

AFRICA CDC WORKING GROUP CAMEROON

LONDON
SCHOOL of
HYGIENE
& TROPICAL
MEDICINE



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

1



VACCINE
CONFIDENCE
PROJECT™

ORIB
International



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

METHODOLOGY

1k N=1,008 interview per country; nationally representative sample

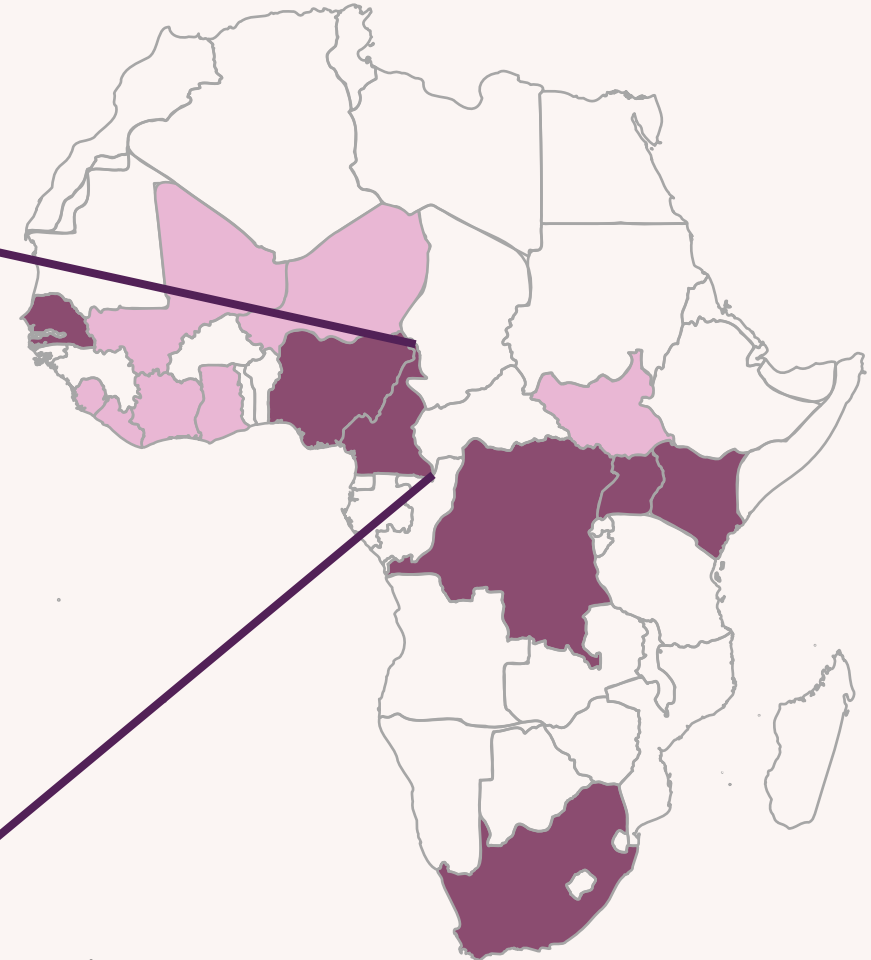
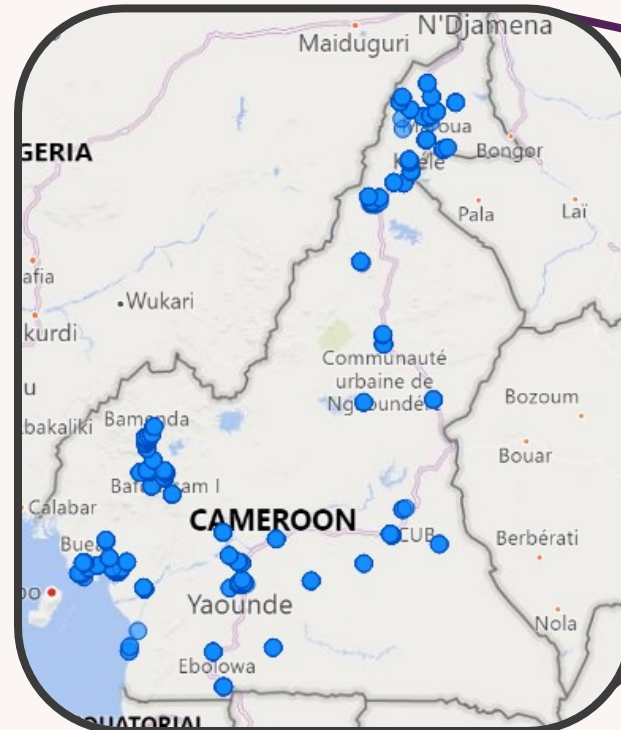
QC Quality control checked by in-country research teams and centrally in London, UK

1/4 Quarterly fieldwork planned for 2022

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

COUNTRIES SURVEYED:

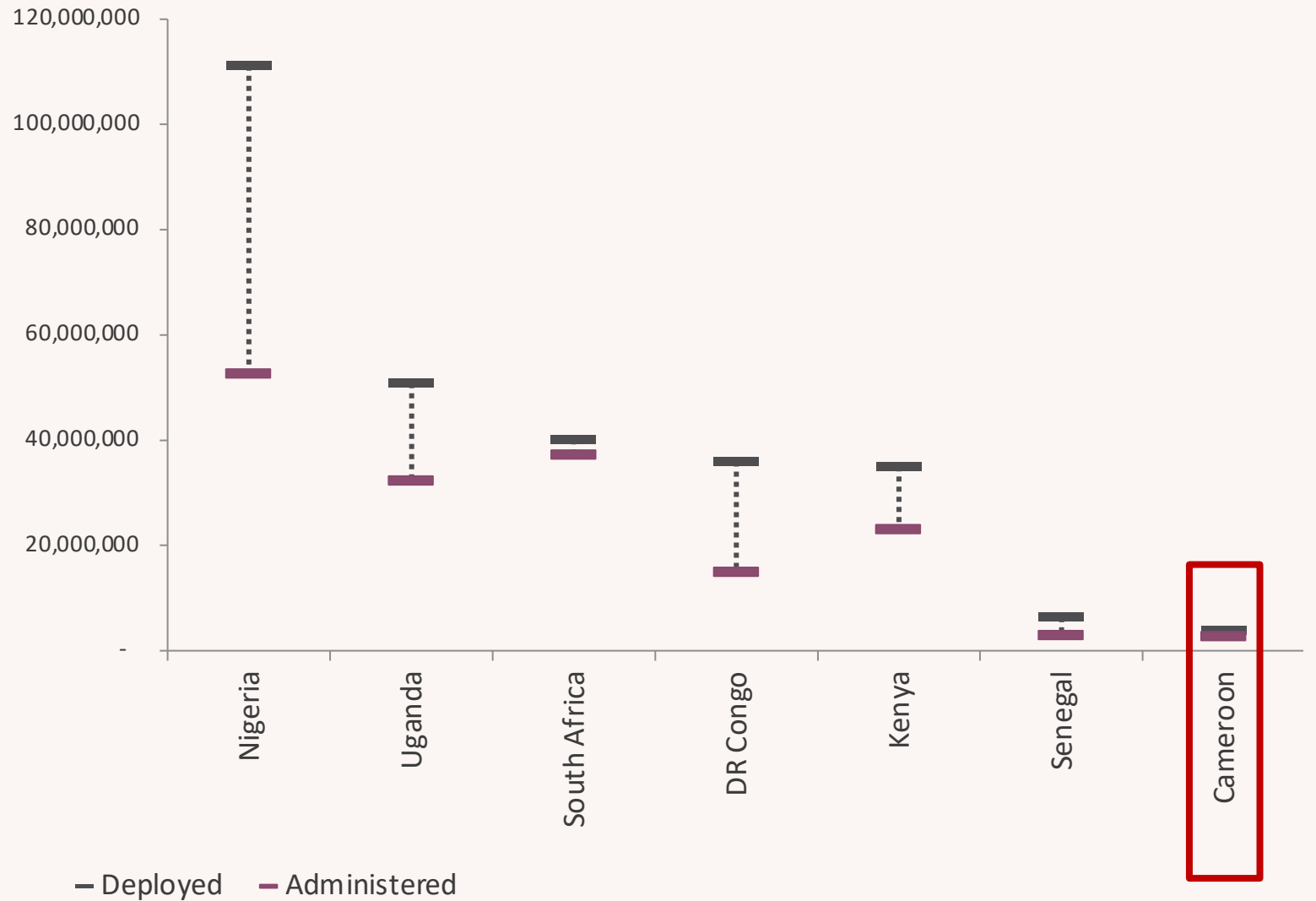
WAVE 2 PRIMARY SAMPLING POINTS:



■ Wave 1 and 2
 ■ Wave 1 only



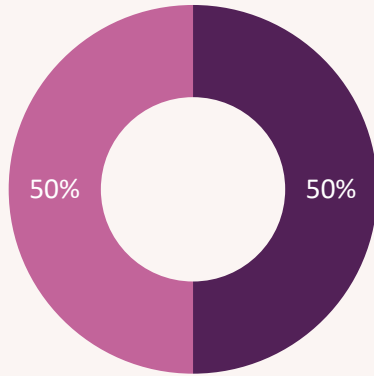
COVID-19 VACCINES DEPLOYED VS ADMINISTERED (AUGUST 2022)



DEMOGRAPHICS

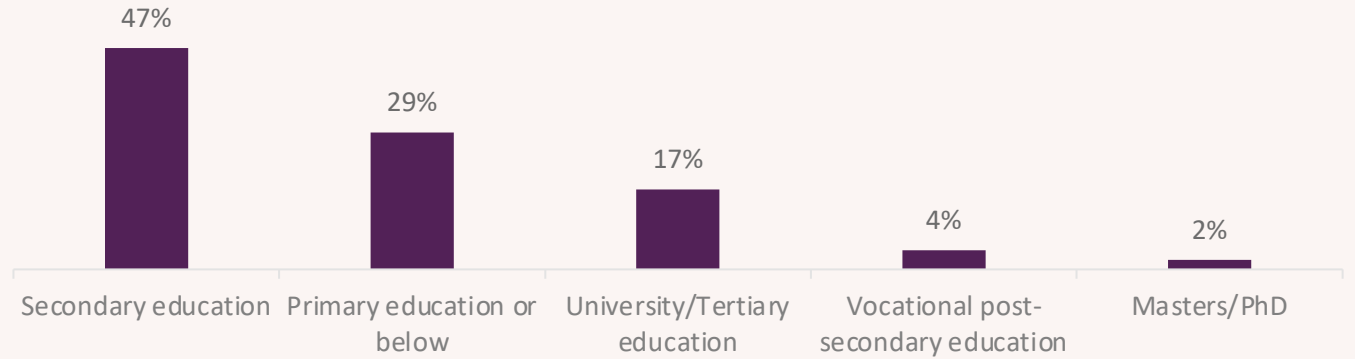
DEMOGRAPHICS

GENDER:

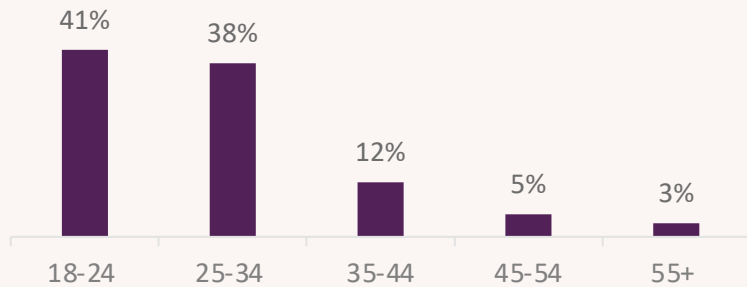


■ Male ■ Female

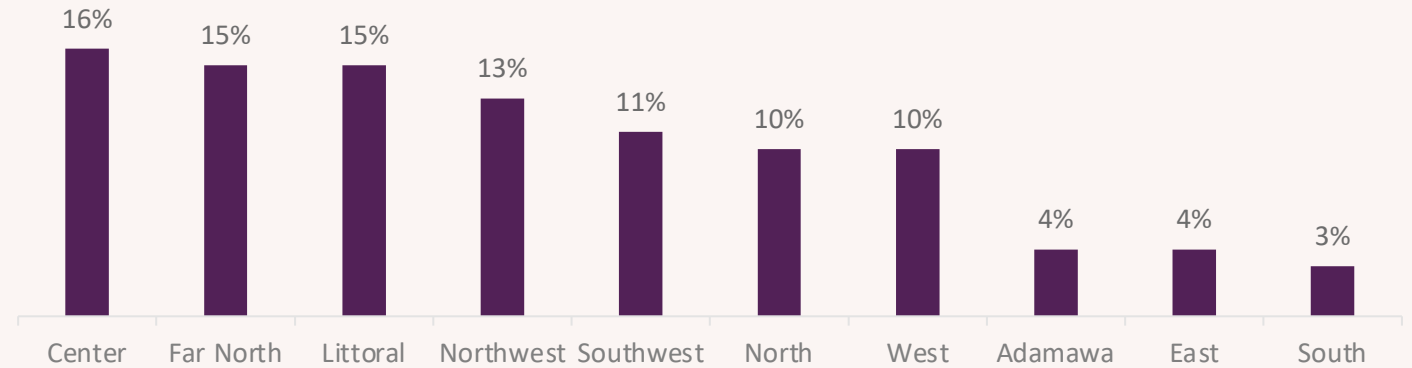
EDUCATION:



AGE GROUP:



REGIONS:



All interviews: n= 1,008

DEMOGRAPHICS

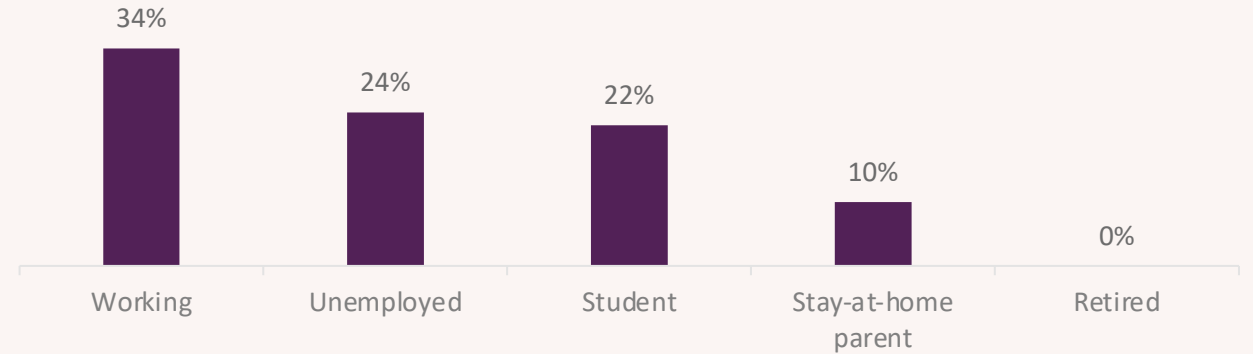
49% Rural

51% Urban

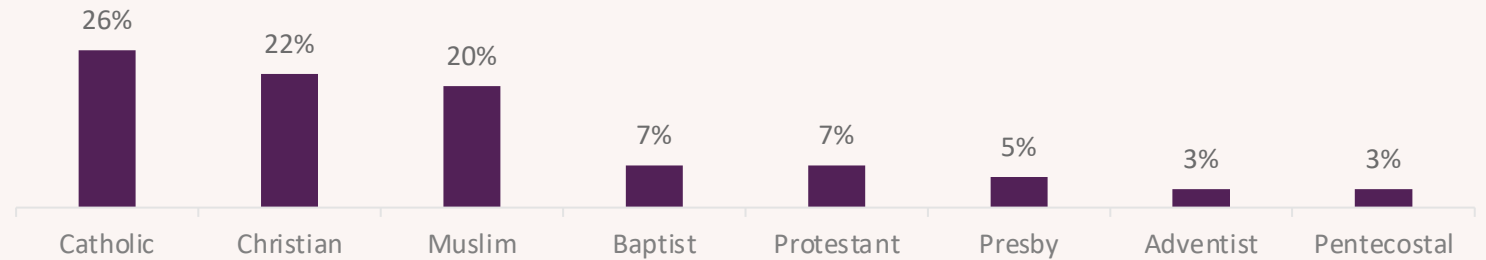
55% Have children in the household under 18

15% Healthcare workers

EMPLOYMENT STATUS:



RELIGION:



All interviews: n= 1,008

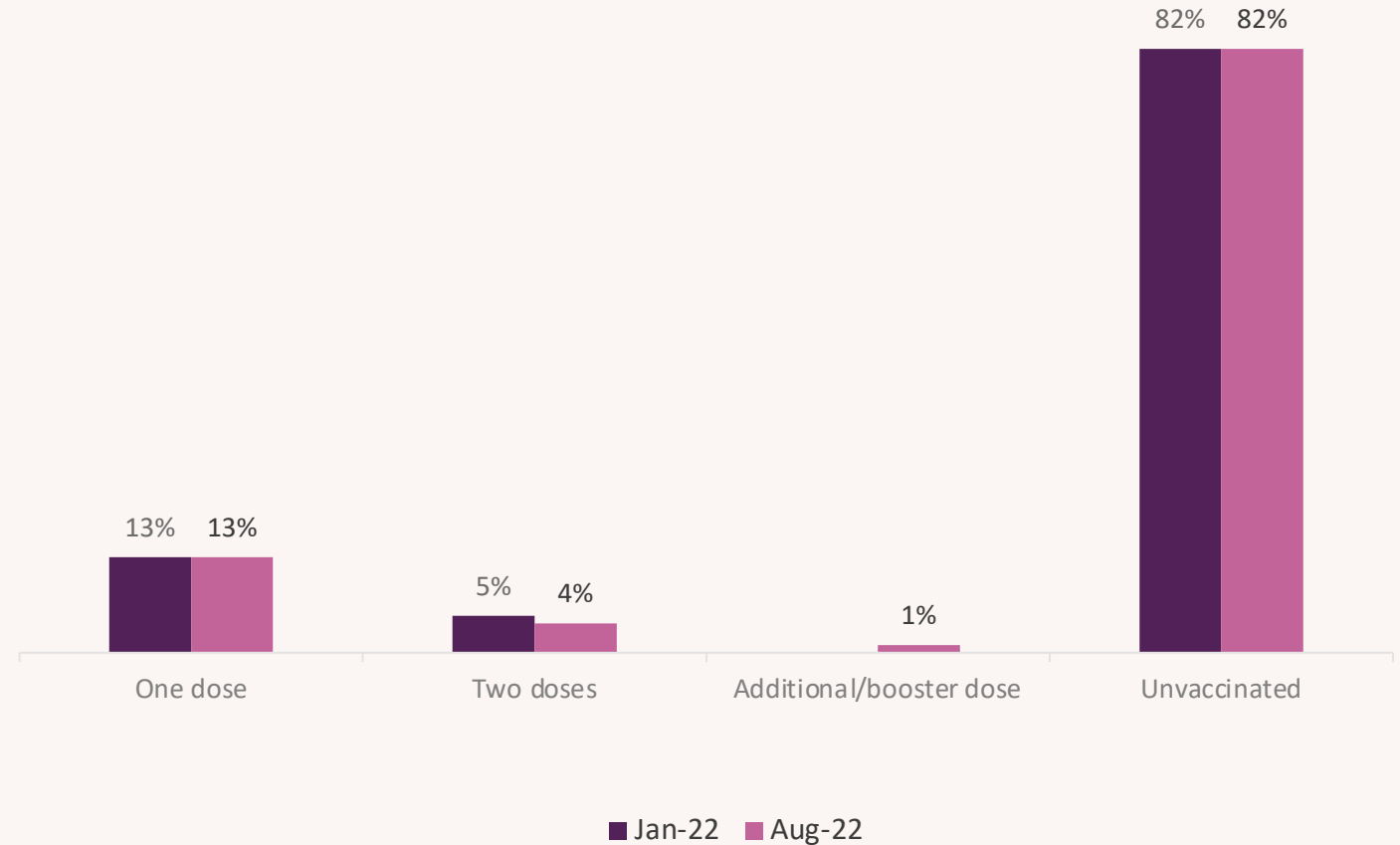
THE VACCINATED

THE VACCINATED

Between January-22 and August-22 there has been no change in reported vaccine uptake – the unvaccinated population remains at 82%.

Only 1% of the sample (n=12) report having received an additional/booster vaccine.

COVID-19 VACCINES ADMINISTERED:



All interviews: n= 1,008

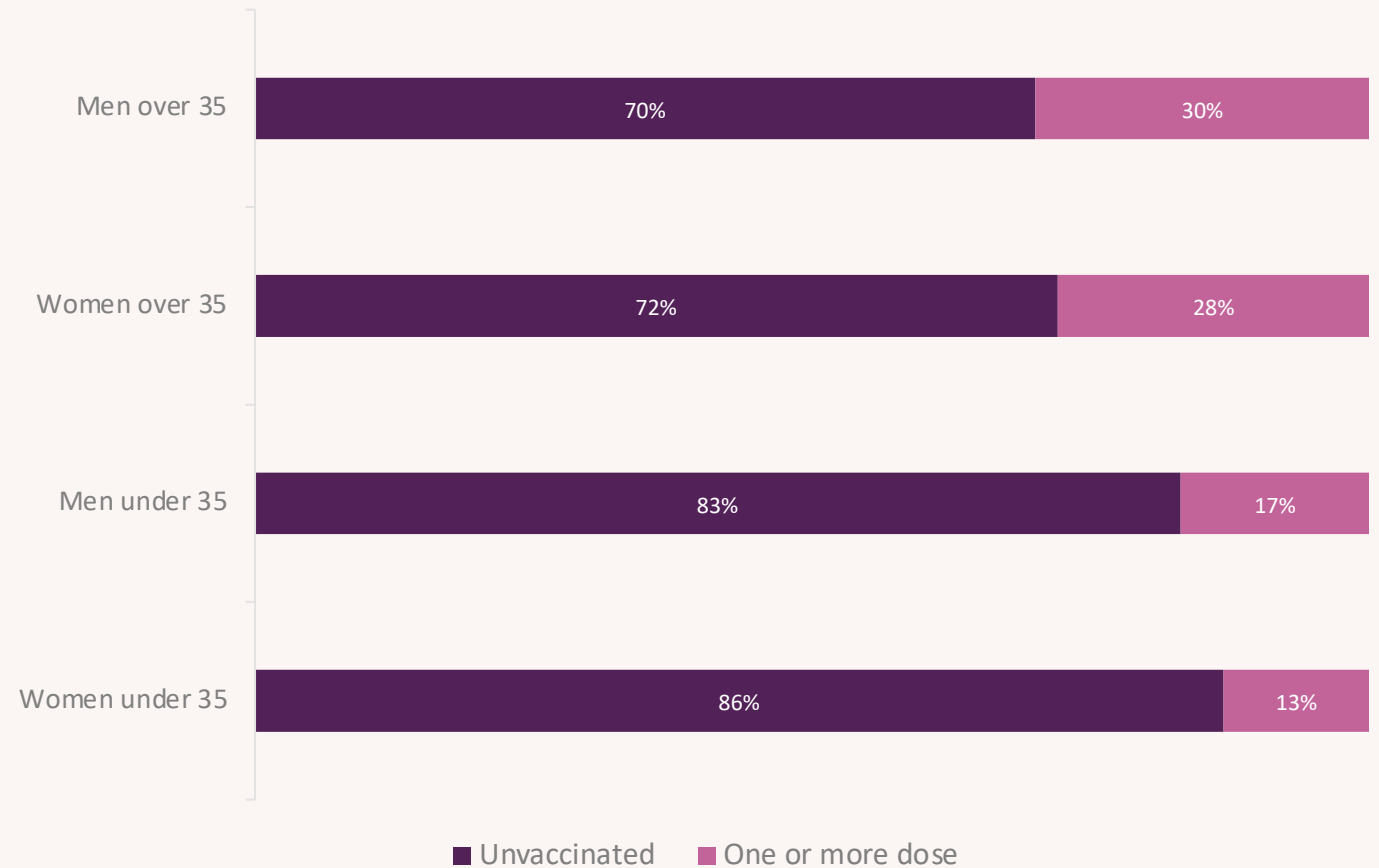
THE VACCINATED

COVID-19 vaccine acceptance is highest for the over 35s for both men and women.

Women over 35 are more than twice as likely to have received at least one dose of COVID-19 vaccine than women under 35.

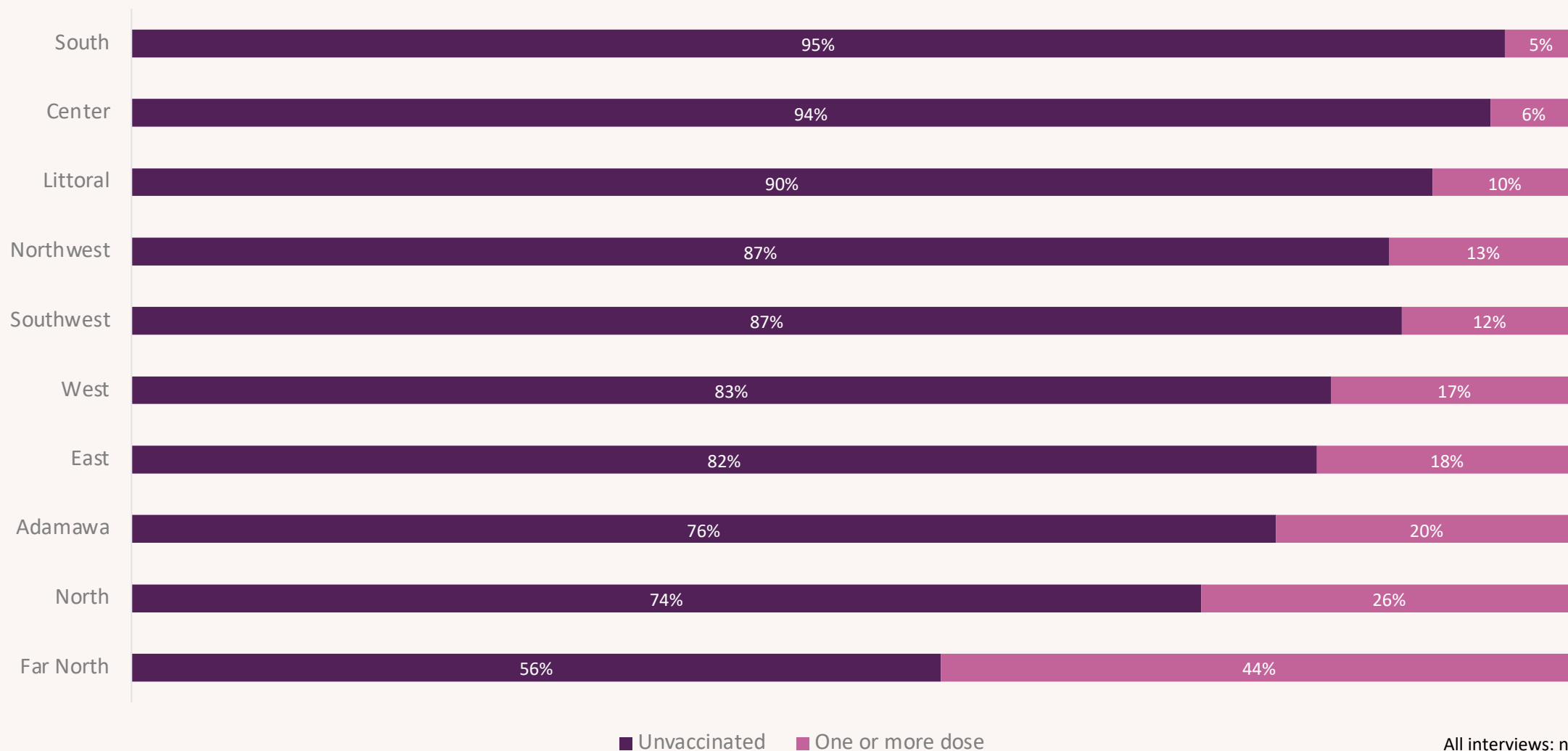
Amongst the under 35s, women are more likely to remain unvaccinated.

NET COVID-19 VACCINE ACCEPTANCE:



All interviews: n= 1,008

NET COVID-19 VACCINE ACCEPTANCE: REGION



All interviews: n= 1,008

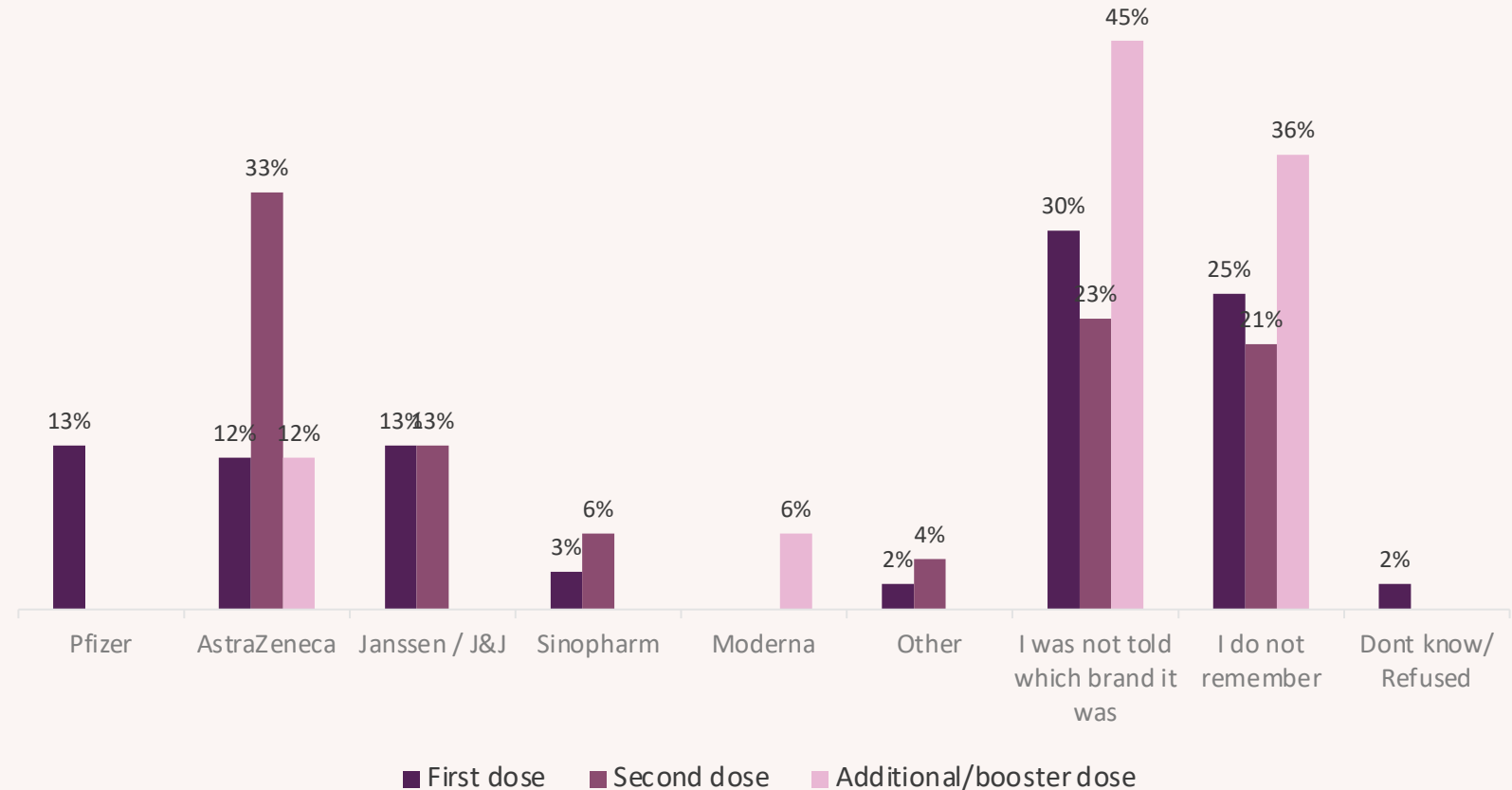
THE VACCINATED

As for respondents' first dose, there is no stand-out brand of COVID-19 vaccine being administered in Cameroon. Janssen / J&J, Pfizer, and AstraZeneca are equally as popular.

Due the small sample size of n=39 for the second dose no analysis can be drawn.

Around half the sample say they were not told which brand they had received or did not remember at both their first dose.

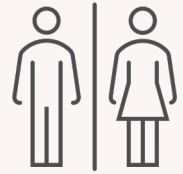
COVID-19 VACCINES ADMINISTERED: BY BRAND



First dose: n= 131
 Second dose: n= 39
 Additional/booster dose: n= 12

THE VACCINATED

TOP THREE REASONS FOR GETTING VACCINATED:



82%

To protect myself



69%

To protect family



33%

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

ATTITUDES TOWARDS BEING VACCINATED:

79%

Relieved about being vaccinated against COVID-19

55%

Doubts/reservations at the time of getting vaccinated

27%

Regret having been vaccinated

Those vaccinated: n= 182

THE UNVACCINATED

THE UNVACCINATED

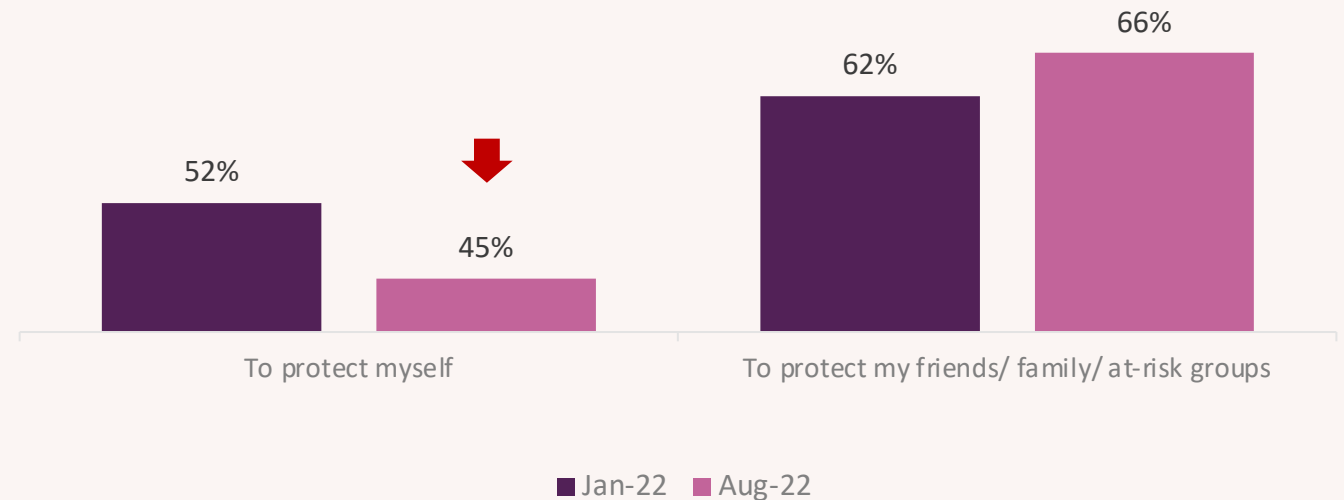
Amongst the unvaccinated population, 45% of respondents would accept a COVID-19 vaccine to protect themselves – a 7% decrease since January-22.

Respondents in Cameroon are more motivated to accept a COVID-19 vaccine to protect friends/family/at-risk groups, with 66% suggesting they would accept a vaccine for this reason. This is consistent across both waves of data.

Like other countries surveyed, access to vaccines is an issue in Cameroon and a likely barrier for slow uptake. 37% of the unvaccinated report vaccines are not easily accessible – significantly higher than those already vaccinated (only 25% of whom report issues).

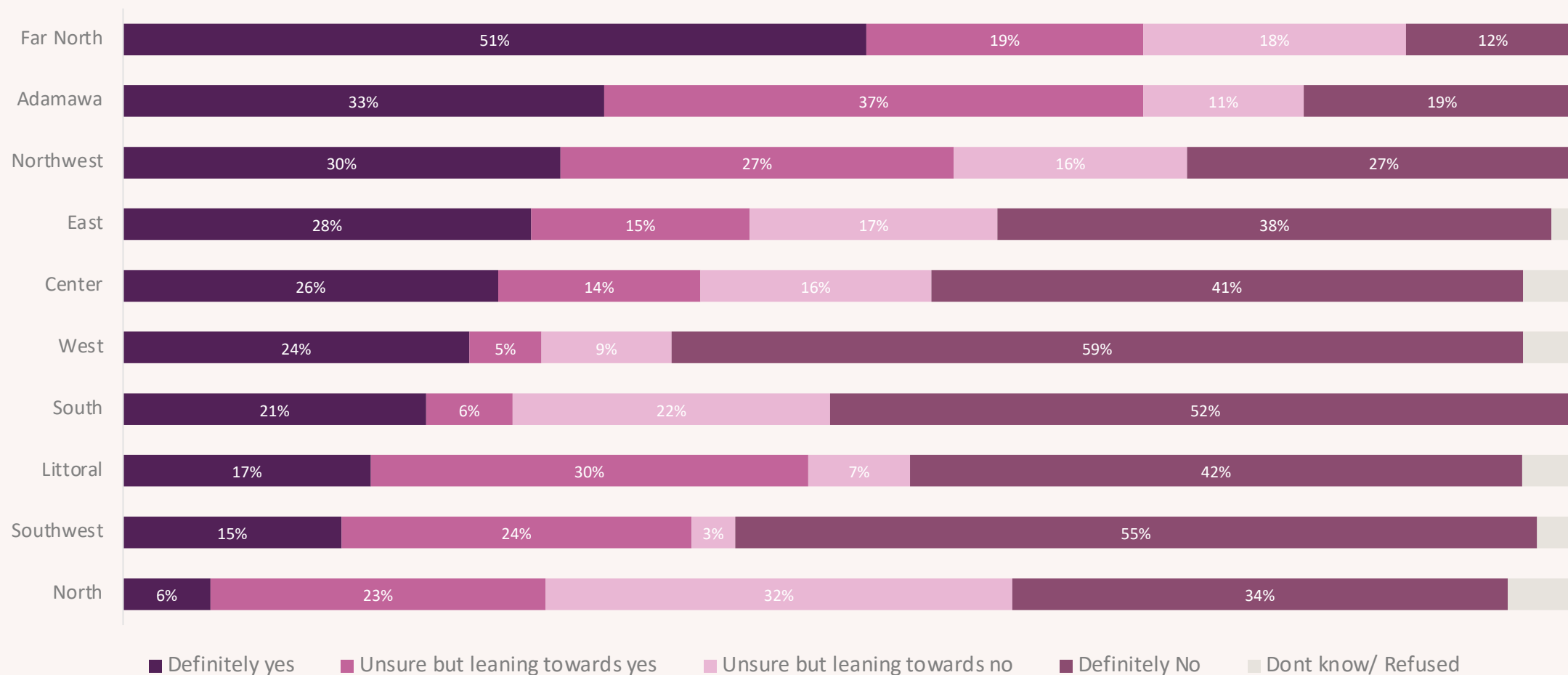
When asked how soon respondents would receive a new vaccine once approved and offered in their country, **23% say they would accept a COVID-19 vaccine as soon as it was available to them.** Half of respondents suggest they would wait at least 6 months, and 27% say they would not take it at all.

NET COVID-19 VACCINE ACCEPTANCE:



Those unvaccinated: n= 826

WOULD ACCEPT A COVID-19 VACCINE TO PROTECT THEMSELVES:



Those unvaccinated: n= 826

THE UNVACCINATED

TOP THREE REASONS FOR REFUSAL:

30%

Do not feel at risk of catching the virus

21%

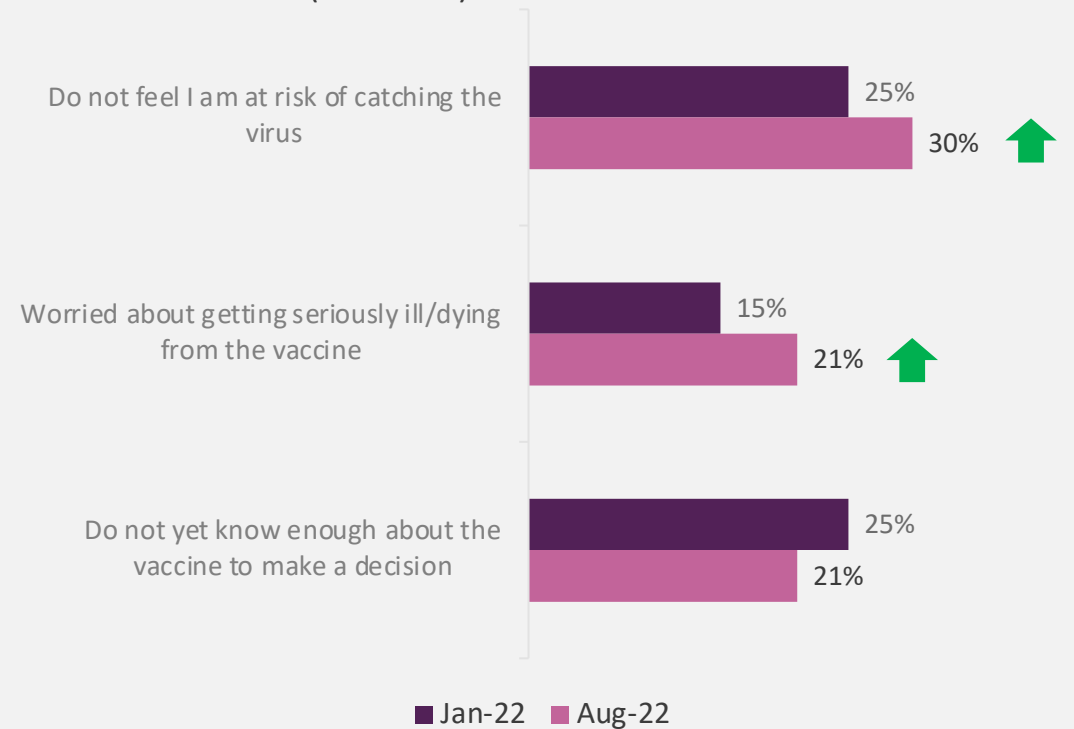
Do not know enough about the vaccine to make a decision

21%

Worries about getting seriously ill/dying from the vaccine

Since January-22, respondents in Cameroon feel at less risk of catching COVID-19, and fears of becoming unwell/dying from the vaccine have significantly increased.

Respondents are feeling more confident in their understanding of the vaccine, and there has been a significant (6%) decrease in those who do not believe the virus exists (now 10%).



Those unvaccinated: n= 826

THE UNVACCINATED

TOP THREE REASONS MOTIVATORS:

22%

If the government made a vaccine mandatory

16%

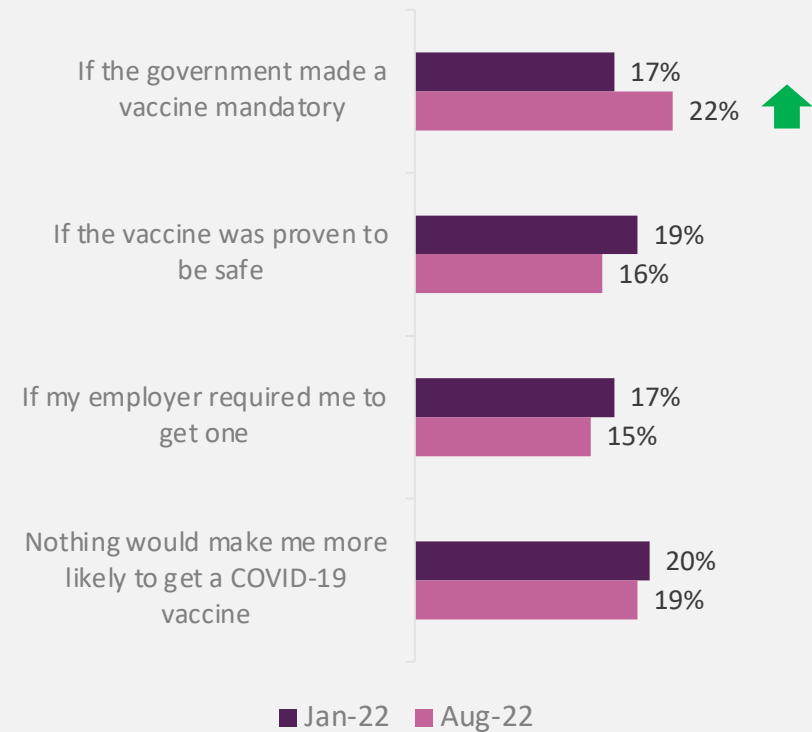
If the vaccine was proven to be safe

15%

If my employer required me to get one

Since January-22, there has been a significant increase in motivation to get vaccinated in response to a government mandate, but a decrease in those who would accept a vaccine if proven safe or required by their employer.

1 in 5 respondents maintain nothing would make them more likely to accept a COVID-19 vaccine – this is consistent across both waves of data.



Those unvaccinated: n= 826

VACCINATING CHILDREN

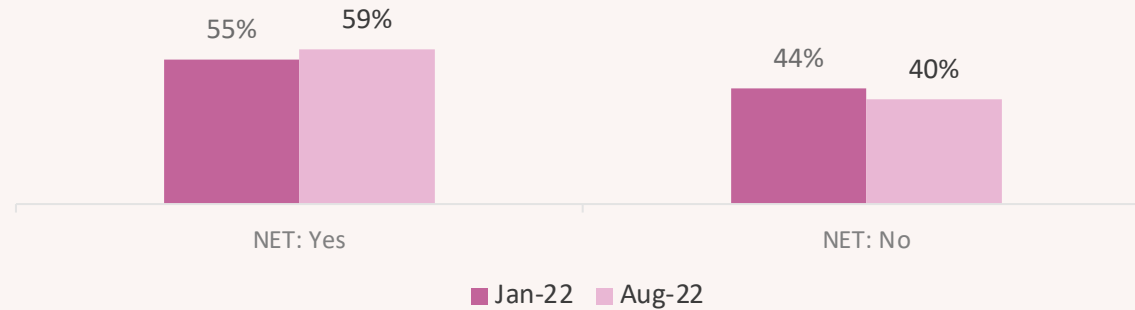
VACCINATING CHILDREN

Between January-22 and August-22, perceptions around vaccinating children have become increasingly positive.

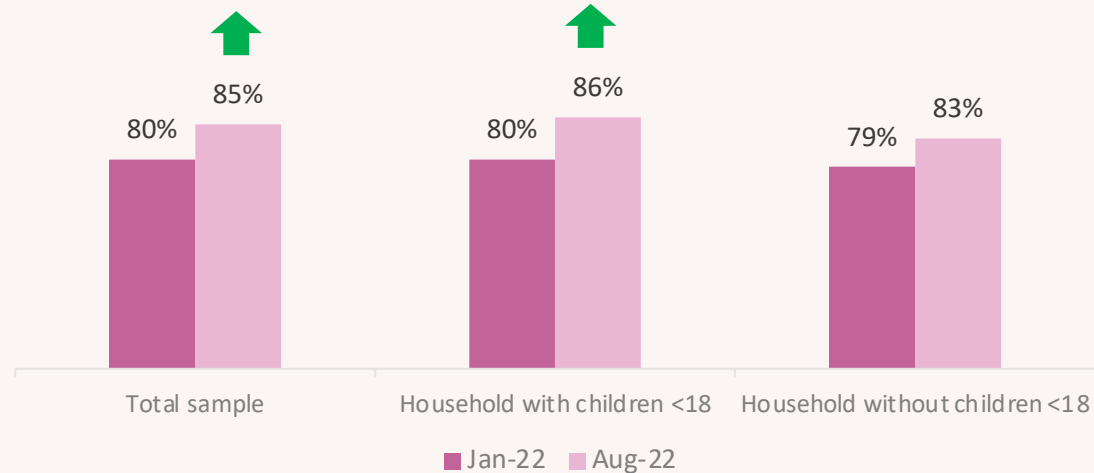
There has been a significant increase in those who agree vaccines are important for children (particularly amongst those with children under 18 living in the household). There has also been a rise in respondents who would accept a vaccine for a child in their care.

Women are significantly more likely than men to agree child vaccines are important (88% vs 81%, respective). However, more men (61%) than women (57%) say they would accept a vaccine for a child in their care. It's possible this can be explained by gender differences in who has the final say about vaccination – 41% of women report another person has the final decision vs only 25% of men.

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



NET AGREE THAT VACCINES ARE IMPORTANT FOR CHILDREN:



Those responsible for the vaccination of children: n= 397

VCI INDEX AND OTHER VACCINATIONS

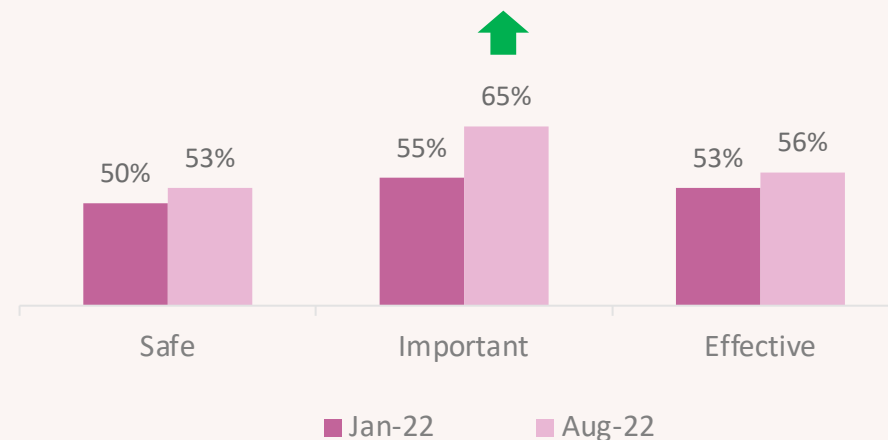
COVID-19 vaccines are far less favourable than vaccines in general for those in Cameroon.

Respondents score highly across the Vaccine Confidence Index (VCI) statements for safety, importance and effectiveness of vaccines in general. Compared with January-22, there has been a significant increase in perceived importance, while all other statements remain consistent.

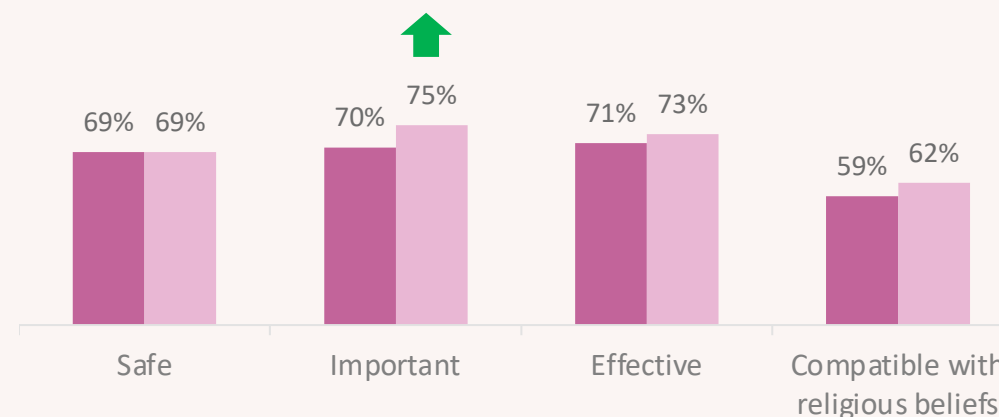
Gender differences are observable for perceived safety and effectiveness of vaccines in general, as women are more likely to believe this true.

For COVID-19 vaccines specifically, there has also been a significant increase in perceived importance. Nonetheless, this remains 10% lower than vaccines in general.

COVID-19 VACCINES:

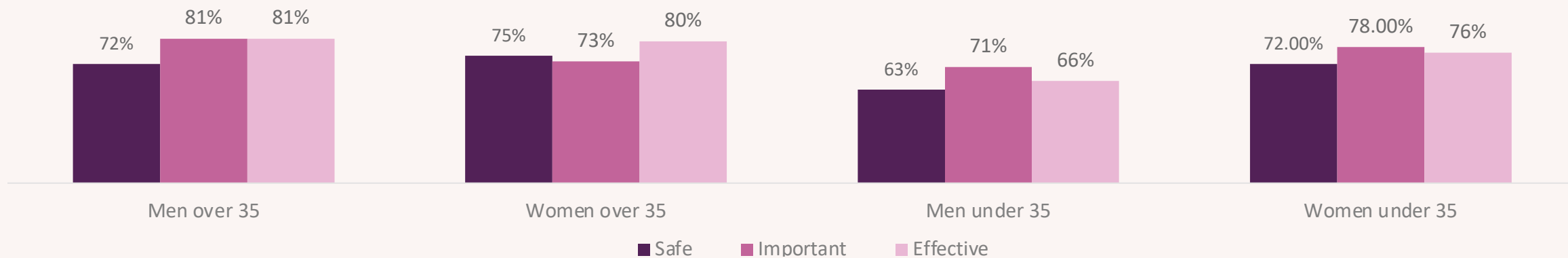


VACCINES IN GENERAL:

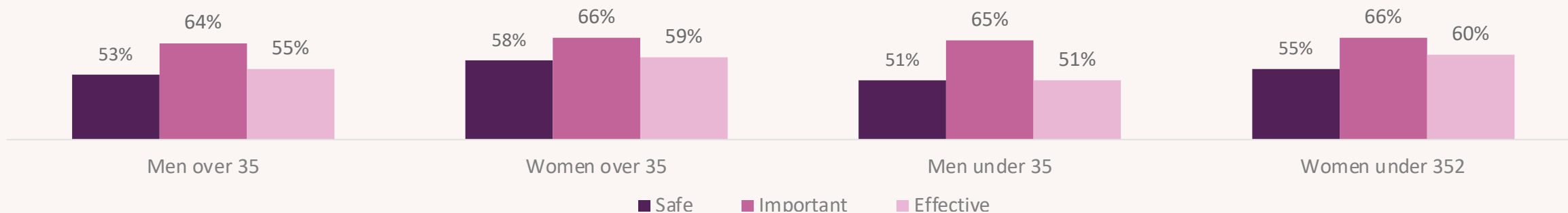


VCI INDEX: BY AGE AND GENDER

VACCINES IN GENERAL:



COVID-19 VACCINES:



All interviews: n= 1,008

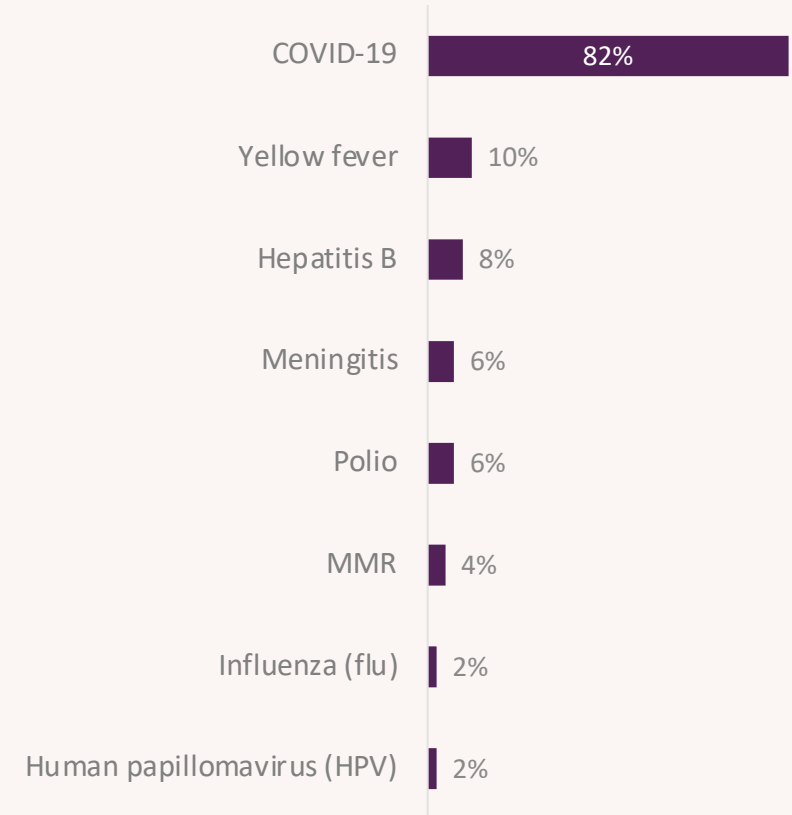
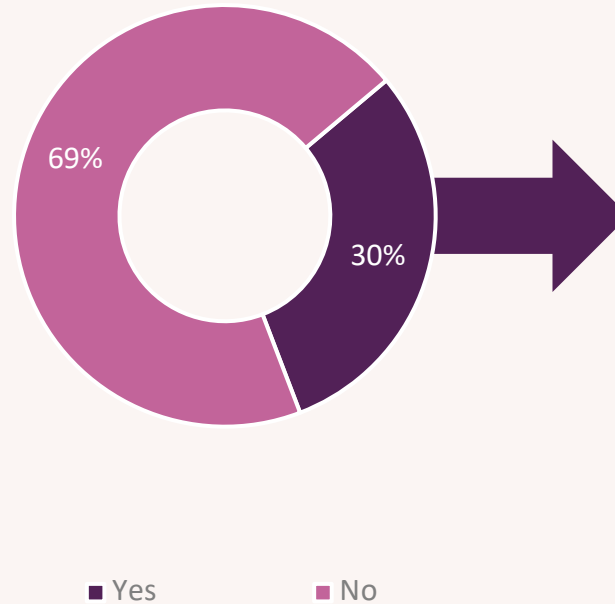
OTHER VACCINATIONS

1 in 3 respondents have rejected a vaccine before.

Amongst this group of vaccine rejectors, COVID-19 has been rejected a disproportionate amount compared with other vaccines.

Aside from COVID-19, around 1 in 10 people in Cameroon have previously rejected Yellow Fever and Hepatitis B.

REJECTION OF VACCINES:



All interviews: n= 1,008

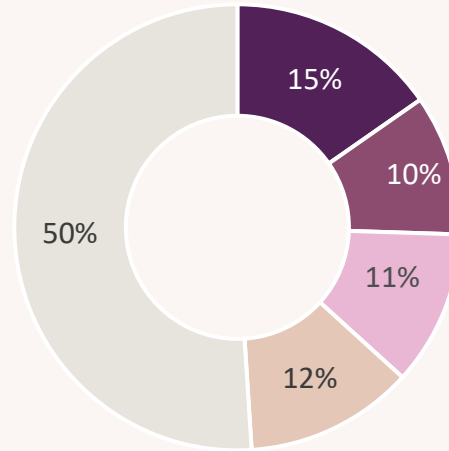
OTHER VACCINATIONS

Half of respondents report the pandemic has not resulted in a change of views towards getting vaccinated. The other half of the sample are divided, with 25% suggesting they are more likely to get vaccinated and 23% reporting they are less likely.

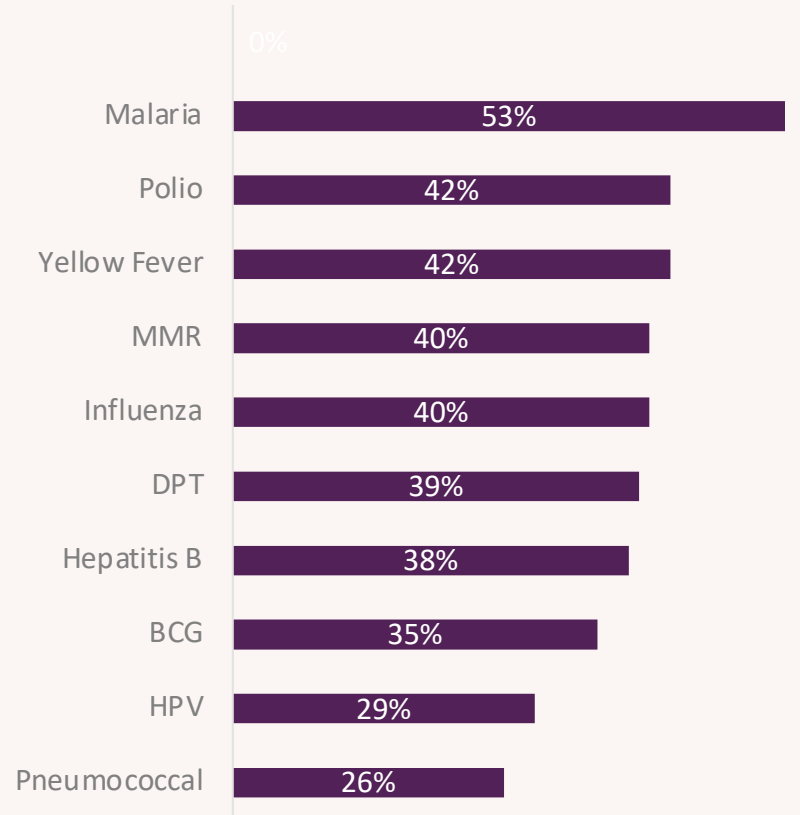
The pandemic has resulted in Cameroonians being more likely to accept a Malaria vaccine – 53% were more willing to vaccinate as a result.

When asked specifically whether respondents would accept a new Malaria vaccine, 7 in 10 said yes.

WILLINGNESS TO GET VACCINATED AS A RESULT OF THE PANDEMIC:



- A lot more likely
- Somewhat more likely
- Somewhat less likely
- A lot less likely
- There has been no change in my views to vaccines



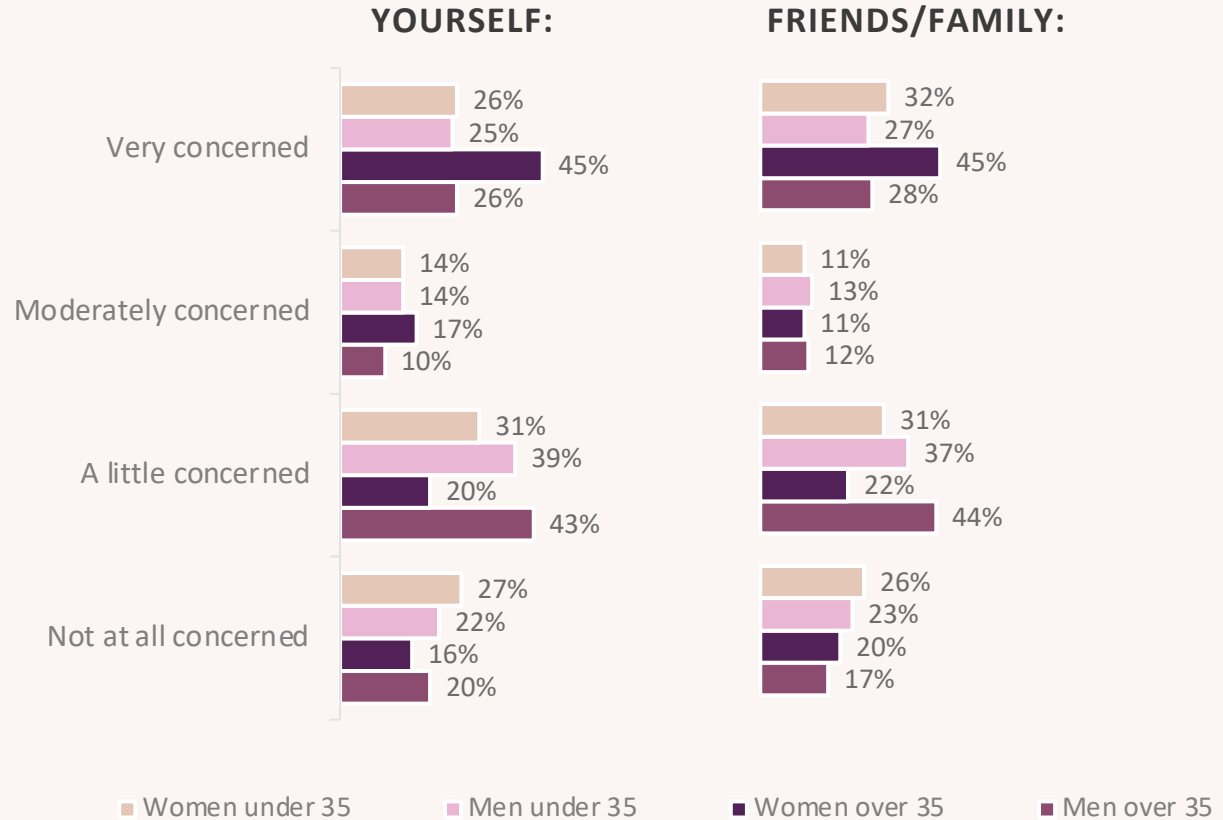
All interviews: n= 1,008

THREAT FROM COVID

PERCEIVED THREAT OF COVID-19

Women over 35 are significantly more concerned about themselves or a friend/family member contracting COVID-19 than other demographic groups. Whereas men under 35 share the least concern.

CONCERN ABOUT GETTING COVID-19 FOR...



All interviews: n= 1,008

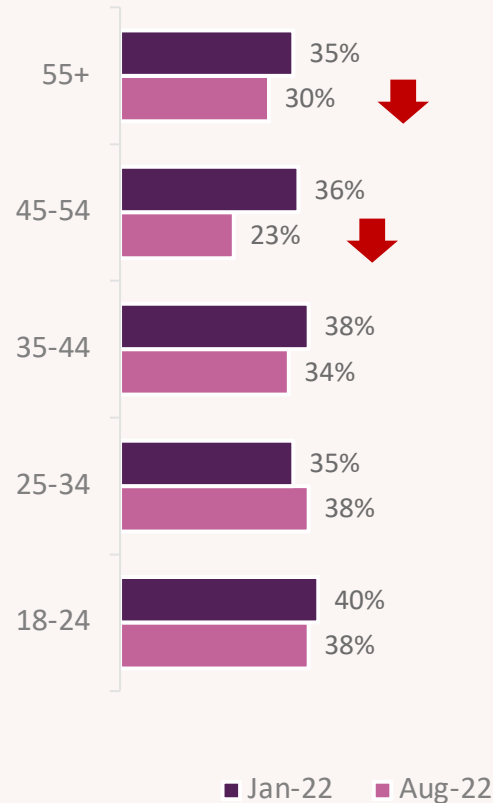
PERCEIVED THREAT OF COVID-19

Between January-22 and August-22, perceived personal threat of disease and socioeconomic issues in Cameroon has increased significantly.

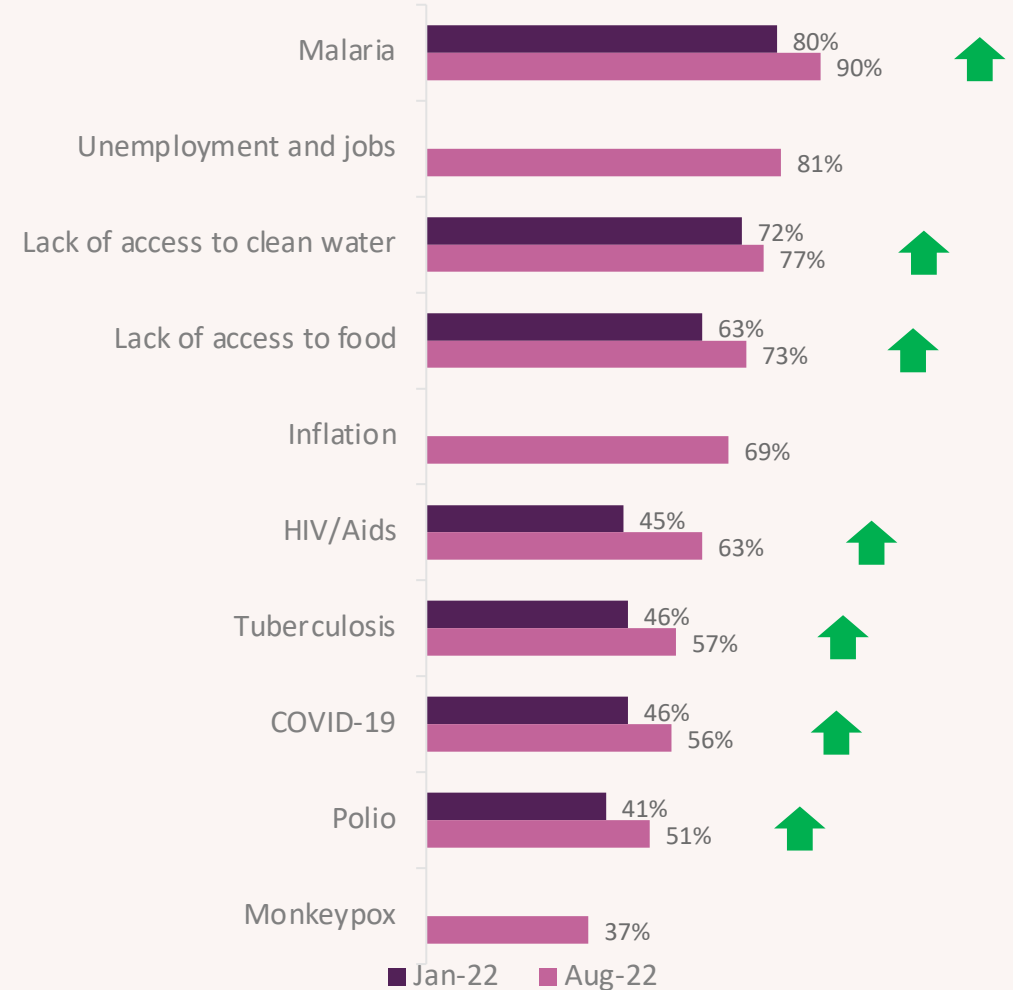
Threat from Malaria, lack of access to food, HIV/Aids, Tuberculosis, COVID-19 and Polio has gone up by at least 10% since the start of the year.

Over time, those 45+ are becoming less likely to believe the threat from COVID-19 is exaggerated. In general, men (41%) are significantly more likely to believe the seriousness of COVID-19 is exaggerated than women (32%).

NET AGREE THAT THREAT FROM COVID-19 IS EXAGGERATED:



PERSONAL THREATS:



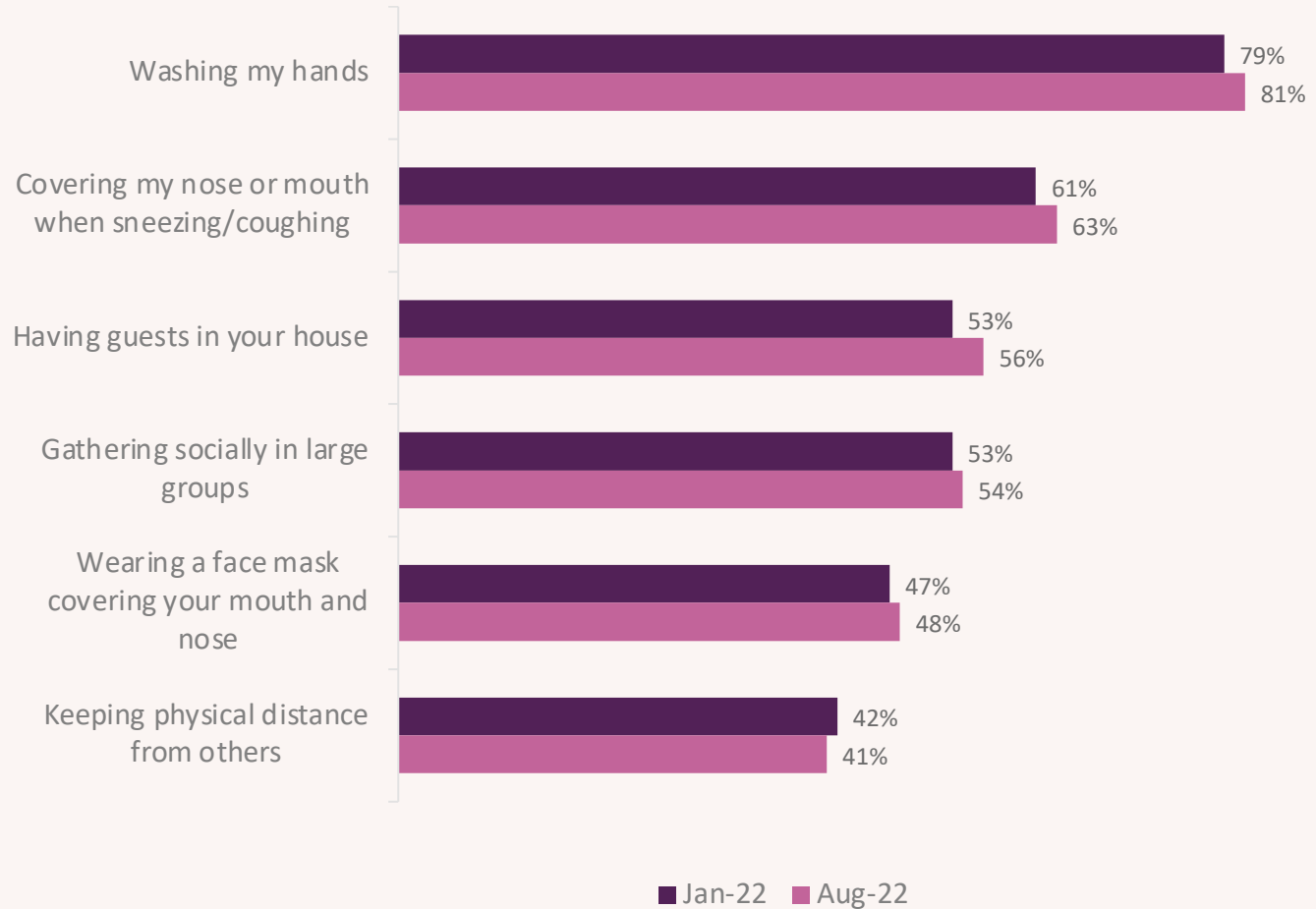
All interviews: n= 1,008

PERCEIVED THREAT OF COVID-19

Between January-22 and August-22, there has been no observable change in compliance with protective and preventative measures against COVID-19.

Following the outbreak of the pandemic, women are significantly more likely than men to comply with the measures – though there is no difference in regularity of ‘washing hands’ between genders,

COMPLIANCE WITH PROTECTIVE AND PREVENTATIVE MEASURES:



All interviews: n= 1,008

TRUST

MIS/DISINFORMATION

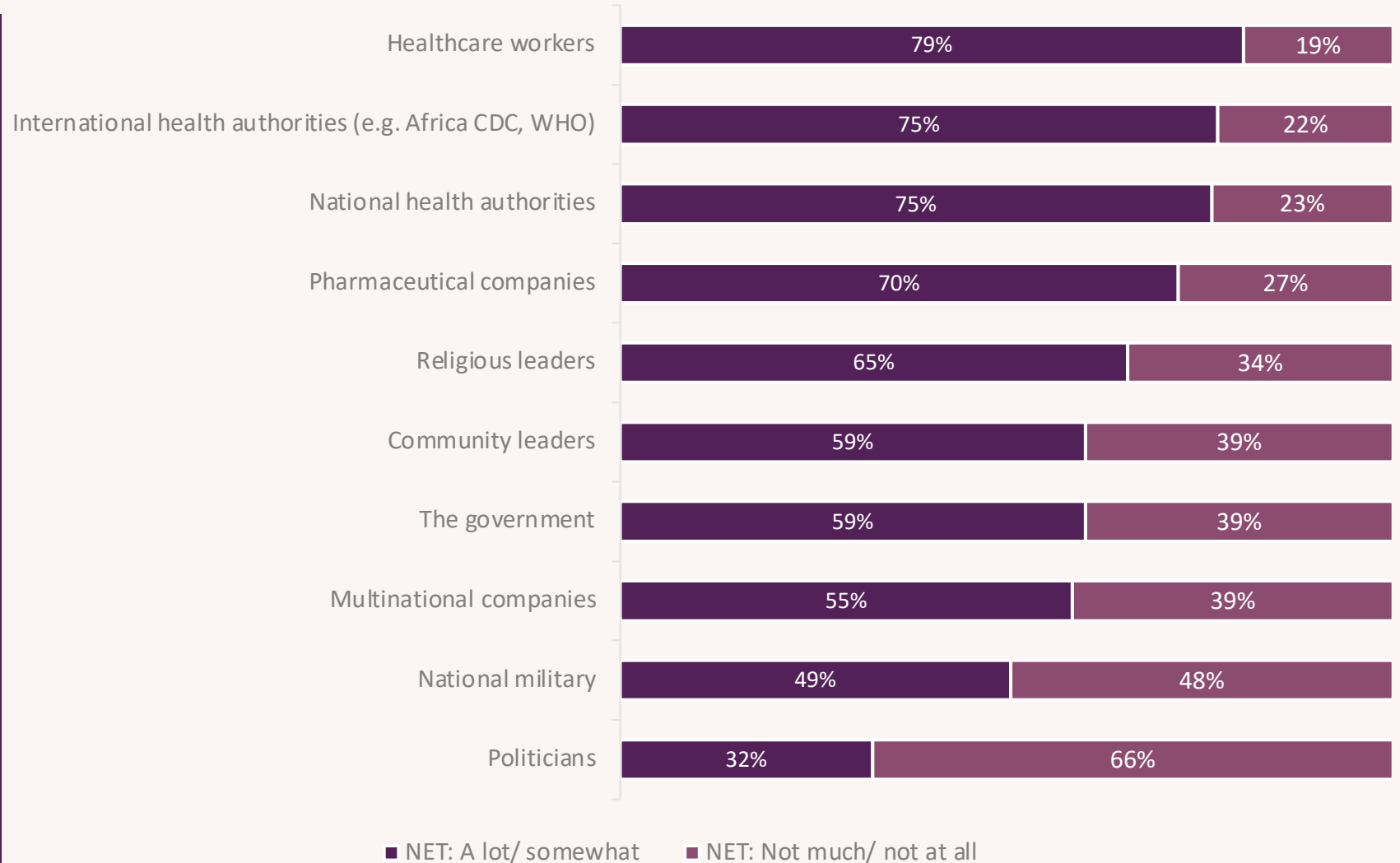
Health-related groups are the most trusted to 'do the right thing' – healthcare workers above all.

Trust in health-related groups is particularly high amongst men. At least 10% more men report health-related groups to do the right thing than women.

Only 32% believe politicians can be trusted to do the right thing, ranking this group as the least trustworthy. Trust in politicians is particularly low for women, of whom only 26% report at least some trust.

National military, the government, multinational companies and community leaders also fall short in respondents' estimation of these groups to do the right thing.

TRUST IN FOLLOWING GROUPS TO DO THE RIGHT THING:



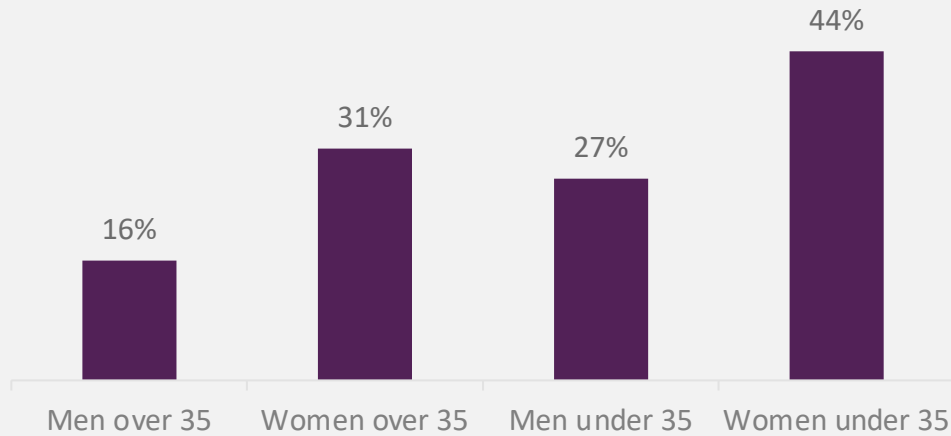
All interviews: n= 1,008

TRUSTED VOICES IN VACCINE ACCEPTANCE

The majority of Cameroonians have the final say themselves about whether they accept a COVID-19 vaccine – only 33% report another person responsible.

More women (41%) than men (25%) report someone else to have the final say on their vaccine uptake. This is particularly true of women under 35 (44%).

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



FINAL SAY ABOUT COVID-19 VACCINE UPTAKE:

67%

Myself

16%

My parents

5%

My spouse / partner

All interviews: n= 1,008

TRUSTED VOICES IN VACCINE ACCEPTANCE

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

78%

World Health Organization (WHO)

75%

Family and friends

70%

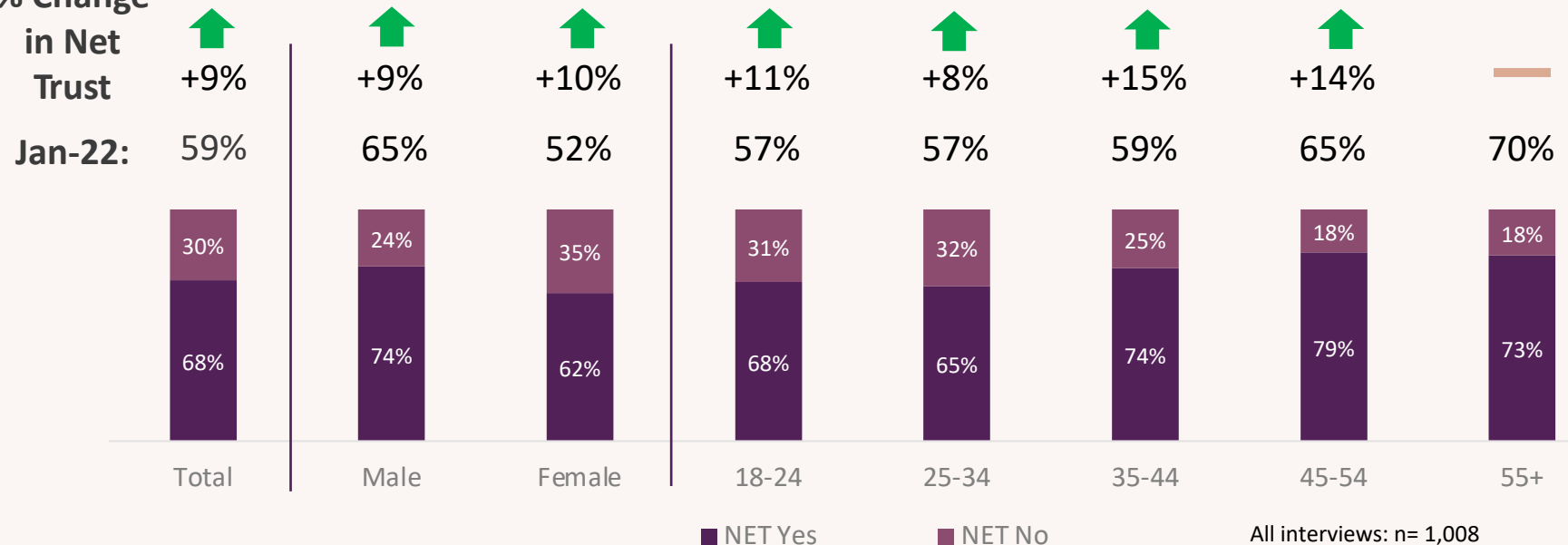
NGOs (e.g. UNICEF, MERCY CORPS etc)

Whilst the **World Health Organization (WHO)**, **family and friends** and **NGOs (e.g. UNICEF, Mercy Corps etc.)** are the most popular sources for information on COVID-19 vaccines, respondents in Cameroon rely on traditional news (48%), the internet (27%) and social media (27%) when seeking information about their general health.

Trust in healthcare providers has significantly increased across all demographic groups between January-22 and August-22, excluding the over 55s whose trust remains consistently high.

TRUST IN LOCAL HEALTHCARE PROVIDERS ADMINISTERING COVID-19 VACCINES:

% Change in Net Trust



All interviews: n= 1,008

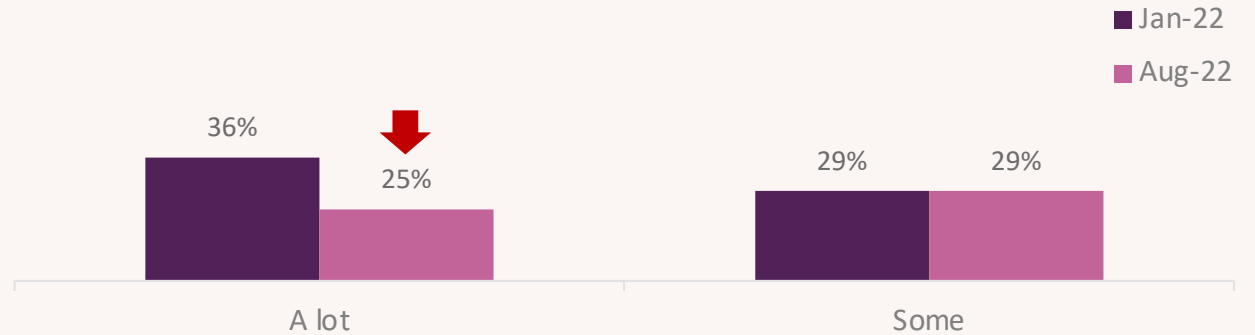
MISINFORMATION

MIS/DISINFORMATION

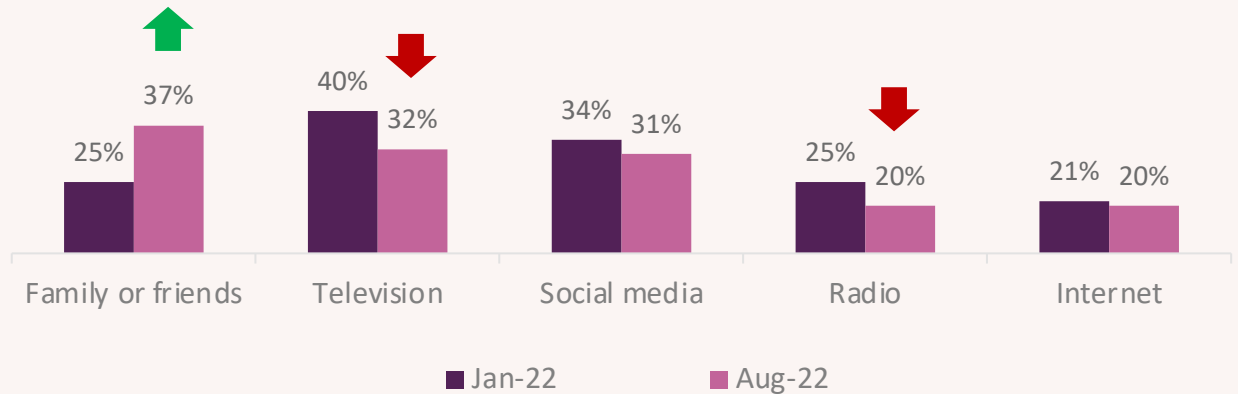
Since January-22, there has been no change in respondents reporting exposure to 'some' COVID-19 related mis/disinformation. However, 11% fewer respondents report seeing 'a lot' of information they believe to be false or made up.

There has been a significant increase (+12%) in family or friends being the source of mis/disinformation compared with January-22 data. However, false news is being reported less on television and radio.

SELF REPORTED EXPOSURE TO MIS/DISINFORMATION:



SOURCE OF MIS/DISINFORMATION:



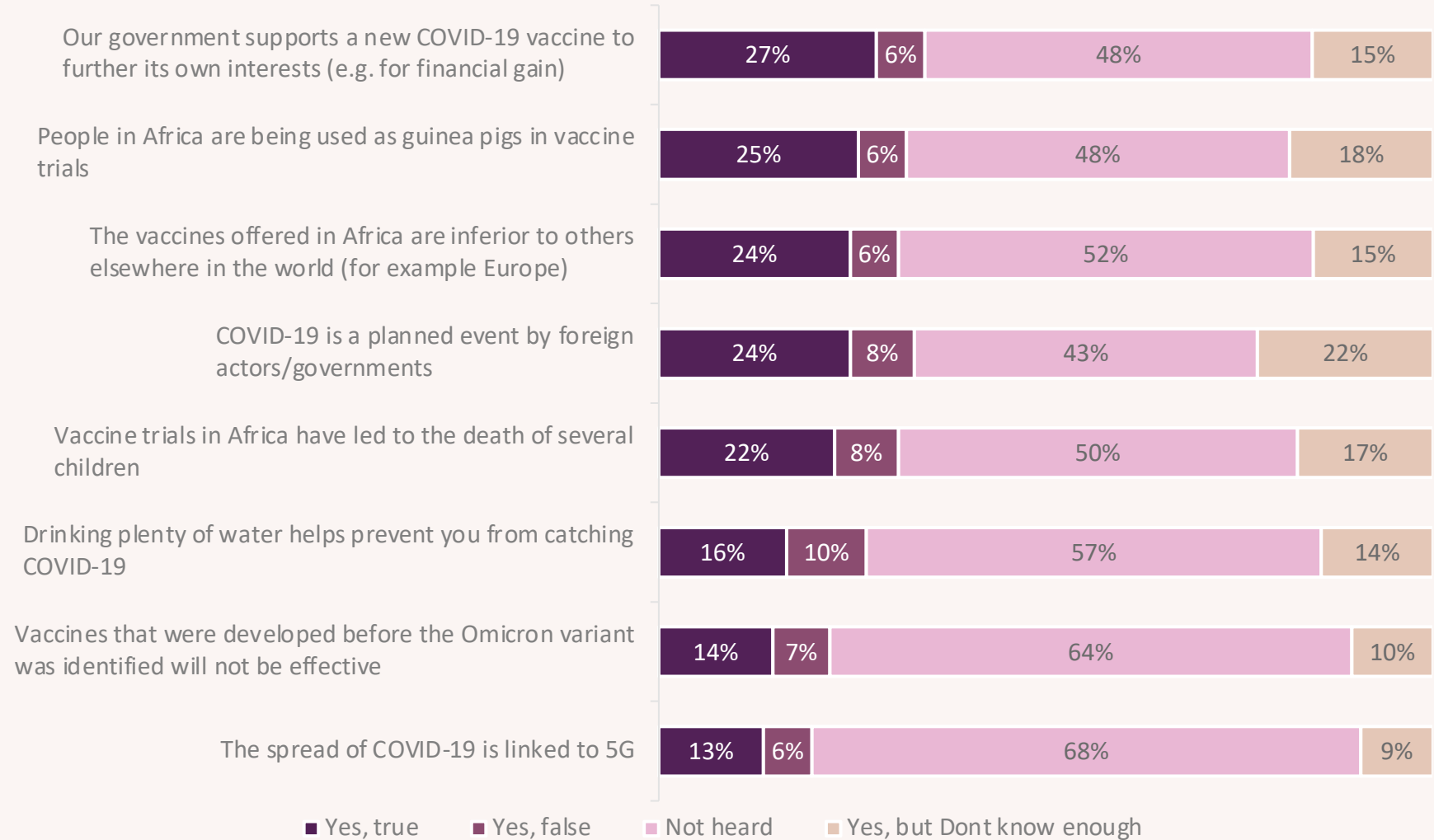
Those who have seen or heard news recently about the COVID-19 vaccine: n= 215

MIS/DISINFORMATION

27% of respondents have heard the government supports a new vaccine to further its own interests and believe this to be true. Those in the West (45%) and South (43%) regions, University educated (43%), and men under 35 (32%) are the most likely to believe this is true.

Stories that COVID-19 is linked to 5G and that vaccines developed before the Omicron variant are not effective are the least heard and believed to be true.

MIS/DISINFORMATION STORIES SEEN AND BELIEVED TO BE TRUE:



All interviews: n= 1,008

THANK YOU