

South Africa COVID-19 and Vaccine Social Listening Report – 21 September 2021, Report 19

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This is a weekly report of COVID & vaccine sentiment, rumours & misinformation in SA.

Further information giving the background to this report is given [here](#).

This week we start giving reports from health districts around the country which are given [here](#).

You may download a pdf copy of this report [here](#)

KEY TRENDS

- **Vaccine rollout progressing:** There are many celebratory social media postings of people being vaccinated, and approval that the vaccine rollout is expanding. Now 11.5 million people in SA have received at least one Covid vaccination, which is 29% of the adult population of SA (see [here](#)).
- **Social media trends stats:** Leading Covid & vaccine related Google searches from SA: “Galleria Mall vaccine mandate” (+2,500%), “Covid vaccine passport” (+1,200%), “Christian Perrone” (a French doctor who has been promoting anti-vaccine claims, +800%), “Nicki Minaj vaccine” (+650%), “Covid vaccine for children” (+500%), “how can I view my Covid vaccination status?” (+250%), “Sinovac vaccine” (+250%). News articles about Covid vaccines generated over 90,000 engagements (30% decrease from previous week). Top articles on digital news by engagement include: Unvaccinated must have limited access to malls, businesses ([here](#)); Ent-paspoorte maak deure oop ([here](#)); W-Kaapse syfers wys inentings werk teen Covid-19 ([here](#)); No deaths

in SA linked to jab ([here](#)); No vaccine, no access rules could work from November, govt hears from science advisors ([here](#)). Online conversations about Covid vaccines that generated most engagements in the past week were related to safety (20%), immunity (18%), and access (17%). Tweets about Covid & vaccines in SA generated 60,000 engagements (a 30% increase on previous week), top tweets about Covid statistics and 2,000 SA children in Sinovac trial ([here](#)).

- **Positive vaccination stories:** Convincing a prison to vaccinate ([here](#)), SAHPRA approves Pfizer vaccine for 12+ age group ([here](#)), Anti-vaxxer becomes advocate for vaccines after being on ventilator ([here](#)), dance celebrating vaccination ([here](#)), vaccination site in a bar ([here](#)), pro-vax sentiment up to 8.7% of the total 1,869 crowd-verified mentions (CABC).
- **Troubling issues around vaccination:** Africa could become fertile ground for new variants ([here](#)). Hostility to President Ramaphosa as anti-vaccination sentiment ([here](#)). reports of Brothers Fraternal church leading vaccine hostility in many SA communities. Several anti-vax protests in cities around SA last Saturday 18 September as part of a 'Worldwide Rally for Freedom', apparently the largest in Cape Town with about 600 people ([here](#)). US doctor calling vaccination "needle rape" ([here](#)). Fake vaccination cards being sold in SA. Street theatre grim reaper outside SA vaccination site ([here](#)).
- **Side effect worry.** Growing concern about vaccine side effects which is fuelling hesitancy.
- There are multiple anecdotal accounts of vaccinated people suffering serious (though not life-threatening) side effects, including swollen glands, disruption to menstrual cycles ([here](#)) and severe inflammation (e.g. Bonnie Mbuli [here](#) and [here](#)). These are not hoax "my cousin's neighbour's friend died the day after vaccination" stories. This leads to increasing dissonance between official descriptions of normal flu-like vaccine side effects and several instances of highly concerning side effects. This gap between the side effects people are told to expect and those that some experience risks legitimate mistrust in the vaccine programme and increases vaccine hesitancy.
- Some people are concerned that there seems to be no follow up and feedback on reported side effects, and claim that their reports are used for research instead of triggering a care response to the patient, e.g. "So you get the side effects, report them, then what? Nothing is done about them" ([here](#)).
- Despite a strong Adverse Events monitoring system in SA, there is a perceived lack of transparency in reporting deaths and other adverse events after vaccination which causes mistrust and vaccine hesitancy amongst people who claim that government is withholding information deliberately to mislead them to vaccinate ([here](#)). Claims that government is giving half-truths to get people to vaccinate, saying there is not enough information about people suffering or recovering from side effects ([here](#)).
- **Compulsory / mandatory / incentivised / Coerced/ 'forced' Vaccination:** Major debate which can get heated with 129 mentions this week ([here](#)). Petition against mandatory vaccination in SA ([here](#)), with 32,000 signatures. Threats of boycotting any event that requires vaccination cards ([here](#)). Business wants mandatory vaccine ([here](#)). A tweet referring to "fascist employers" ([here](#)). France suspends 3,000 anti-vax healthworkers ([here](#)). SA companies requiring staff to be vaccinated – Discovery ([here](#)) and Sasol ([here](#)). Durban judge says only vaccinated can enter courtroom ([here](#)).

Mistrust in messages disseminated by celebrities and social media influencers claiming that they are being paid to promote vaccination and are thus unreliable. Mandatory vaccination could polarize and politicize sentiment about the vaccine ([here](#)). Others questioning a TV news headline stating, “government says it will force unvaccinated civil servants and teachers to resign” ([here](#)). People anti-vaccination calling discrimination against the unvaccinated as ‘Medical apartheid’ ([here](#)).

- **Vaccine passports:** Heated debate on SA starting vaccine passports – President Ramaphosa saying vaccine passports will start soon ([here](#)). Italy enforcing vaccine passports ([here](#)). People hostile to the idea calling them a ‘dompas’ ([here](#)).
- **Children in vaccine trials:** There has been strong but mixed opinions on South Africa’s participation in the voluntary Covid vaccination trials for children, especially regarding safety concern on social media.
- **Inequitable access to vaccination.** Widespread problems with accessing vaccine sites in rural areas and informal settlements, with specific reports from Limpopo, Eastern Cape and North West. Inequality has also been a key factor in the recent drop of vaccine uptake (see [here](#) and survey results [here](#)).
- **Vaccine hesitancy and information.** Widespread social media discussion of vaccine hesitant people choosing to wait for others they know to vaccinate first to see what happens to them. Concerns that one vaccine is better than another (most consider J&J is better, though in other areas Pfizer is preferred), with uncertainty why different vaccines are given to particular geographies or professions.
 - **Barriers to vaccination for older people.** Several reports of difficulties for people over 60 getting vaccinated: elderly relying on relatives who are against vaccination for transport to sites; some don’t have their ID documents as other family members use them to collect SASSA grants.
- **Major access challenges.** Many sites are not open on weekends (making it difficult for working people, especially where employers do not give time off); transport problems in both time and money.
- **Authoritarianism concerns:** C19 People’s Coalition warns of this in SA’s Covid response ([here](#)).
- **IEC fogging:** Concern that the Independent Electoral Commission (IEC) is using disinfectant foggers at all 23,000 polling stations. These are unnecessary, wastefully expensive and create confusion around non-pharmaceutical interventions (see [here](#) and [here](#)). Ventilation is critical but fogging is not effective.
- **Covid & blood:** Some patients are requesting blood transfusions only from unvaccinated people ([here](#)). Some anti-vax people don’t like being called that, and want to be called “pure bloods”! ([here](#), that is the ‘racist’ term for high-class Wizarding families from the Harry Potter books – don’t they know Slytherin are the bad guys?).

LOCAL / DISTRICT / PROVINCIAL ISSUES

This new section summarises social listening from areas around the country. For more information on reports from 13 health districts, see [here](#).

- Many reports of transport being required for the elderly in **KwaZulu Natal**.
- Great hostility to vaccination among youth is the main issue in **King Cetshwayo** district (KZN), with reports that “children jump out of windows and run out of school when they see a health team visiting the school”. Also in this district, some over 60s are afraid to vaccinate as they are taking chronic treatment and think the vaccine could kill them.
- Many people are not vaccinating due to fear of needles in **Buffalo City** district (Eastern Cape). In the same district, some who received the first vaccination do not want to go and receive the second jab due to side effects (real or feared).
- Health communicators have succeeded in getting weekly slots on three local radio stations in **Ekurhuleni** district (Gauteng), including informing the public of when & where pop-up sites will be. In this district there should be a meeting with the council of churches so we pastors could support the vaccination programme. They are important influencers and often are hostile to vaccination.
- Reports from personnel of a UN vaccination truck that there are high levels of concerns about vaccine side effects in the provinces they visited **Gauteng, KwaZulu Natal, Eastern Cape** and **North West**.
- The largest source of anti-vaccination misinformation is the religious group ‘Brothers fraternal’ which is also active in **Namaqua** district (Northern Cape) and several other health districts.
- In the **Garden Route** district (Western Cape) there are big social and political gatherings during the local election campaign which could become super-spreader events. Some homeless people, people addicted to drugs and unemployed youth don’t care about vaccination.
- In **Bojanala Platinum** district (North West), the visit by Deputy President David Mabuza to vaccination sites led to a great increase in the numbers coming for vaccination.
- Practical barriers of having to walk long distances to the vaccination centres, especially in **Limpopo, Eastern Cape, North West** and **Northern Cape**.
- Many reports of confusion about why people should vaccinate if they should still wear a mask and could contract COVID-19, especially in **Gauteng, Western Cape** and **KwaZulu Natal**.

MISINFORMATION

- **MISINFO:** ~~China is using our children for an experiment and not their own.~~ **TRUTH:** It is a clinical trial, and South Africa is one site of many around the world, and it has already been trailed in China (see [here](#) and [here](#)). China has actually vaccinated over 1 billion people ([here](#)).
- **MISINFO:** ~~The government, main stream media are all pushing an anti-science forced vaccine agenda.~~ **TRUTH:** Government is trying to get as many people vaccinated as possible for evidence-based public health reasons. The target is to vaccinate 28 million adults by December which could save an

estimated 20,000 lives in SA ([here](#)). There is no evidence that main-stream media are pushing a forced vaccine agenda ([here](#)).

- **MISINFO:** ~~Natural immunity is better than immunity from the vaccine.~~ **TRUTH:** For most people, vaccination against Covid will induce more effective and longer lasting immunity than that induced by natural infection (see [here](#) and [here](#)).
- **MISINFO:** ~~Serious side effects and deaths caused by the vaccine are hidden by the government.~~ **TRUTH:** Government and the [NICD](#) encourage reporting of adverse effects ([here](#)) by calling the Covid hotline (0800 029 999), and figures are released by the SA Health Products Regulator ([here](#)). All serious illness and death after vaccinations are examined to determine if they are caused by vaccination, and so far there have been no deaths caused by vaccination in SA ([here](#)), though tragically there have been a few worldwide. However, there is under-reporting of side-effects – everyone who experiences a serious side-effect after vaccination is strongly encouraged to report it.

MORE ACTIONS FOR RISK COMMUNICATION AND COMMUNITY ENGAGEMENT

- **Continue to manage expectations of possible side effects**, underlining the overall safety of vaccines, providing information on how to report adverse events, and publicise statistics to be transparent and build trust. Reduce dissonance between side effects communicated and actual experience of side effects – acknowledge adverse events, how to manage them, the low numbers of severe reactions in SA and zero deaths from vaccines in the country (after over 14 million doses).
- Produce content that **clarifies that walk-ins** are allowed, as failure to get an SMS from EVDS or inability to register remains a barrier to vaccine access and generates calls to the callcentre. Sends SMS on this to all people registered on EVDS who have not yet been vaccinated.
- Continue and expand the dissemination of amplify **personal stories** showcasing vaccine hesitant people who have chosen to get vaccinated. They are often more influential than statistics and warnings. Emphasize **hopeful messages** highlighting vaccines are crucial ending the pandemic. Share solidarity messages around protective measure and safe behaviours, such as the ones circulated by the UN's Zwakala "I do it for you" campaign ([here](#)).
- **Produce content for journalists** on Adverse Events Following Immunization (AEFI) reporting and best practices, including using non-scientific language that is clear and understandable. Run training courses for journalists and editors of news media.
- Communicate clearly around the relationship between **vaccines and the menstrual cycle** – include answers that address misinformation and address genuine concern in FAQ documents, call center scripts, and the public Covid WhatsApp chatbots.
- Put effort into encouraging **trusted local organisations** to support the vaccination rollout.

ISSUES RAISED FOR FOLLOW-UP

- Suggest creating a stronger link between vaccine side effect reporting and providing care and support to people suffering side effects. This could be through callcentre responses to people reporting side effects being referred to care, with follow up care calls to people in difficulty so reporting has a benefit to the patient as well as data collection. Clarify the role of medical personnel: do they have an obligation to report patients' experience of side effects as many individuals will not report themselves?
- Consider requiring health staff to lead discussions on post-vaccine health management during the 15-minute waiting period including reminding people to comply with post vaccine advice (it happens now in some vaccine sites, in others not).
- There have been requests for more pre-screening at the vaccination sites for people with underlying conditions.
- Point for consideration: Is the health system at risk of repeating a mistake from the initial response to HIV? A huge effort is rightly going into one health issue, the Covid pandemic. However, this is a 'vertical programme' that could be taking resources away from other health priorities, with opportunities being missed, e.g. when testing for Covid could we also test for TB and diabetes? The millions of people coming to vaccinate could be given public health advice promoting self-care and screened for other conditions. Some vaccination sites test for blood pressure and sugar levels now, but most don't.

METHODOLOGY AND COLLABORATION

The Social Listening & Infodemiology team that produces this report is part of the Risk Communications & Community Engagement Working Group of the Department of Health. This report is compiled following the methodology of the WHO Africa Infodemic Response Alliance (AIRA, see [here](#)), the "Identify" stage. We pool information from the following:

- **SA National Department of Health**
- **Covid Hotline:** Reports from the national Covid call centre
- **Org:** NDOH Covid WhatsApp system
- **WHO** Africa Infodemic Response Alliance (AIRA)
- **UNICEF:** digital analysis of content on Google, Twitter, YouTube and Facebook, and digital news
- **Red Cross:** Network of over 2,000 community volunteers reporting misinformation and concerns
- **Real 411** Media Monitoring Africa: a mis- and disinformation reporting and debunking initiative
- **COVID Comms:** a network of communications specialists that produces information on the pandemic

- **DOH Free State & KZN:** Provincial Departments of Health
- **Community Constituency Front (CCF), People’s Vaccine Campaign**
- **Centre for Communication Impact, Centre for Analytics & Behavioural Change, HealthEnabled**
- **Medical Research Council, National Institute for Communicable Diseases, Right To Care,**
- **SA Vaccination and Immunisation Centre, Health Systems Trust, HSRC, IPSOS**
- **Universities of Johannesburg, Cape Town, Free State, Wits, Stellenbosch, Sefako Makgatho**

Other organisations involved: Government Communications & Information Service, SA Council of Churches, Clinton Health Access Initiative, Heartlines, Children’s Radio Foundation, DG Murray Trust, People’s Health Movement, Business for SA, SA Minerals Council, Wits Reproductive Health & HIV Institute, UN Verified, Section 27, Deaf SA, SA National Council for the Blind, Treatment Action Campaign and Disability SA.

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