

## South Africa Covid-19 & vaccines Social Listening Report 17 July 2023, Report 87

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This is the weekly RCCE Social Listening and Infodemic Management trends report on COVID-19 vaccine and other health emergencies tracking and responding to public concerns, sentiments, rumours, and misinformation in South Africa. It provides key trends and analysis of online and offline content. Thanks to all contributors to this weekly report.

### KEY TRENDS | COVID-19

**Vaccine hesitancy.** Although it is well known that false information about COVID-19 vaccines causes vaccine hesitancy, the most recent findings that assess the extent of the harm reveal that “*at least one of eight different false statements about COVID-19 is believed to be true or is unsure if it is true or false*” with a focus on the attitudes and beliefs that influence patient behaviour in order to create messages that support positive health outcomes during public health emergencies. ([Here](#))

**COVID-19 transmission.** In this week’s news, children have been reported to have infected more people in their household with COVID-19, because schools pose a risk. “*70% of household transmissions were found to have started with a child*” ([Here](#)) and “*concern of teachers for their health is justified because 24% of teachers are at risk for severe COVID-19*”. ([Here](#))

**Vaccines administered.** The news of the 39 million doses of COVID-19 administered has been well received, with people commending the department for a “job well done” and offering more uplifting remarks from those who required boosters and a second dose; “*where can I get the second Pfizer dose?*”, “*My son took Pfizer for his first dose, can he get another type of vaccination?*” ([Here](#))

Some people were negative comments about vaccines that the “*government is playing games*”, trying to get them to take vaccines when COVID-19 “*was gone*”. Others are more concerned about flu which they linked to H1N1 and Omicron. ([Here](#))

**Susceptible to misinformation.** People who spend more time online were said to be more susceptible to misinformation since it is harder for them to tell the difference between authentic and fake news headlines ([Here](#)) According to the WHO, when high quality health information is not available and questions and concerns go unaddressed, low quality health information or misinformation can quickly spread across communities and impact people’s health decisions, ([Here](#)) posing an ongoing challenge to finding trusted information. ([Here](#)) Six steps for the analysis of misinformation were suggested to improve messaging ([Here](#)).

**Unchecked misinformation.** Misinformation about everything from elections, fraud, outbreaks to COVID-19 vaccines is reaching million people through Generation A1 good at churning lies, false and unproven claims. Analysts say people seek out shows that reaffirm their own beliefs. But the conversational format also helps enable the spread of rampant misinformation. “*There’s something inherent to the relationship between a host and the audience that lends this level of credibility, this level of trust.*” ([Here](#))

**Vaccine hesitancy increasing among pregnant women.** The vaccine acceptance rate among pregnant women attending government health care facilities is concerning. Fear of side effects for baby and mother by this target group following vaccination and family pressure were said to be the prime reasons for vaccine hesitancy and rampant misinformation. ([Here](#))

Renewed discussions about respiratory viral infections are generating increased interest across various platforms. COVID-19 may have increase TB incidents, long COVID, and post-TB lung disease which has become rampant in South Africa. ([Here](#)) Some people wanted to know if “*anyone know if there has been an increase in the incidence of TB associated with the cv shots?*” ([Here](#))

The type of information people sought revealed the knowledge gaps surrounding a given topic Long Covid, Tuberculosis, Asthma and Bronchitis are currently the subjects of broad South African public searches. Tuberculosis had the highest search volume among the four conditions, indicating a significant level of interest in this disease. The majority of people are searching for more information about the resurgence of long COVID despite the paucity of available data. The high search volume suggested a need for greater awareness, information, and possibly indicates a higher prevalence of the disease in certain regions. ([Here](#))

Asthma, the second condition in terms of search volume, demonstrates the ongoing interest and concern surrounding this chronic respiratory disorder. Bronchitis, although less prevalent than Tuberculosis and Asthma, still garners a considerable level of public interest, ranking third in search volume. The lower search volume for Long Covid may indicate a relatively lower level of public awareness or a perception that it is a less pressing concern compared to the other three conditions analysed. Long Covid displays the lowest search volume among the four conditions. ([Here](#))

Varying levels of public engagement with these respiratory conditions, highlight the need for targeted awareness campaigns, educational initiatives to prevent mis/disinformation. ([Here](#))

## KEY TRENDS | MEASLES

**Adults with measles.** Some people are concerned that adults have been exposed to measles and infected by children without knowledge on prevention and treatment options to manage the disease, and they were about whether the older individuals who had received measles vaccine as children “*can still contract measles after vaccination*” or “*vaccinate or take a vaccine booster*” to protect themselves. ([Here](#))

**Anti-vaxxers taking advantage of outbreak.** There are some people with low trust and confidence in government ploughing doubt and encouraging vaccine hesitancy; “*the best way to protect my child, keep them away from the government*”, “*the best way to protect our babies is to deaf towards government*”, “*and go your own doctor that you trust*” ([Here](#)) “*As it is in the nature of viruses to mutate, and therefore a vaccination developed against last year’s mutations, won’t help very much against this year’s mutations.*” ([Here](#))

**Misinformation on mumps.** Social media users continue to spread false information about the mumps, with some urging others “*to stay away from vaccines*” ([Here](#)) and others applauding the work being done to stop the spread of the measles. “*Thank you so much for containing the measles outbreak,*” and “*here are five quick tips to spot fake news on social media.*” ([Here](#))

## KEY TRENDS | CHOLERA

**Political comments sowing confusion.** The rising of cholera cases and death toll has sparked anger, confusion and misinformation as people express their concerns over service delivery and taking advantage the situation for their own agendas. The sentiments included “*waiting for something to happen before acting*” with “*everyone is electioneering*” causing more confusion. ([Here](#)) and ([Here](#))

**Demand for flu vaccines.** There are ongoing claims of high demand for flu vaccine now that the flu season and COVID-19 are overlapping, with high risk of developing flu-related complications. Most of these beliefs are held by pro-vaccine social media users who have encouraged others to get vaccinated. Others said “*the flu vaccine won’t protect you against COVID-19, but will protect you against flu.*” ([Here](#)) People with comorbidities have been warned to be extra careful and extra cautious. ([Here](#))

**Cholera causes panic.** As panic broke following the news about the contaminated tanker with high levels of bacteria in Hammanskraal, ([Here](#)) a video showing some people fetching water from rivers has gone viral causing confusion. ([Here](#)) and ([Here](#)) The social media users have been critical of the government. “*This government though...*”, and believed that “*This government does not know how to control and cure this disease...*” ([Here](#))

## KEY TRENDS | FLU

**H1N1 dominating influenza cases detected.** Although there have been fewer influenza cases this year than in previous years ([Here](#)), there are claims that H1N1 influenza is currently dominating in cases detected. ([Here](#)) Some people, however, reject the flu vaccine, claiming it is useless because it “*is not working for us,*” “*making us sick,*” ([Here](#)) or “*ineffective when one already has a cold,*” “*I must feel good enough to have the flu shot, a bit difficult when the sickness won’t go away.*” ([Here](#))

In response to the NICDs social messaging on the flu vaccine, some of the social media users are interested to take the flu vaccines; ‘*Where can we find that vaccine?*’, “*10 000 vaccines to take*” and others were concerned and advising people not to take the shot; “*why is the flu taking so long to clear up this year*” ([Here](#)) and “*Don’t get the flu shot, take vit C, vit D and Zinc every day*” ([Here](#)) saying “*it is not necessary at all*”. ([Here](#)) “*Viruses mutate, and therefore a vaccination developed against last year’s mutations, won’t help very much against this year’s mutations, so one should vaccinate for influenza every year for flu.*” ([Here](#))

## KEY TRENDS | OFFLINE

**High level of awareness on cholera outbreak.** There is a high level of awareness regarding the ongoing cholera outbreak, as well as other diseases including Measles, Diphtheria, Mumps, COVID-19, and Flu. There is a need for quick and accurate information on cholera prevention, symptoms, and treatment.

Positive feedback was also received, indicating that SARCS initiatives have been successful in spreading knowledge and promoting preventive measures for cholera outbreaks and other diseases through community gatherings and forums that served as platforms for lively debates, the sharing of personal stories, and the exchange of information on cholera prevention and control.

**COVID-19 related enquiries.** The majority of COVID-19 enquiries are related to requests for assistance with accessing vaccination codes. With the EVDS SMS reminder functionality gone, agents have been assisting citizens with vaccination codes, reminders of vaccination /booster dates and follow ups etc.

Citizens who require the 2nd Pfizer dose have become increasingly frustrated as it is not available yet. They are unable to get fully vaccinated, which impacts work or travel. Vaccinators at sites find difficulty in accessing EVDS system as some of them have had their access revoked due to inactivity. Health professionals use the NHH for information on processes around registering undocumented citizens for vaccinations.

**Health services:** Mumps/Measles/Child health/MomConnect. The MomConnect platform allows moms to pose questions related to pregnancy as well as their infants. Nurses at the NHH assist with these queries. · An interest from the public in learning more about Mumps & Measles, specifically identifying symptoms and treatment used. Schools and daycare facilities are particularly interested in creating awareness around infectious diseases.

**General health queries:** There has been a general request for assistance around how to report outbreaks at schools. These include measles as well as TB. · Citizens request information around HIV and TB treatment. (referrals due to relocating)

**General enquiries:** The NHH reported suspicious activity around a fake advert for job applications from a site which reads [www.department-of-health.org](http://www.department-of-health.org) . Applicants received a letter with DoH logo requested that applicants pay R250 for background checks with payments made through PEP money transfer services. · NHH continues to receive queries around SASSA applications and food parcels. · Many people use the NHH to seek employment or advice around how to apply for specific positions in the government sector. ·

Complain: There is greater visibility and awareness around health facility complaints. These have been received by both the public as well as healthcare workers. Agents note these and refer to the DoH complaints app and DoH processes · Citizens are dissatisfied with the process around getting their vaccination certificate updated. In most cases, where no feedback is received from provincial or private sector to back capture information on the system, agents are unable to assist citizens with their requests.

## MISINFORMATION

**MISINFO:** ~~Vaccines are harmful to people who are immunocompromised.~~ **TRUTH** COVID-19 vaccine is made available to provide ongoing protection, especially for older persons and those who are immunocompromised and are at the highest risk of severe COVID complications. ([Here](#)), ([Here](#)) and ([Here](#)).

**MISINFO:** ~~Adults can't get measles.~~ **TRUTH** You can get measles at any age. However, the virus is known to be more severe in those under the age of 5 and those over 30. If you have been vaccinated for measles, you are immune to the virus. ([Here](#))

**MISINFO:** ~~Why is a new vaccine being offered this year?~~ **TRUTH:** As it is the nature of viruses to mutate, and therefore a vaccination developed against last year's mutations, won't help very much against this year's mutations. Vaccinate for influenza every year. ([Here](#))

**MISINFO:** ~~The measles vaccine can kill you.~~ Vaccines are safe and effective at preventing measles. **TRUTH** Some of the common side effects of the vaccine would include fevers, mild rashes, and temporary pain in the joints. Very rarely, a person may have a serious allergic reaction to the vaccine. Nonetheless, being vaccinated is much safer than getting measles. ([Here](#))

**MISINFO:** ~~Taking a flu vaccine is not necessary.~~ **TRUTH** taking a vaccine will protect you and your loved ones from a devastating illness and/or death. Once vaccinated, an individual will have a level of protection (or immunity), against that specific harmful disease. ([Here](#))

**MISINFO:** ~~Children under 11, can they be vaccinated for flu?~~ **TRUTH:** Yes, the flu vaccine may be administered to children from 6 months. ([Here](#))

## **WHO Africa Infodemic Response Alliance (AIRA) & Viral Facts**

AIRA is the Africa-wide initiative of the World Health Organisation, managing the infodemic of misinformation and communications overload related to Covid and vaccination. They produce Viral Facts content responding to misinformation which can be used freely. You can find previous reports on the [AIRA page](#).

Consistent trends: Cholera Outbreak in South Africa

- A YouTube video ([Here](#)) posted by eNCA on July 6th reported the presence of both cholera and E. coli following tests conducted on water samples from the Vaal River and a nearby town. This follows earlier tests that also identified cholera in the water. Commenters on the YouTube video expressed their concerns regarding water safety and how authorities are effectively managing the situation.
- Similarly, another Facebook post ([Here](#)) shared by SABC News, the South African Broadcasting Corporation, a public broadcaster with more than 1.9M followers on its Facebook page, has brought attention to the escalating cholera death toll in South Africa, which has claimed ([Here](#)) the lives of 47 individuals, with 35 of them concentrated in the Hammanskraal region—the epicenter of the outbreak. Online users who engaged with the post emphasized the pressing issues of inadequate access to safe water and deteriorating infrastructure, including the distressing burst of *sewerage pipes*.

*Cholera Social media **toolkit** ([Here](#)) with all recent Viral Facts videos on Cholera*

*World Health Assembly: **Q&A cholera** ([Here](#))*

**Call** ([Here](#)) *for urgent and collective action to fight cholera*

*Cholera emergency **page** ([Here](#))*

*Global Task Force on Cholera Control Cholera **roadmap** ([Here](#))*

*Africa Check: ([Here](#)) “Fact sheet, a disease nobody should die from” WHO ([Here](#)), Global strategic preparedness, readiness and response plan for cholera*

## PROPOSED ACTIONS FOR RISK COMMUNICATION & COMMUNITY ENGAGEMENT

- The public's trust in the government and the reliability of our health messaging has been weakened by misinformation on the cholera outbreak, making it challenging to communicate in this contaminated atmosphere. Messaging on the availability of adult measles prevention and treatment options, must be made clear, as well as consideration for integrated messages to address the communication needs of those impacted directly or indirectly.
- There are gaps in our communications that has been observed, such as when it comes to responding in real time on social media, providing information about measles-infected people, clearing up misconceptions about the mumps, offering clarity on H1N1, and providing information on the immunization of children between the ages of 1 and 11. To minimize vaccination hesitancy, it is necessary to re-enforce current messages.

## METHODOLOGY AND COLLABORATION

The Social Listening & Infodemiology team that produces this report is part of the Risk Communications & Community Engagement (RCCE) Working Group of the Department of Health in South Africa. 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:

National Health Hotline: 0800 029 999

[WhatsApp: 0600-123456](#) | [Healthhotline@health.gov.za](mailto:Healthhotline@health.gov.za)  
[Twitter](#) | [Instagram](#) | [YouTube](#)

<https://medsafety.sahpra.org.za/>

[AEFI@health.gov.za](mailto:AEFI@health.gov.za)

<https://findmyjab.co.za/>

<https://www.real411.org/Report Misinfo>

WHO/AIRA [ViralFacts](#)

- **SA National Department of Health**
- **National Health Hotline:** Reports from the national callcentre
- **Org:** NDOH Covid-19 WhatsApp system
- **WHO** Africa Infodemic Response Alliance (AIRA)
- **UNICEF:** digital analysis of content on Google, Twitter, YouTube and Facebook, and digital news

- **SA 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
- **Health Systems Trust, Community Constituency Front (CCF), HealthEnabled**
- **Centre for Communication Impact, Centre for Analytics & Behavioural Change, Section 27**
- **Medical Research Council, National Institute for Communicable Diseases,**
- **SA Vaccination and Immunisation Centre, HSRC, DG Murray Trust, Right to Care**
- **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, IPSOS, People’s Health Movement, and Business for SA, SA Minerals Council, Wits Reproductive Health & HIV Institute, UN Verified, Deaf SA, SA National Council for the Blind, Treatment Action Campaign and Disability SA.

*The drafting team this week includes Charity Bhengu (NDOH). The data for this report was collected by the National Department of Health (NDOH), Health Systems Trust (HST), National Institute of Communicable Diseases (NICD), SA Red Cross (SARC), National Health Hotline (NHH) and University of Free State (UFS).*

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