AFRICA CDC WORKING GROUP SOUTH AFRICA











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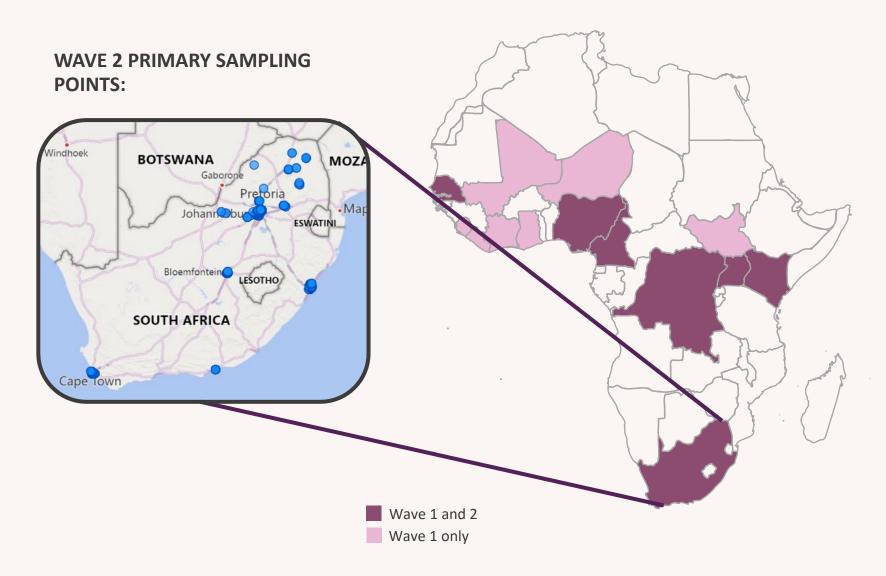
RESEARCH DESIGN

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METHODOLOGY

- 1k N=982 interviews per country; nationally representative sample
- QC Quality control checked by in-country research teams and centrally in London, UK
- Quarterly fieldwork planned for 2022
- F2F Face-to-face methodology using random household probability sampling

COUNTRIES SURVEYED:

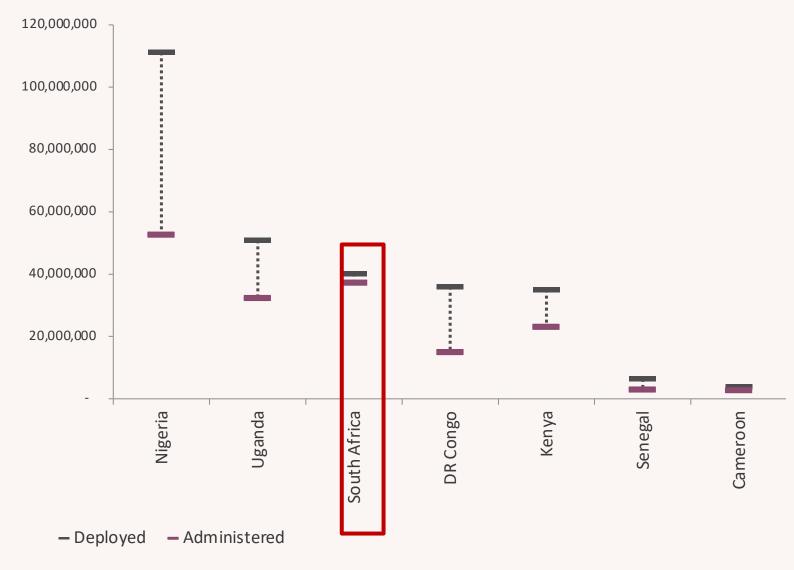








COVID-19 VACCINES DEPLOYED VS ADMINISTERED (AUGUST 2022)



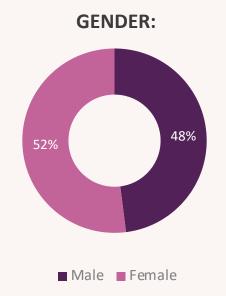




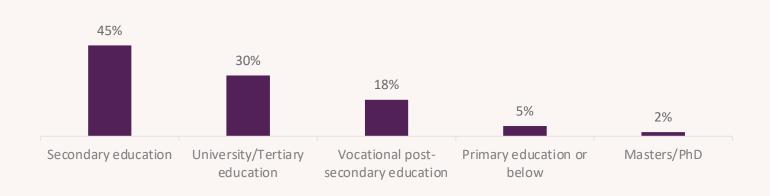


DEMOGRAPHICS

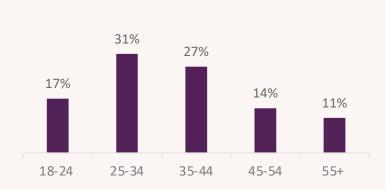
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EDUCATION:



AGE GROUP:











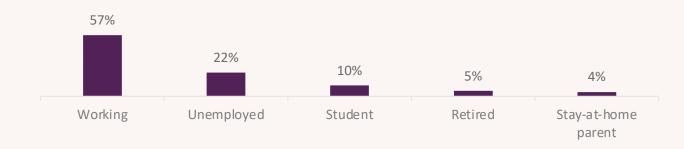
76% Urban

24% Rural

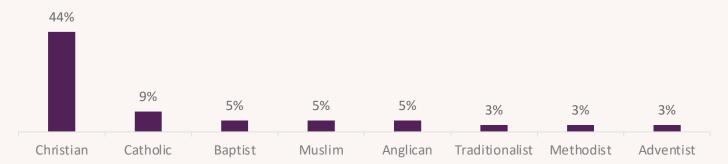
52% Have children in the household under 18

9% Healthcare workers

EMPLOYMENT STATUS:



RELIGION:



All interviews: n= 982





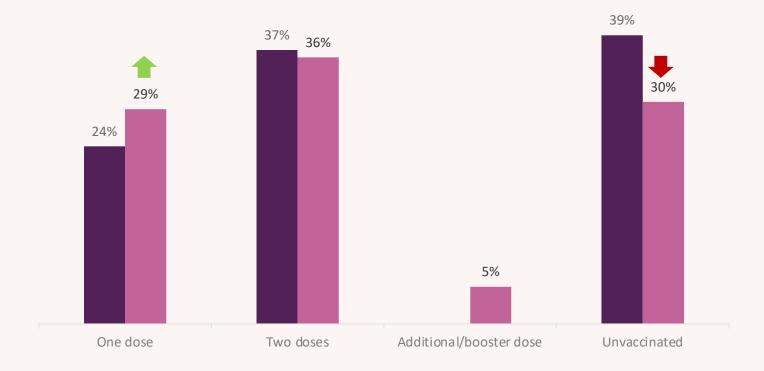


The proportion of those with one dose of the COVID-19 vaccine has increased 5% since data was last collected in January-22 – this brings the total unvaccinated population down to 30% (a 9% decrease).

The number of participants with two doses has remained consistent. Over 55's are considerably more likely to have two doses of the vaccine (56% compared to 29% of those aged 18-24).

The number of respondents with an additional third dose is only 5% - although this is one of the higher scores across the research.

COVID-19 VACCINES ADMINISTERED:



■ Jan-22 ■ Aug-22

All interviews: n= 982





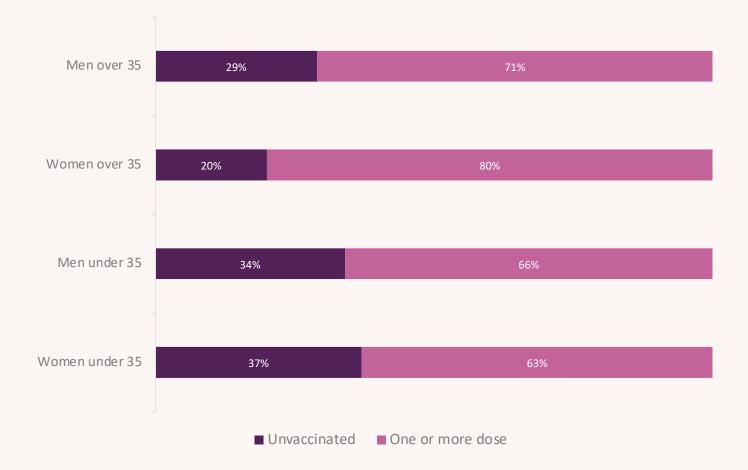


Looking at age and gender, women over 35 are the most likely to have at least one dose of the vaccine; with women under 35 being the least likely.

Stay-at-home parents and those in employment are also more likely to be vaccinated with at least one dose compared to the unemployed and students.

88% of healthcare workers have at least one dose compared to 71% of non-healthcare workers.

NET COVID-19 VACCINE ACCEPTANCE:



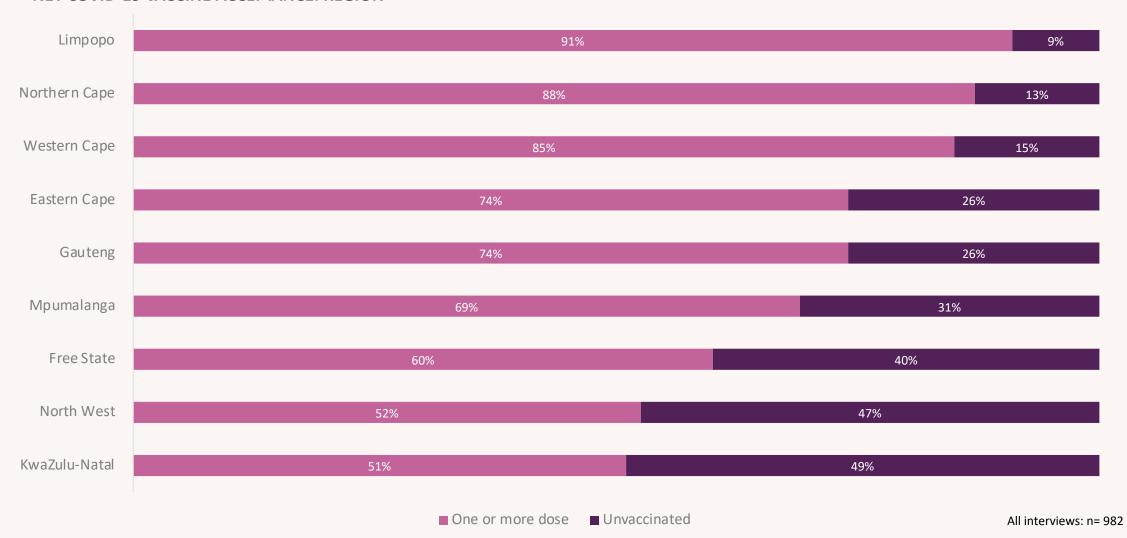
All interviews: n= 982







NET COVID-19 VACCINE ACCEPTANCE: REGION









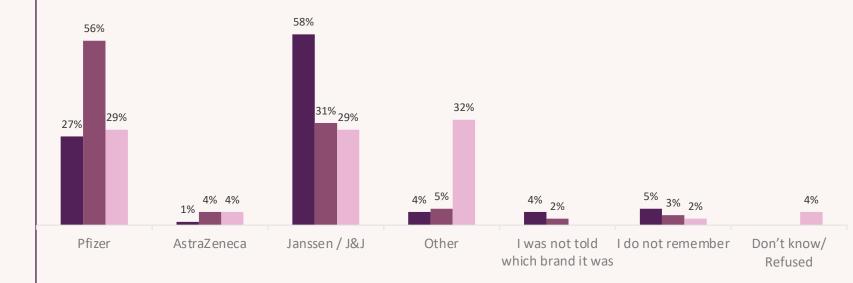
Unsurprisingly, Janssen is the most popular amongst those with just one dose of the vaccine – although 3 in 10 of the vaccinated population did receive a Janssen jab as their booster/additional dose.

Pfizer is the most popular brand for those with a second dose of the vaccine.

Whilst there is slight geographic variation with the brand of vaccines there are no stand out demographic differences.

Please note the base size of those with an additional/booster dose is small (n=51).

COVID-19 VACCINES ADMINISTERED: BY BRAND



■ First dose ■ Second dose ■ Additional/booster dose

First dose: n= 281 Second dose: n= 353

Additional/booster dose: n= 51







TOP THREE REASONS FOR GETTING VACCINATED:







89%

To protect myself

67%

To protect family

47%

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

Highest amongst:

- Women over 35 (94%)
- Non-Healthcare workers (90%)
- Those who see the pandemic response as being generally correct (91%)

Highest amongst:

- Those aged over 45 (71%) and 18-24 (75%)
- Those who agree that the pandemic has been underestimated (73%)

Highest amongst:

- Those who agree that the pandemic has been over exaggerated (57%)
- Those who report seeing at least some mis/disinformation (48%)

Those vaccinated: n= 686







ATTITUDES TOWARDS BEING VACCINATED:

86%

Relieved about being vaccinated against COVID-19

64%

Doubts/reservations at the time of getting vaccinated

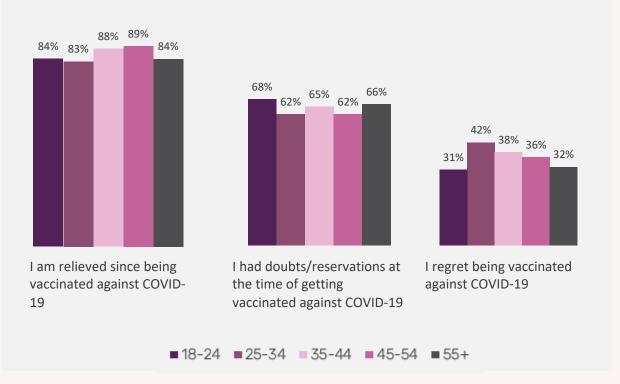
37%

Regret having been vaccinated

The youngest in society are the least likely to have feelings of regret about being vaccinated against COVID-19 – with the age group above them (25-34) being the most likely.

Relief over vaccination is steady across age groups (between 8 and 9 in 10).

There are no gender differences amongst these attitudes.



Those vaccinated: n= 686







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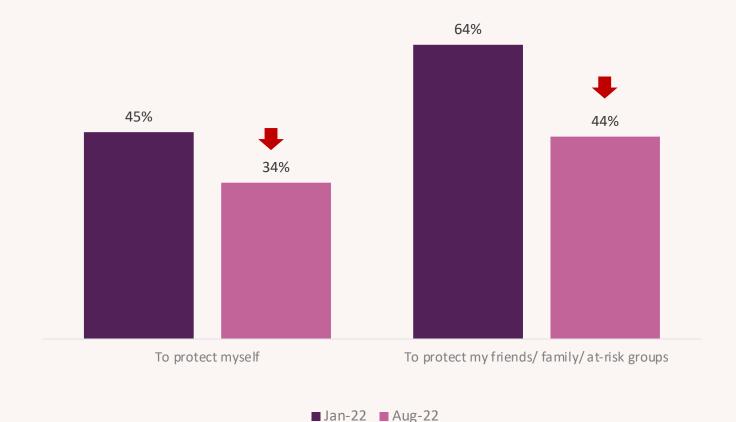
For the unvaccinated population which makes up 30% of the total sample, 34% would take a COVID-19 vaccine to protect themselves – this rises to 10% to protect others. The desire for the unvaccinated to get a jab for others opposed to themselves is consistent with the previous round of research.

The Janssen brand of vaccine has the highest level of acceptance compared to other brands when asked (18% Net acceptance compared to 8% for AstraZeneca and Pfizer).

13% of this sample agree that they would take a COVID-19 vaccine as soon as it was available to them – a further 12% would do so after 6 months.

Additional, only 58% of the unvaccinated population agree that vaccines in general are accessible to them which is significantly lower than the vaccinated population which is 90%

NET COVID-19 VACCINE ACCEPTANCE:



Those unvaccinated: n= 297







TOP THREE REASONS FOR REFUSAL:

29%

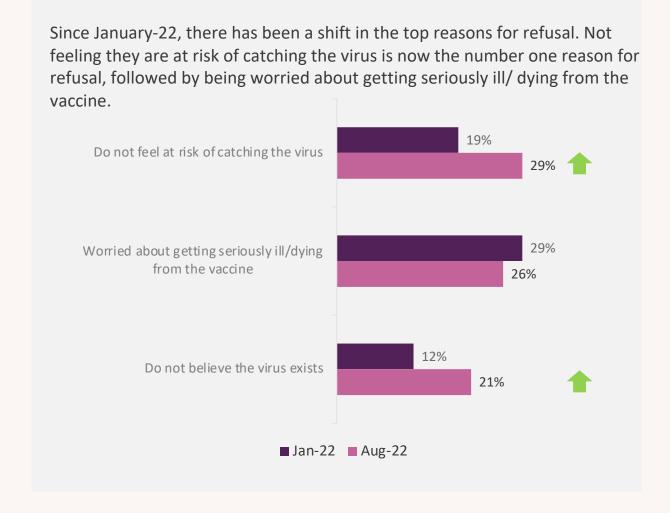
Do not feel at risk of catching the virus

26%

Worried that I will get seriously ill/die from the vaccine

21%

Do not believe the virus exists



Those unvaccinated: n= 297







TOP THREE REASONS MOTIVATORS:

23%

If the vaccine was proven safe

20%

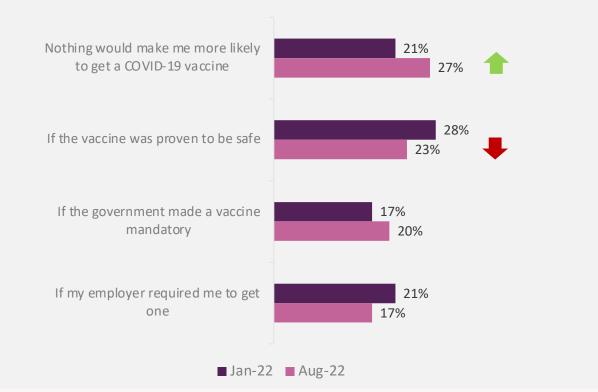
If the government made a vaccine mandatory

17%

If my employer required me to get one

Almost 3 in 10 cite that nothing would make them more likely to get a vaccine – this is 6% higher than January-22.

23% however would be persuaded if the vaccine was proven to be safe.



Those unvaccinated: n= 297







VACCINATING CHILDREN

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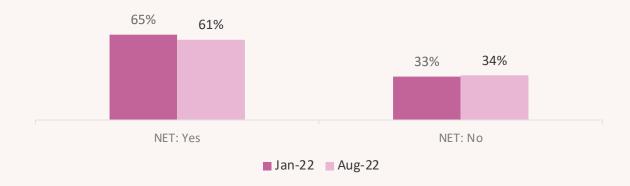
VACCINATING CHILDREN

There has been a slight drop in those responsible for the vaccination of children willing to accept a COVID-19 vaccine – however this is not significant.

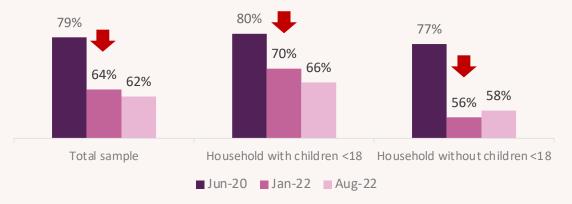
There is however a significant decrease in the 2022 data collected compared to June-20 in the proportion of those who agree that vaccines in general are important for children to have. This is true for the total sample, households with children under 18 and households without – although the drop is far more significant for those without.

Interestingly when examining the data by age and gender there is a 10% decrease between January-22 and August-22 amongst Women aged under 35; 69% vs 59%.

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= 545







VCI INDEX AND OTHER VACCINATIONS

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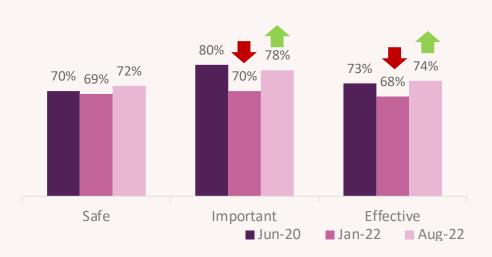
VCI INDEX

Since January-22 there has been significant increases in confidence across some measures in the VCI index – for both vaccines in general and COVID-19 specifically.

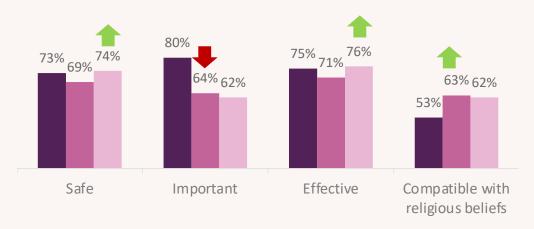
Following a decrease in January-22 from June-20 in the importance and effectiveness of the COVID-19 vaccine, data from August-22 shows a return to pre-vaccine levels. Agreement on the safety of COVID-19 vaccines has remained consistent.

Vaccines in general only saw a significant drop in the measure of importance — which is consistent across the region. August-22 data shows that remains to be the case. This implies that efforts to increase the importance of COVID-19 vaccines has not translated into other vaccines. That said scores for the safety and effectiveness of vaccines in general have all increased.

COVID-19 VACCINES:



VACCINES IN GENERAL:

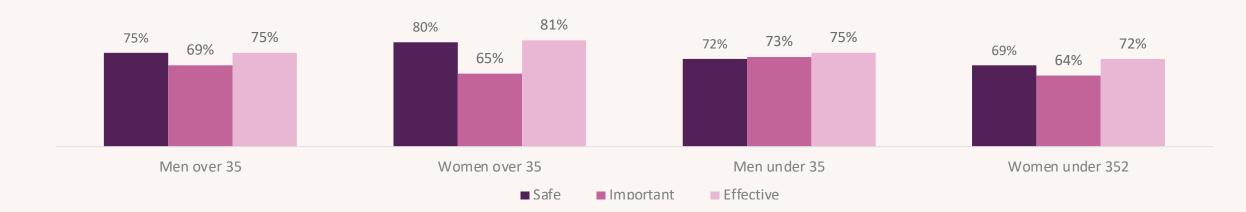




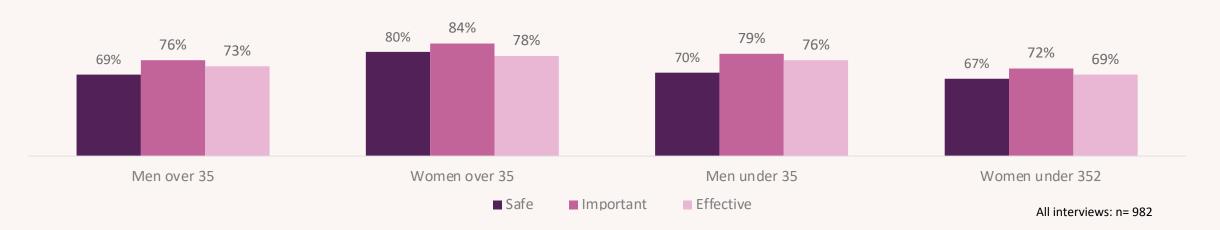


VCI INDEX: BY AGE AND GENDER

VACCINES IN GENERAL:



COVID-19 VACCINES:









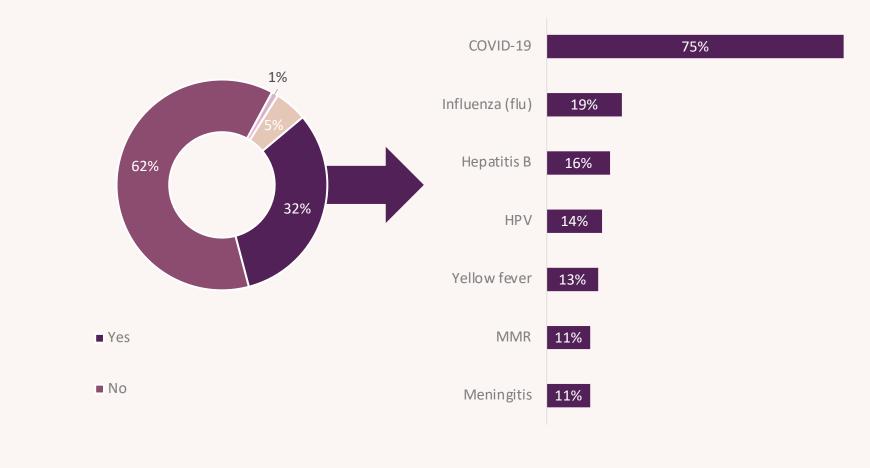
OTHER VACCINATIONS

Of the total population, 32% report having rejected a vaccine (of any type); leaving 62% who have not. Of those who have rejected a vaccine - 75% did so for COVID-19.

25-34 year olds are the most likely age group to have rejected a vaccine.

Interestingly those who report having rejected a vaccine are also more likely to agree that COVID-19 has been exaggerated and are not concerned about the threat from COVID-19.

REJECTION OF VACCINES:



All interviews: n= 982

Those who ever rejected a vaccination: n=315







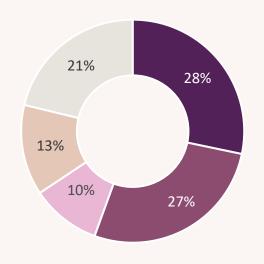
OTHER VACCINATIONS

Just over half (55%) of the total population feel they are more likely to get vaccinated as a result of the pandemic.

Respondents are most motivated to get vaccinated against the flu, followed by MMR, Malaria and Yellow fever.

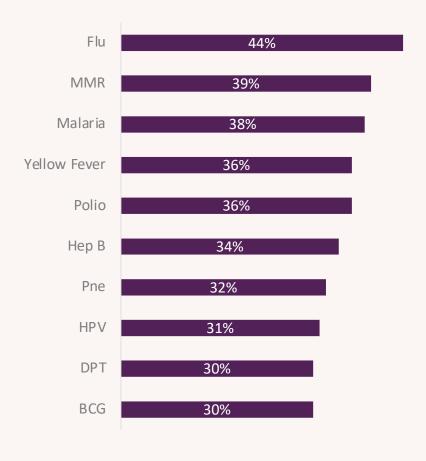
When asked specifically whether respondents would accept a new Malaria vaccine, 27% reported 'definitely yes' and a further 25% reported 'unsure leaning towards yes'.

WILLINGNESS TO GET VACCINATED AS A RESULT OF THE PANDEMIC:





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



All interviews: n= 982







THREAT FROM COVID

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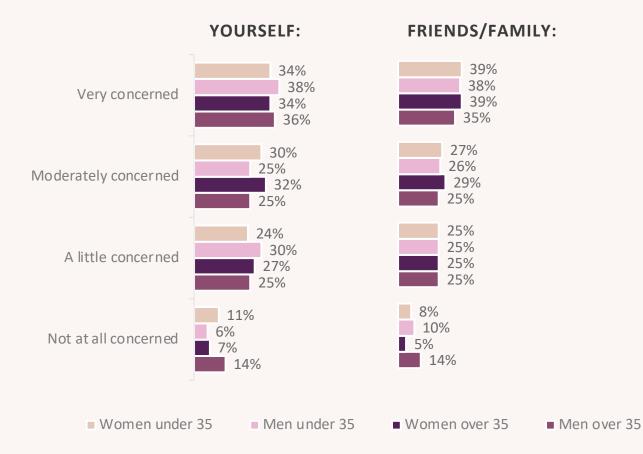
PERCEIVED THREAT OF COVID-19

Around two thirds of the total population are concerned about contracting COVID-19 themselves or their friends or family.

As seen in the charts, there isn't a significant difference between age and gender when comparing concern between contracting COVID-19 personally vs friends or family.

Groups that are most likely to be concerned over getting COVID-19 are; those who have been vaccinated against COVID-19 and those who have had experience (personally or someone they know) with falling ill from disease.

CONCERN ABOUT GETTING COVID-19 FOR...



All interviews: n= 982







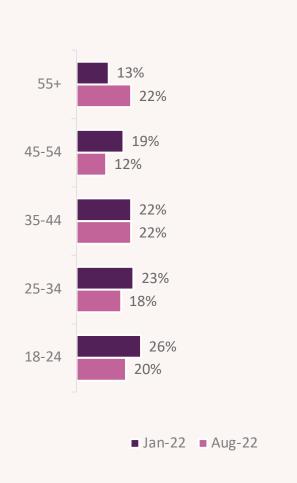
PERCEIVED THREAT OF COVID-19

Only 2 in 10 (19%) agree that the threat from COVID-19 is exaggerated – which is consistent with the January-22 data (21%).

This leaves 58% of the total sample who agree that the perceived seriousness/threat from COVID-19 has been generally correct; and 21% who see it has generally underestimated.

Two thirds of the population agree that they are at a personal threat from COVID-19; a 10% decrease from January this year. Whilst COVID-19 is dwarfed by concern over inflation and unemployment – it ranks as the highest health issue compared to HIV/AIDs, TB, Monkeypox, Malaria and Polio.

NET AGREE THAT THREAT FROM COVID-19 IS EXAGGERATED:



PERSONAL THREAT FROM COVID-



All interviews: n= 982





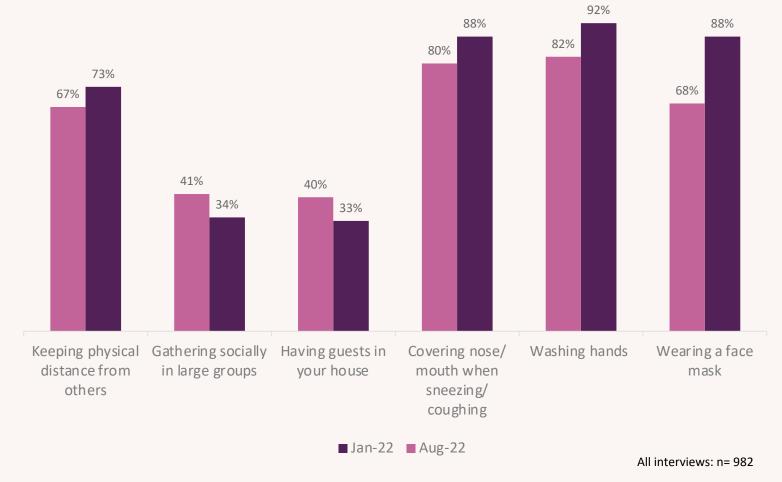


PERCEIVED THREAT OF COVID-19

South Africa continues to have high levels of compliance with protective and preventative measures against COVID-19 – around 9 in 10 report covering their nose and mouth, washing their hands and wearing a face mask more regularly as a result of the pandemic.

Women over 35 tend to comply with theses measures more than their counterparts – also the same group that are most likely to have at least one dose of the vaccine.

COMPLIANCE WITH PROTECTIVE AND PREVENTATIVE MEASURES:









TRUST

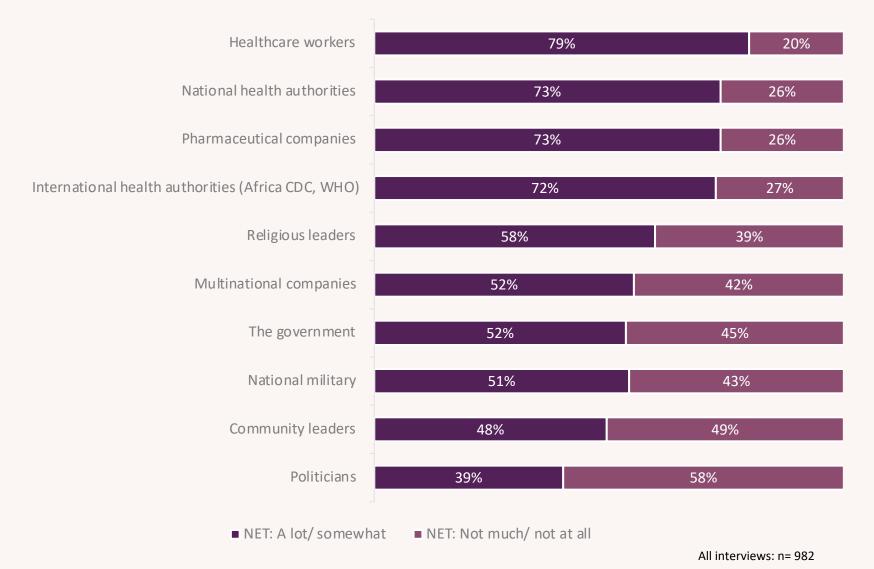
MIS/DISINFORMATION

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 rank the worst in this question – this is true across demographics.

Outside of health related groups or institutions, religious leaders rank highly.

TRUST IN FOLLOWING GROUPS TO DO THE RIGHT THING:







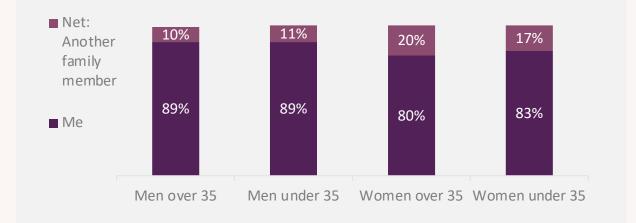


TRUSTED VOICES IN VACCINE ACCEPTANCE

85% of the total sample personally have the final say about getting vaccinated against COVID-19; leaving 5% who have a spouse/ partner weigh in and 4% their parents.

Women are more likely than men to have someone else weigh in on the final decision about getting vaccinated against COVID-19.

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



FINAL SAY ABOUT COVID-19 VACCINE UPTAKE:

85%

Myself

5%

My spouse / partner

4%

My parents

All interviews: n= 982







TRUSTED VOICES IN VACCINE ACCEPTANCE

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

81%

Family and friends

76%

Pharmaceutical companies

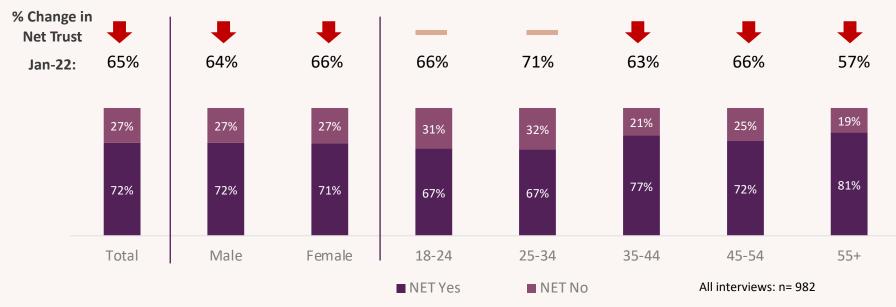
73%

World Health
Organization (WHO)

Family and friends are the most trusted source when participants seek reassurance about COVID-19 vaccines, followed by pharmaceutical companies and WHO.

Trust in healthcare providers administering COVID-19 vaccines has dropped significantly since January-22 – this is true across gender and middle to older age groups.

TRUST IN LOCAL HEALTHCARE PROVIDERS ADMINISTERING COVID-19 VACCINES:









MISINFORMATION

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MIS/DISINFORMATION

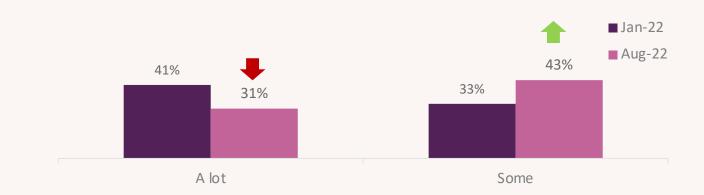
74% of the total sample self-report seeing at least some mis/disinformation about COVID-19 and the pandemic; this is exactly the same as January-22 – however there has been a drop in those who have seen 'a lot'.

Social media remains the number source for mis/disinformation – although there has been a 9% decrease since data was last collected.

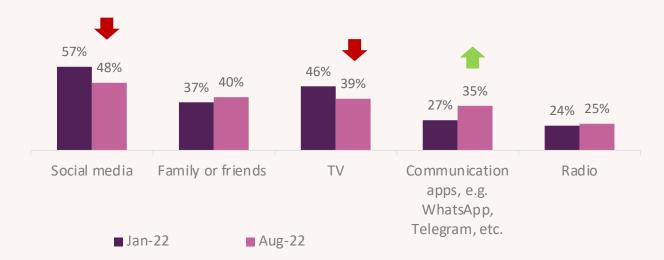
Mis/disinformation on communication apps such as a WhatsApp and Telegram has reportedly increased 8%.

64% of those who have seen or heard information about COVID-19 say they have also seen information attempting to disprove fake news — this is dropped from 72% in January-22.

SELF REPORTED EXPOSURE TO MIS/DISINFORMATION:



SOURCE OF MIS/DISINFORMATION:



Those who have seen or heard news recently about the COVID-19 vaccine: n=596







MIS/DISINFORMATION

The most common misinformation story seen and believed to be true relates to scepticism around the government supporting a new vaccine to further its own interests. This is mostly believed by those aged 18-24 and those hesitant on the VCI Index.

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

MIS/DISINFORMATION STORIES SEEN AND BELIEVED TO BE TRUE:

