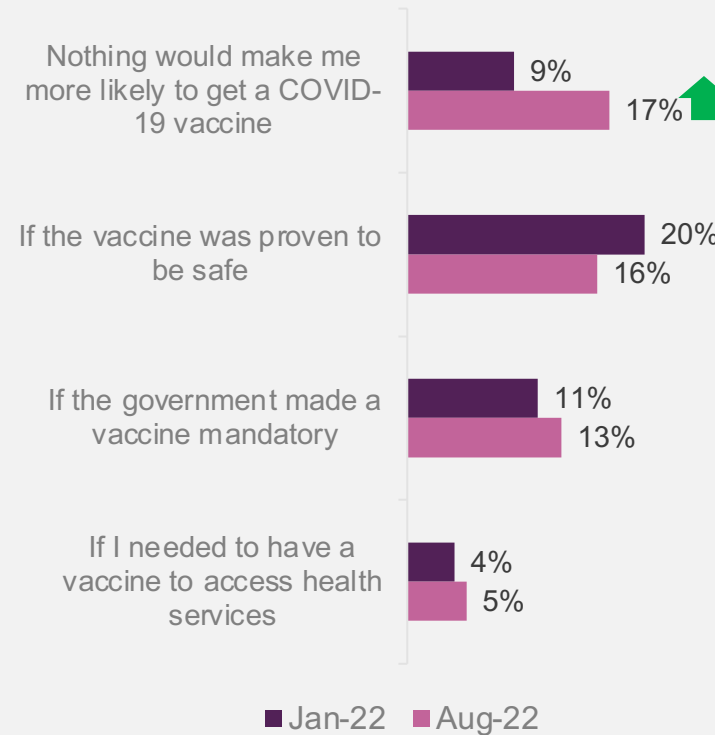
Those unvaccinated: n= 120

VACCINATING CHILDREN

———

VACCINATING CHILDREN

Looking at Core Countries only, we can see that there has been an 7% increase in COVID-19 acceptance for those responsible for the vaccination for children.

This correlates well with the VCI Index measure for vaccine important for children. Whilst there was a significant decrease across the board since Jun-20, the only group who appear to be returni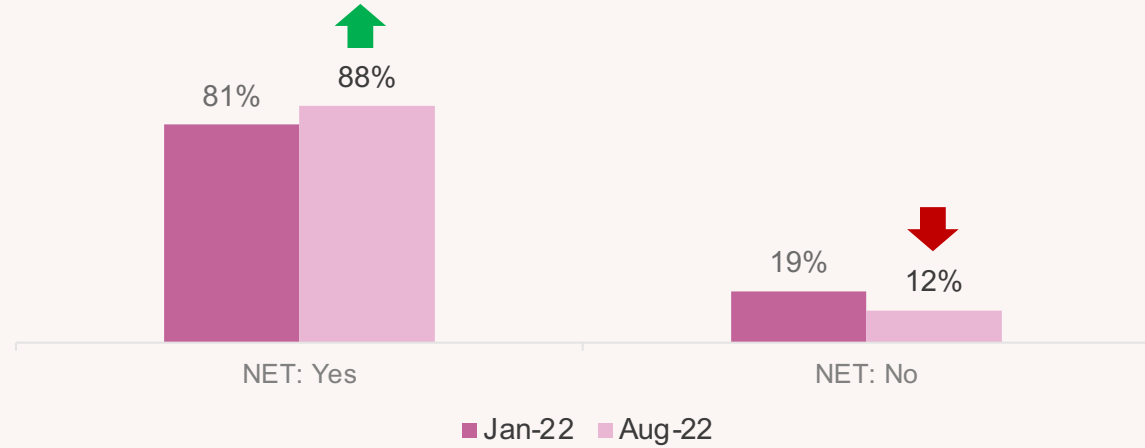ng to pre-vaccine roll out levels is the demographic who live in households with children under 18. This increase is irrespective of gender.

NET COVID-19 VACCINE ACCEPTANCE FOR CHILD(REN) IN PARTICIPANTS CARE:

Chart showing NET: Yes — 81% (Jan-22), 88% (Aug-22) with green up arrow; NET: No — 19% (Jan-22), 12% (Aug-22) with red down arrow.

■ Jan-22 ■ Aug-22

NET AGREE THAT VACCINES ARE IMPORTANT FOR CHILDREN:

Chart showing:
- Total sample: 84% (Jun-20), 72% (Jan-22), 76% (Aug-22)
- Household with children <18: 84% (Jun-20), 73% (Jan-22), 78% (Aug-22) with green up arrow
- Household without children <18: 83% (Jun-20), 69% (Jan-22), 72% (Aug-22)

■ Jun-20 ■ Jan-22 ■ Aug-22
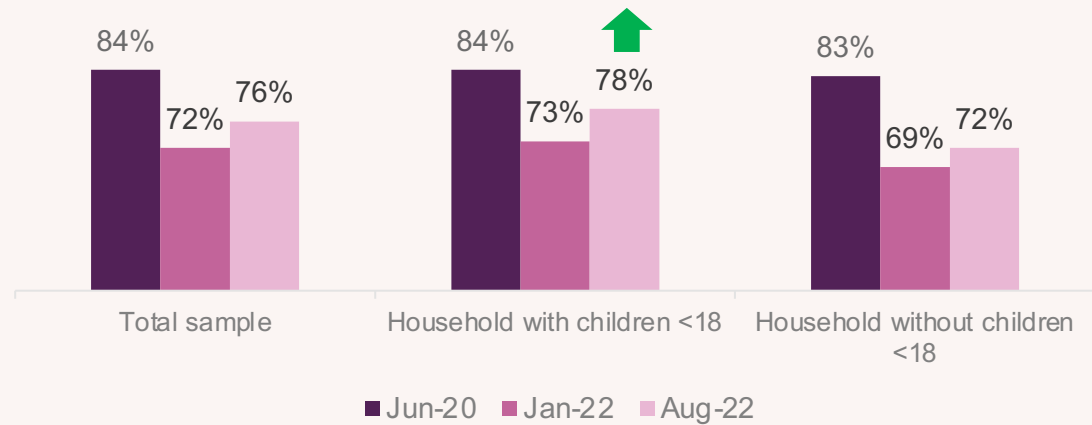
Those responsible for the vaccination of children:
W0=3756, W1=4405, W2=4071

VCI INDEX AND OTHER VACCINATIONS

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VCI INDEX

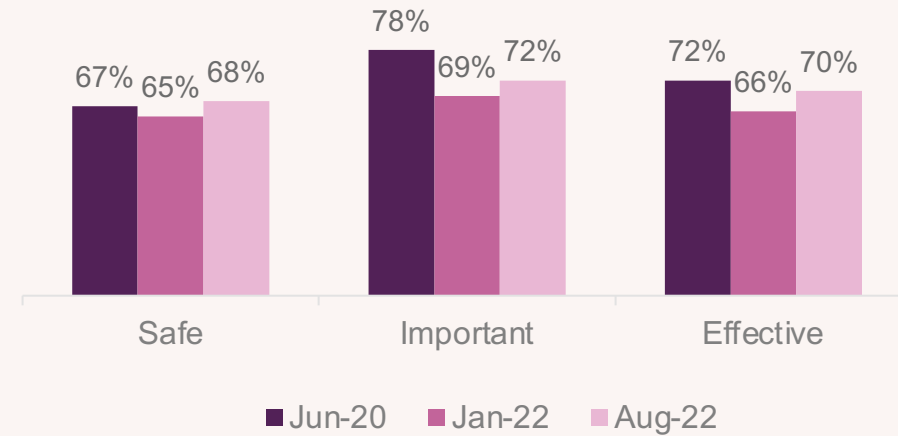Similar to the VCI Index measure on the importance of vaccination, from Jun-20 to Jan-22 there was a sharp decrease in importance for both COVID-19 vaccines and vaccines in general. Since Jan-22 whilst there hasn't been any significant change for this measure there is a slight upwards trend. That said there is still a way to go to get back to pre-vaccine roll out levels.

There are some demographic variations within the index, older participants tend to score higher for measures of safety and effectiveness and women tend to score higher for measures of safety (see next slide).

COVID-19 VACCINES BY CORE COUNTRIES:

Safe: 67% (Jun-20), 65% (Jan-22), 68% (Aug-22)
Important: 78% (Jun-20), 69% (Jan-22), 72% (Aug-22)
Effective: 72% (Jun-20), 66% (Jan-22), 70% (Aug-22)

■ Jun-20   ■ Jan-22   ■ Aug-22

VACCINES IN GENERAL BY CORE COUNTRIES:

Safe: 77% (Jun-20), 74% (Jan-22), 79% (Aug-22)
Important: 79% (Jun-20), 71% (Jan-22), 74% (Aug-22)
Effective: 78% (Jun-20), 75% (Jan-22), 78% (Aug-22)
Compatible with religious beliefs: 67% (Jun-20), 69% (Jan-22), 70% (Aug-22)

All Core Country interviews: n=12,570
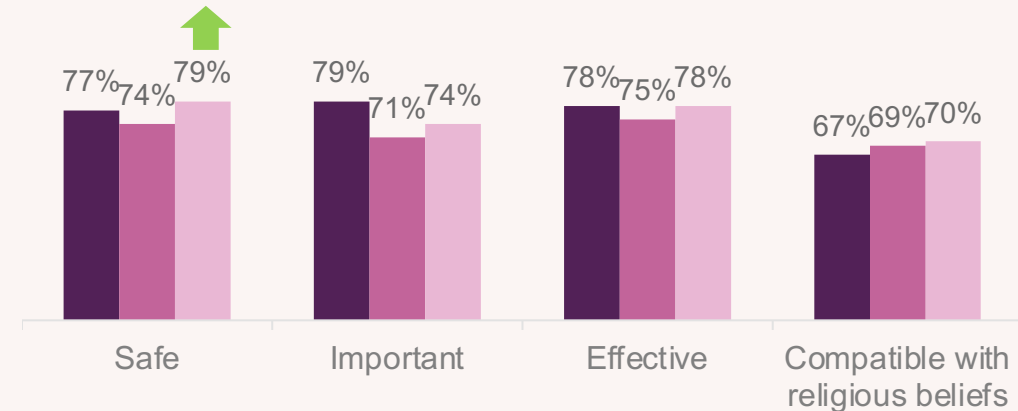
VCI INDEX: BY AGE AND GENDER

VACCINES IN GENERAL:

Men over 35
- Safe: 81%
- Important: 78%
- Effective: 80%

Women over 35
- Safe: 80%
- Important: 74%
- Effective: 81%

Men under 35
- Safe: 73%
- Important: 73%
- Effective: 74%

Women under 35
- Safe: 78%
- Important: 74%
- Effective: 77%

Legend: ■ Safe ■ Important ■ Effective

COVID-19 VACCINES:

Men over 35
- Safe: 69%
- Important: 72%
- Effective: 70%

Women over 35
- Safe: 69%
- Important: 72%
- Effective: 70%

Men under 35
- Safe: 64%
- Important: 71%
- Effective: 66%

Women under 352
- Safe: 65%
- Important: 70%
- Effective: 67%

Legend: ■ Safe ■ Important ■ Effective

All interviews: n= 7,179

Around 3 in 4 of the total Aug-22 dataset report never having rejected a vaccine – leaving 23% of have.

Vaccine rejection is higher amongst younger age groups and students by around 5%. They are also more likely to score hesitant on the VCI Index.

The number one vaccine rejected across all countries is COVID-19, followed by yellow fever.

REJECTION OF VACCINES:

- Yes
- No
- I have never received an invite for any vaccinations

Vaccine	%
COVID-19	77%
Yellow fever	11%
Hepatitis B	10%
MMR	7%
Influenza (flu)	7%
Meningitis	7%
Polio	7%
HPV	

74%
23%
2%
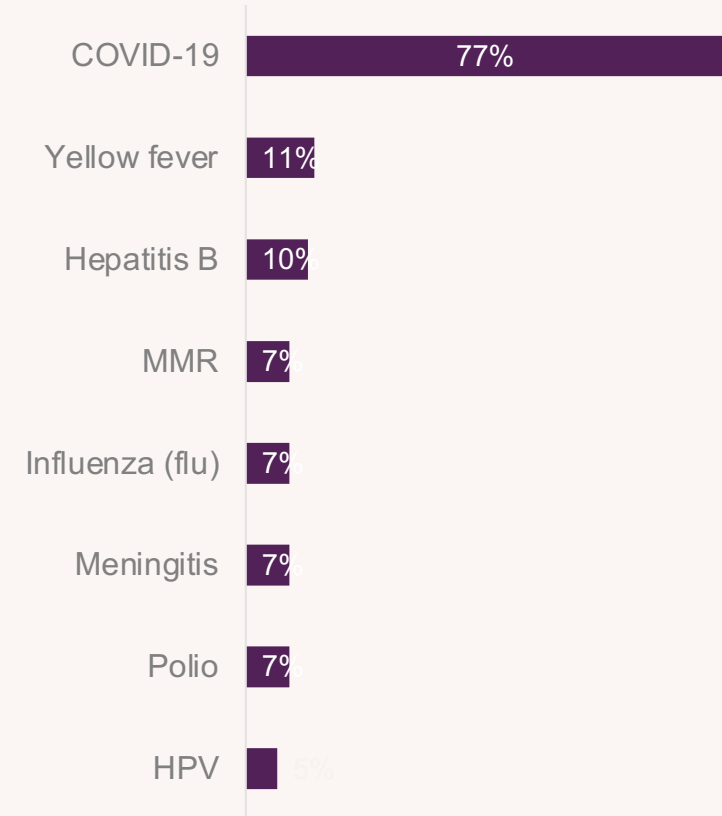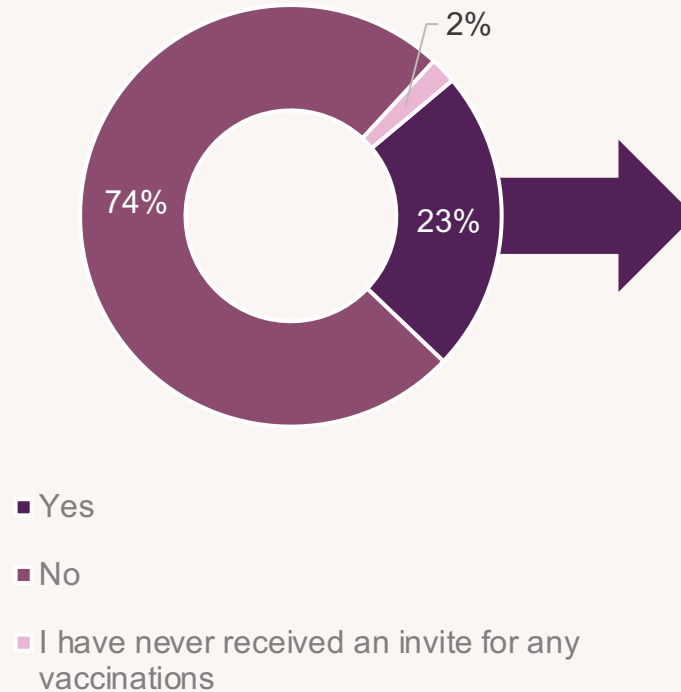
All interviews: n= 7,179

OTHER VACCINATIONS

Just over half of the total sample (53%) report that they are more likely to get vaccinated as a result of the pandemic.

This sentiment is strongest for malaria (56%) followed by influenza (50%).

In the survey we specifically asked about whether or not participants would accept a COVID-19 vaccine:

- 63% would definitely accept

- 13% unsure leaning towards yes

- 5% unsure leaning towards no

- 17% definitely would reject

WILLINGNESS TO GET VACCINATED AS A RESULT OF THE PANDEMIC:

Donut chart segments:
- 32%
- 21%
- 11%
- 9%
- 26%
- 1%
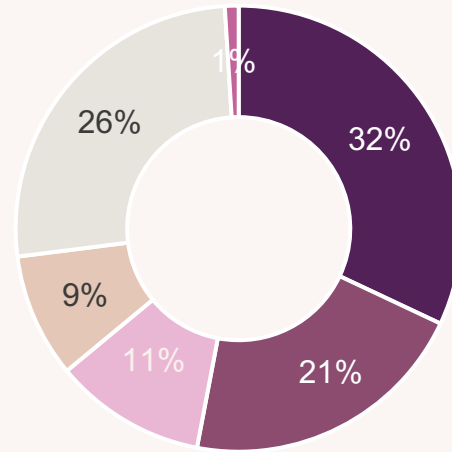
Legend:
- A lot more likely
- Somewhat more likely
- Somewhat less likely
- A lot less likely
- There has been no change in my views to vaccines
- Don't know

Bar chart:
- Malaria 56%
- Influenza 50%
- Yellow fever 48%
- Polio 48%
- MMR 47%
- Hepatitis B 44%
- DPT 44%
- BCG 37%
- Pneumococcal 35%
- HPV 34%
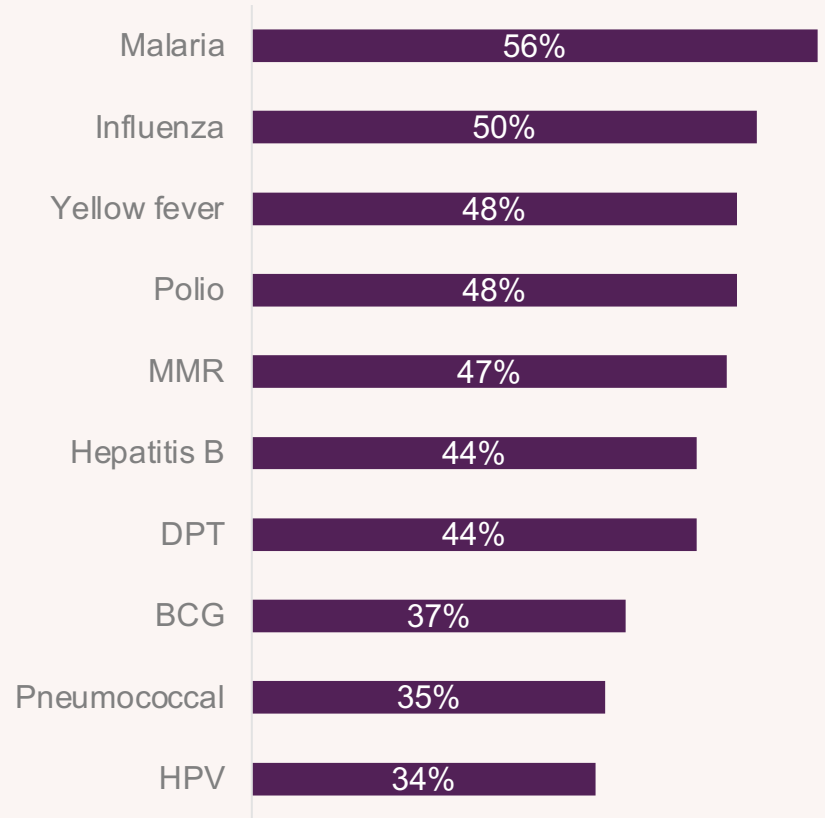
All interviews: n= 7,179

THREAT FROM COVID

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PERCEIVED THREAT OF COVID-19

Around half of the sample report being very concerned about getting COVID-19 for their friends or family.

Concern is mainly driven by those in older generations and in households with children under 18.

Uganda ranks highest for countries concerned, followed by Kenya and South Africa. There is a clear trend with the level of COVID-19 take up and level of concern.

CONCERN ABOUT GETTING COVID-19 FOR...

	Friends/ family	Yourself
Very concerned	49%	46%
Moderately concerned	15%	15%
A little concerned	19%	20%
Not at all concerned	16%	17%

■ Friends/ family   ■ Yourself

	NET: Not concerned	NET: Concerned
Uganda	13%	86%
Kenya	32%	67%
South Africa	36%	63%
Senegal	41%	59%
Nigeria	43%	57%
DRC	44%	55%
Cameroon	58%	41%

■ NET: Not concerned   ■ NET: Concerned

All interviews: n= 7,179

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PERCEIVED THREAT OF COVID-19

For the Core Countries the number of people agreeing that the threat from COVID-19 is exaggerated has dropped from 37% to 32%. This drop has been consistent across the age and gender demographics (expect for the oldest generation of 55+).

Perceived threat from COVID-19 is another measure explored in this data set. Interestingly in this round of data collection, COVID-19 is the only threat that has remained consistent with Jan-22.
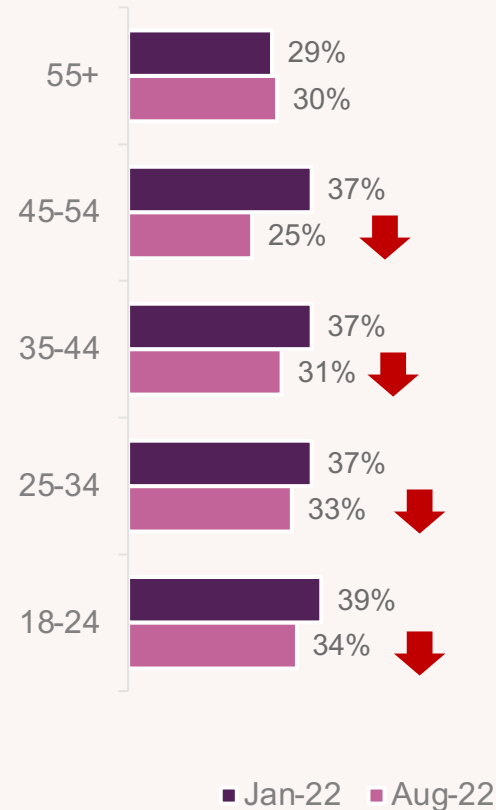
NET AGREE THAT THREAT FROM COVID-19 IS EXAGGERATED BY CORE COUNTRIES:

Age	Jan-22	Aug-22
55+	29%	30%
45-54	37%	25% ↓
35-44	37%	31% ↓
25-34	37%	33% ↓
18-24	39%	34% ↓

■ Jan-22 ■ Aug-22

PERSONAL THREATS BY CORE COUNTRIES:

	Jan-22	Aug-22	
Lack of access to food	65%	79%	↑
Malaria	67%	76%	↑
COVID-19	72%	71%	
Lack of access to clean water	66%	74%	↑
HIV/Aids	60%	67%	↑
Tuberculosis	59%	64%	↑
Polio	50%	56%	↑

■ Jan-22 ■ Aug-22

All Core Country interviews: n=12,570

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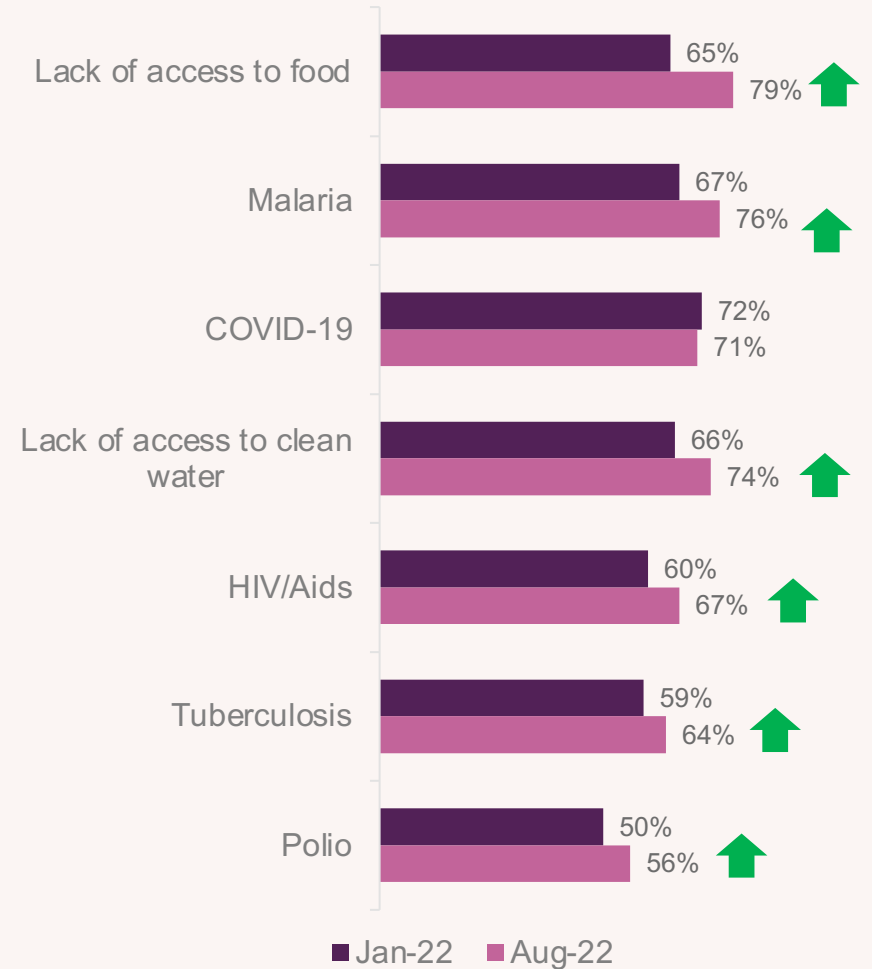
PERCEIVED THREAT OF COVID-19

Compliance with protective and preventative measures amongst the Core Countries in January-22 and August-22 is fairly consistent.

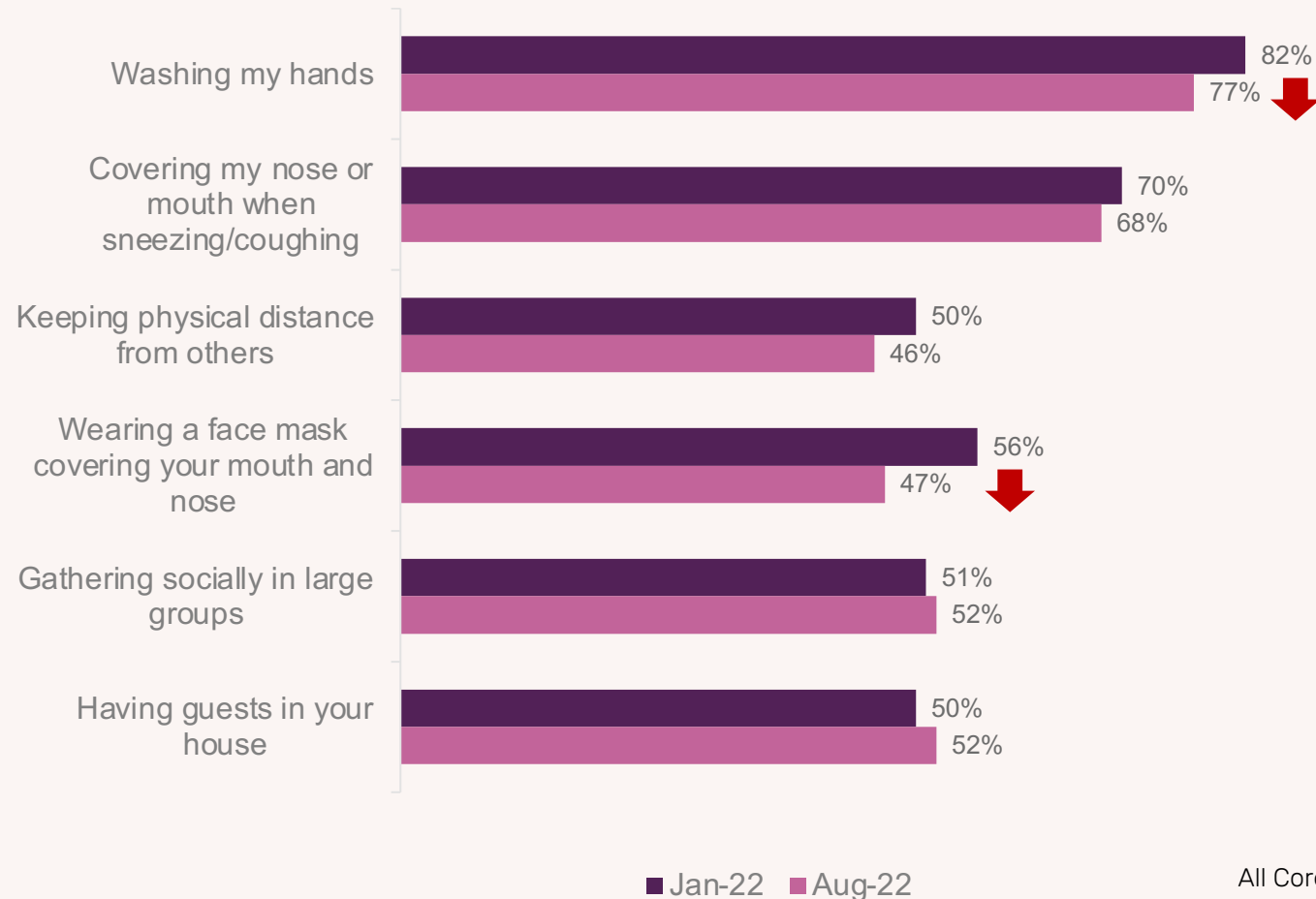Only in washing hands and wearing a face mask we are seeing drops in compliance. That said, almost 8 in 10 are still citing that they are washing their hands more regularly.

As with previous rounds of research, there is no demographic difference between compliance and non-compliance.

COMPLIANCE WITH PROTECTIVE AND PREVENTATIVE MEASURES BY CORE COUNTRIES:

Measure	Jan-22	Aug-22
Washing my hands	82%	77%
Covering my nose or mouth when sneezing/coughing	70%	68%
Keeping physical distance from others	50%	46%
Wearing a face mask covering your mouth and nose	56%	47%
Gathering socially in large groups	51%	52%
Having guests in your house	50%	52%

■ Jan-22   ■ Aug-22

All Core Country interviews: n=12,570

AFRICA CDC
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Safeguarding Africa's Health

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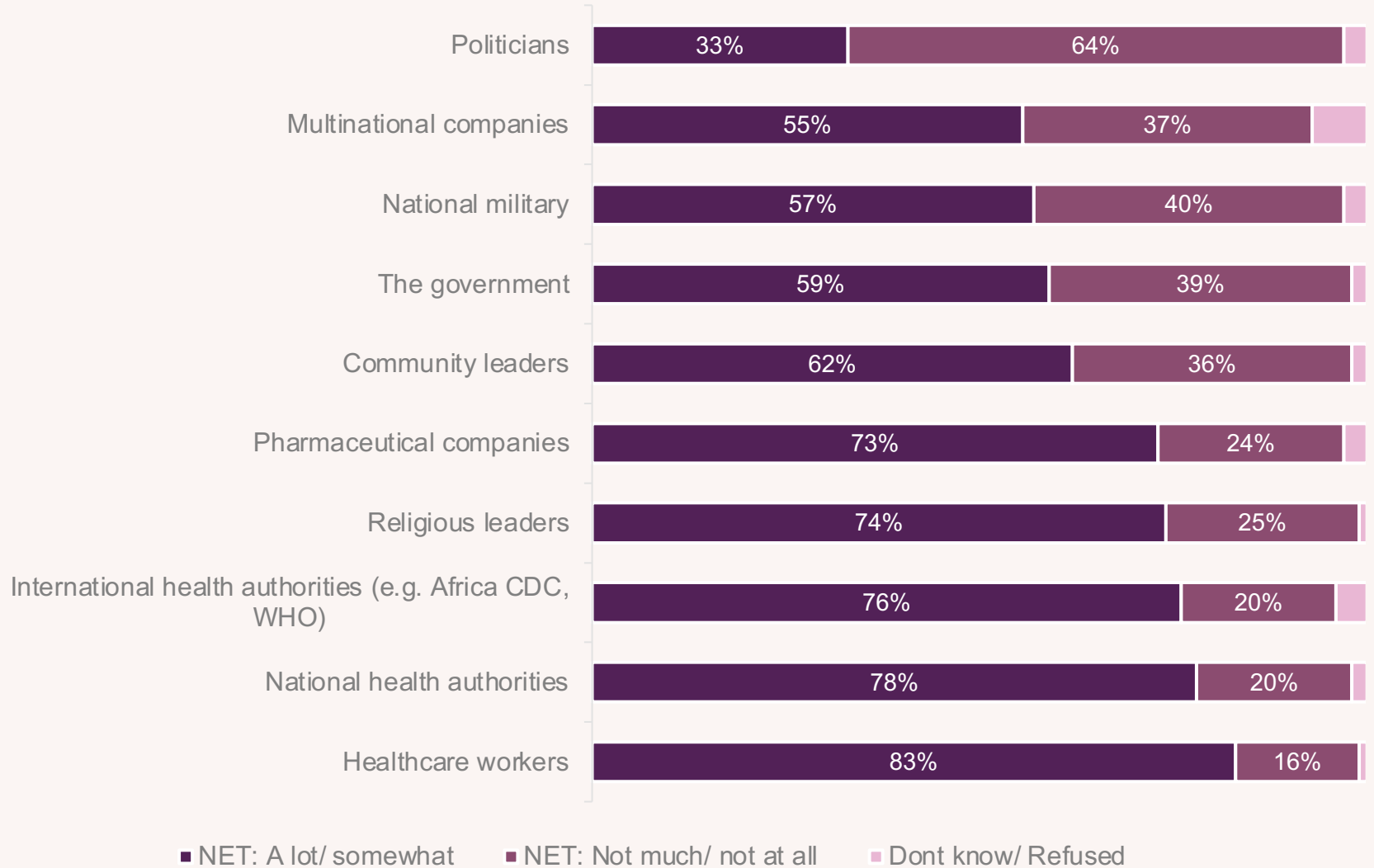
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TRUST

—

TRUST IN INSTITUTIONS/ PEOPLE/ GROUPS

TRUST IN FOLLOWING GROUPS TO DO THE RIGHT THING:

When asked whether respondents trust the following groups to 'do the right thing' – the data shows clearly that health related groups come out on top.

Politicians rate the worst in the question, with 2 in 3 respondents agreeing that they are doing the right thing – this is true across demographics.

National military and multi-national companies are some of the least perceived as doing the right thing.

Group	NET: A lot/ somewhat	NET: Not much/ not at all
Politicians	33%	64%
Multinational companies	55%	37%
National military	57%	40%
The government	59%	39%
Community leaders	62%	36%
Pharmaceutical companies	73%	24%
Religious leaders	74%	25%
International health authorities (e.g. Africa CDC, WHO)	76%	20%
National health authorities	78%	20%
Healthcare workers	83%	16%

■ NET: A lot/ somewhat ■ NET: Not much/ not at all ■ Dont know/ Refused
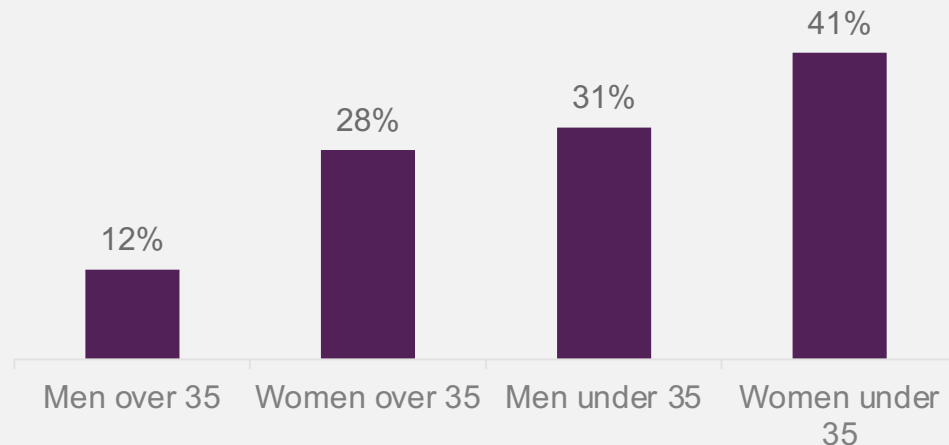
All interviews: n= 7,179

TRUSTED VOICES IN VACCINE ACCEPTANCE

7 in 10 respondents have the final say about whether or not they will take a COVID-19 vaccine.

Women under 35 are the most likely to have someone else weigh in on the final decision – 41% compared to 31% of men under 35.

Stay-at-home parents and those with primary education are some of the most likely to have another person have the final say about their uptake.

% OF THOSE WHO HAVE ANOTHER PERSON HAVE THE FINAL SAY ABOUT RECEIVING A COVID-19 VACCINE:

Men over 35	Women over 35	Men under 35	Women under 35
12%	28%	31%	41%

FINAL SAY ABOUT COVID-19 VACCINE UPTAKE:

69% Myself

10% My spouse / partner

9% My parents

All interviews: n= 7,179

TRUSTED VOICES IN VACCINE ACCEPTANCE

THREE MOST TRUSTED SOURCES FOR REASSURANCE ABOUT COVID-19 VACCINES:

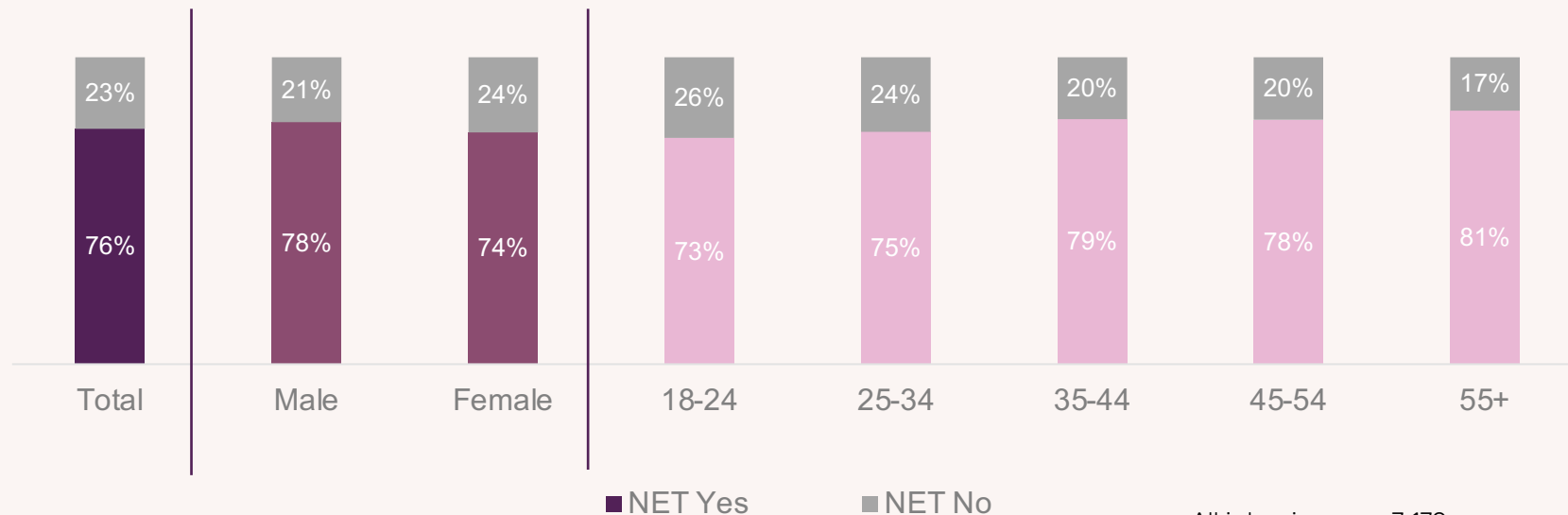**78%** World Health Organization (WHO) / Family and friends

74% Religious leaders

71% Pharmaceutical companies (e.g. Janssen, Pfizer)

World Health Organization (WHO), **religious leaders** and **Pharmaceutical companies** are the most popular sources for information on COVID-19 vaccines; when asked about who to turn to when seeking information on their general health, respondents cited most frequently **family doctor or healthcare provider (51%)**, **family members (42%%)** and **friends (29%)**.

Trust in healthcare workers administering COVID-19 vaccines sits at 76% and does not fluctuate by age or gender.

TRUST IN LOCAL HEALTHCARE PROVIDERS ADMINISTERING COVID-19 VACCINES:

	Total	Male	Female	18-24	25-34	35-44	45-54	55+
NET No	23%	21%	24%	26%	24%	20%	20%	17%
NET Yes	76%	78%	74%	73%	75%	79%	78%	81%

■ NET Yes ■ NET No

All interviews: n= 7,179

MISINFORMATION
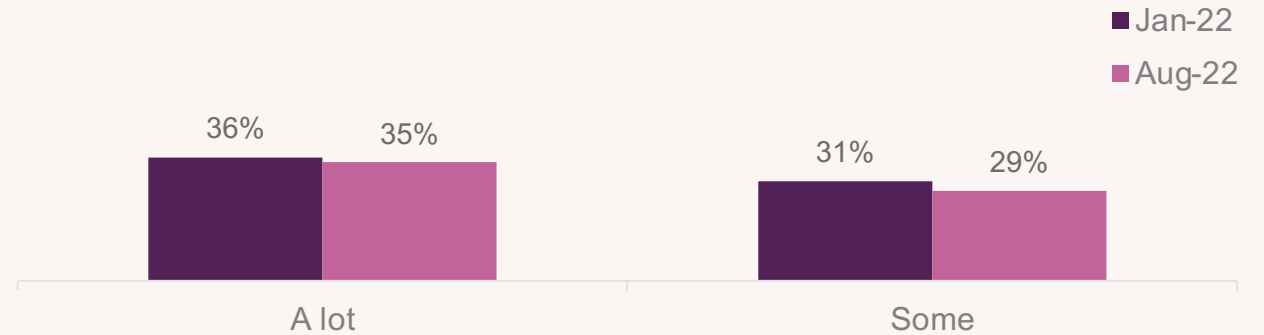
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MIS/DISINFORMATION

The level of self-reported mis/disinformation remains consistent with the Core Countries between the two rounds of data collection where this question was asked.

The noticeable difference between the two waves is the decrease in family/friends being a source of mis/disinformation and an increase in the internet being a source.

Unsurprisingly social media and internet is more common amongst the urban more education younger populations.

Radio is fairly popular across all demographics – something we find is consistent with other research.

SELF-REPORTED EXPOSURE TO MIS/DISINFORMATION BY CORE COUNTRIES:

Legend: ■ Jan-22 ■ Aug-22

- A lot: 36% (Jan-22), 35% (Aug-22)
- Some: 31% (Jan-22), 29% (Aug-22)

SOURCE OF MIS/DISINFORMATION BY CORE COUNTRIES:

- Family or friends: 29% (Jan-22), 23% (Aug-22)
- Internet: 16% (Jan-22), 21% (Aug-22)
- Radio: 19% (Jan-22), 18% (Aug-22)
- Social media: 11% (Jan-22), 9% (Aug-22)
- Television: 9% (Jan-22), 8% (Aug-22)
- Religious leaders: 0% (Jan-22), 8% (Aug-22)

Legend: ■ Jan-22 ■ Aug-22

All Core Country interviews: n=12,570

MIS/DISINFORMATION STORIES SEEN AND BELIEVED TO BE TRUE:
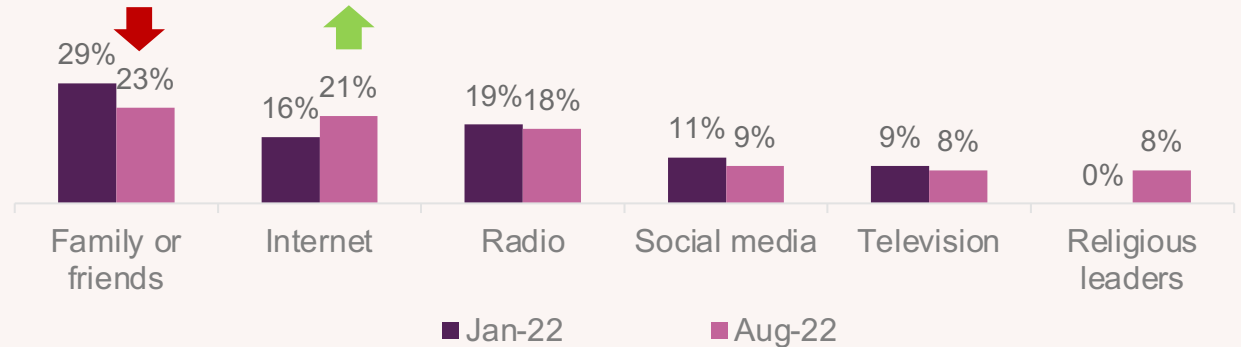
Around 3 in 10 respondents from the total sample believe that their respective government supports COVID-19 vaccines to further their own interests and that the pandemic is a planned event by foreign actors.
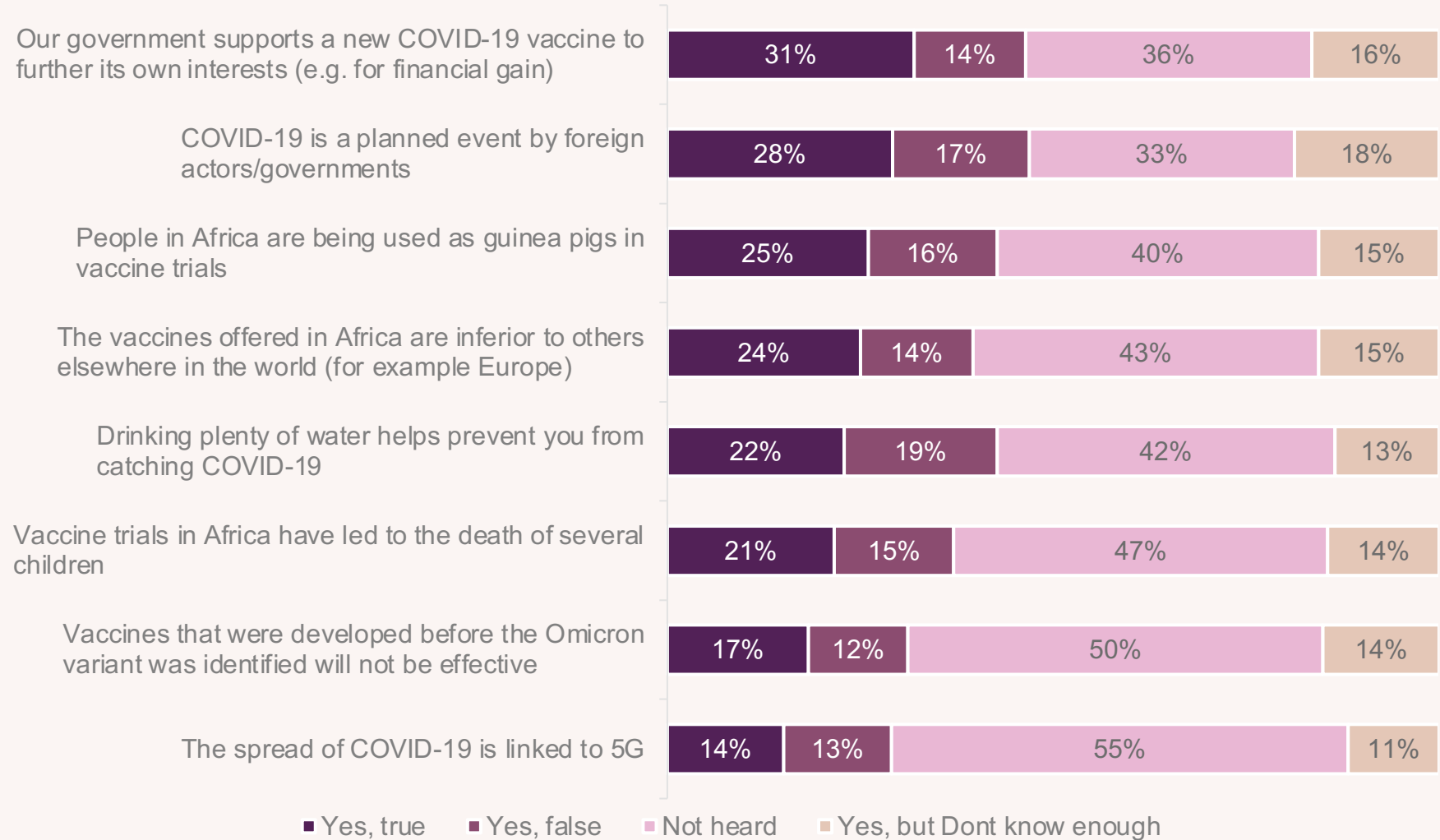
Generally – this is consistent across the 2 rounds of research asking these statements.

Men and those in younger age categories are much more likely to have not only heard these rumours or stories but also believe that they are true (compared to women and those aged over 55).

Statement	Yes, true	Yes, false	Not heard	Yes, but Dont know enough
Our government supports a new COVID-19 vaccine to further its own interests (e.g. for financial gain)	31%	14%	36%	16%
COVID-19 is a planned event by foreign actors/governments	28%	17%	33%	18%
People in Africa are being used as guinea pigs in vaccine trials	25%	16%	40%	15%
The vaccines offered in Africa are inferior to others elsewhere in the world (for example Europe)	24%	14%	43%	15%
Drinking plenty of water helps prevent you from catching COVID-19	22%	19%	42%	13%
Vaccine trials in Africa have led to the death of several children	21%	15%	47%	14%
Vaccines that were developed before the Omicron variant was identified will not be effective	17%	12%	50%	14%
The spread of COVID-19 is linked to 5G	14%	13%	55%	11%

■ Yes, true   ■ Yes, false   ■ Not heard   ■ Yes, but Dont know enough

All interviews: n= 7,179

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THANK YOU