

South Africa Covid-19 and Vaccine Social Listening Report 14 February 2022, Report 36

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This is a weekly report of Covid & vaccine sentiment, rumors & misinformation in SA. Further info [here](#).

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KEY TRENDS

UJ/HSRC study: Research from the University of Johannesburg and HSRC 5th round of the Covid-19 Democracy study ([here](#)).

- The study with over 6,000 respondents through Moya, conducted in Oct – Nov 2021), showed 36% of respondents had vaccinated, 25% were hesitant and 38% were ‘favourable’ (meaning they were prepared to vaccinate but hadn’t yet). This suggests that vaccine hesitancy is declining (compared to previous round of this UJ/HSRC study), knowledge matters (vaccine hesitancy is 40% for people who know ‘nothing at all’ and 21% for people who ‘know a lot’) and political trust is crucial (vaccination rates are much higher for those who think President Ramaphosa is doing a good job). There is inequality in vaccine rates (33% of people earning less than R1,000 per month are vaccinated, compared to 73% of those earning over R40,000pm). The study also indicated there was more unmet demand (favourable but unvaccinated people) in poorer areas: 41% for the poorest category, compared to only 12% in the richest.
- **Millions “favourable” but unvaccinated.** Updating the vaccination rate from the UJ/HSRC study (it is now about 50% of adults, not 36% as at the time of the research), this suggests that around 24% of the population over 18 years old want to vaccinate but for various reasons have not yet. This amount to around 9.6 million people ([here](#)).
- **Reasons for not vaccinating:** This study showed the 4 main reasons for people who were favourable not to vaccinate are: “Don’t know where to go”,

“Cost of getting to site”, “Site is hard to find” and “I don’t have time to go”. All these issues are addressed through pop-up local vaccination sites combined with social mobilization through community organizing ([here](#)).

- **Fewer new vaccinations:** With the around 50% of all adults in SA having vaccinated, the rate of new vaccinations is around 70,000 per day (much less at the weekends), considerably lower than last year.

Vaccination at clinics. Getting vaccinated at clinics is still a challenge in many areas. Example quotes from Vax Champs, “*I went to get my booster shot but I was said I could not get it at the site I went to and that I must go to the clinic I registered at. Why?*”, and “*I haven’t got vaccinated yet because every time I go to the clinic they tell me that they can’t vaccinate me because they cannot open the meds if there’s only a few ppl*”.

Social media: There have been no breakout Google search terms related to Covid this week; and less engagement with Tweets and Facebook posts. Access and availability dominated vaccine conversations (38%). There were increases in Google searches for ‘Vaccine Certificates’, ‘Sinopharma’ and ‘vaccine site near me’. Most positive story with high engagement was on mRNA vaccine development in SA. Most shared news stories include 80% serious Covid case in vaccinated ([here](#)) and “Real Science” ([here](#)). News articles on Covid generated over 30 000 engagements (20% less than previous week), stories with most engagement [here](#), [here](#), [here](#) and [here](#). On Twitter, most posts were ‘vaccine hesitant’ or ‘vaccine skeptical’, with overall more negative than positive references to vaccination (though less nett negative than last week). The top topics of conversation were ‘Forced vaccination’, ‘Efficacy’ and ‘Side effects’.

“**Covid is over**”. There is a growing perception that the pandemic is largely over with reduced numbers of infections and deaths, Omicron being seen as much less severe, and the government relaxing Covid regulations. [Here](#) and [Here](#)

Regulation confusion. Many are confused by changes in policy – perceived lifting of Covid rules at schools while continuing for adults and confirmed Covid cases not being required to isolate. [Here](#) These changes have caused anger, with petitions being 1started opposing this. A widespread sentiment is that, “*Government is taking us for a joke now*”. [Here](#)

Hot topics. Vaccination of children, vaccine mandates, the need for boosters, unvaccinated workers being disciplined or dismissed and claims of corruption during SA’s Covid response remain contentious issues on social media. The audit of the Covid stats leading to unexplained increases in death totals for several days has led to mistrust in official statistics and a feeling they are being manipulated. Vaccine mandates have been strongly opposed in many places, including the University of the Free State [Here](#) and [Here](#) where the mandate has been legally challenged amid calls that it is ‘discriminatory behaviour’, ‘Apartheid’ and ‘dictatorship’. An article in IOL presented the view of the recently-formed “World Council for Health” which is very hostile to vaccination ([here](#)).

Undocumented uncertainty. Online conversations about the lack of clarity on whether undocumented people (SA and foreign) can be vaccinated continued, with there being different practice at different vaccination sites.

Call Centre: The largest number of calls related to accessing vaccine certificates, Covid test results, timing and accessing booster doses, incorrect information in EVDS and whether clients need to wait for an SMS before vaccinating. Many clients call in reporting side effects, mainly expected non-severe ones.

“Covid fatigue.” People are exhausted by the pandemic but “masks are here to stay”. [Here](#) Comments in response to a social media request from the Dept of Health to wear masks: *“It is time to lift the mandatory wearing of the mask, I am tired now”* ([Here](#)) and *“I want to live like a normal human being. My brain was denied too much oxygen already. Imagine 3 years”*. [Here](#)

DISTRICT REPORTS

- **Buffalo City (Eastern Cape).** Decreasing vaccination rates. Most over 50s have already vaccinated. Undocumented people are reluctant to go for vaccination. People say they are so tired of hearing about vaccination. They are hungry and the R350 grant is too little. Some feel the pandemic is over so no need to vaccinate now. However, there is a rise in 18 – 35 year olds going to vaccinate. Incentives, music and some food at sites could encourage youth to vaccinate.
- **OR Tambo (Eastern Cape).** There is resistance to taking booster vaccinations, with worry that we will keep being asked to vaccinate indefinitely. Some people think that Covid is no more.
- **City of Johannesburg (Gauteng).** Social mobilization with social workers has proven effective. Some are not vaccinating as they believe vaccination will neither prevent or cure Covid.
- **Ekurhuleni (Gauteng).** Vaccination rate is decreasing. People feel that with lockdown regulations reducing and schools going back 100%, that must mean the government doesn't take Covid seriously any more. Questions why has everything gone back to normal in schools, but not in other places like shops? Vaccine acceptance in youth is decreasing. Feeling that Covid is now over, the government just hasn't announced it yet. This is compared to the Listeriosis outbreak when there was never an announcement that it was over and people just went back to eating processed meats.
- **Harry Gwala (KZN).** Vaccination acceptance is decreasing. Many have already vaccinated, and others (especially youth) don't feel they need to – especially after seeing some vaccinated people catch Covid. Some influential artists who are opposing vaccination are getting traction, such as Big Xhosa with the song “Andiyifuni vaccine” (I don't want the vaccine, [here](#)), which was released 5 months ago. Many anti-vaccination rumours are still circulating.
- **iLembe (KZN).** Things are returning to normal, with many not following regulations (like mask wearing) or concerned with the threat of Covid, especially the youth. A few youth are vaccinating to comply with requirements at work or tertiary education. Many youth are bit convinced of the need to

vaccinate or the safety of the vaccine. Honesty is needed in why youth should get vaccinated.

- **Bojanala (North West).** Most youth don't want to vaccinate, with many saying they want Covid pandemic to continue so they can continue receiving the SRD grant. Some say, "I will vaccinate when there is a Basic Income Grant". Many youth say they don't want politicians to come and talk to them – they would prefer to listen to other youth who are more like them, not politicians with expense accounts. Sentiment includes that, "*We would rather die of Covid as we are already dying of hunger*". Pop-up sites come without publicity so no one knows to go – they need to be organised on fixed dates with prior mobilisation. Transport to sites is still a problem, so more pop-up local sites are needed. There is still a lack of accessible information. Youth have lost trust in the government, and as a result are hostile to vaccination. Local communication and mobilization can be effective. Some success with mobilising in schools.
- **Cape Winelands (Western Cape).** Vaccination rates are low. Incentives or paying taxi fares should be tried to encourage vaccination. Loud hailing and going door-to-door does increase vaccination rates.
- **Garden Route (Western Cape).** Many over 50s are coming for booster doses, and around 95% of the elderly have vaccinated. Youth who are going to tertiary institutions that have a mandate are coming for vaccination; but there is low interest in most other youth – they say they already know about vaccines, sites & times, it's up to them if they come. Youth do not get the Vooma vouchers, and consider the vouchers as bribery. They say they want jobs and not vouchers.
- **Namaqua (Western Cape).** Increased resistance to mask wearing, and unhappiness among non-vaccinated at not being considered for some employment. Loadshedding and poor internet connectivity increase difficulties. Some religious groups continue being loudly anti-vaccination. Youth acceptance of vaccination has decreased since the holidays, especially from rumours that Covid is so weak that it's not a problem anymore. Cash incentives would help.

MISINFORMATION.

Not many new myths and rumour have been detected this week.

- **MISINFO:** ~~The Covid infection case numbers are low so we don't need to vaccinate now.~~ **TRUTH:** Having lower case numbers doesn't mean there is no reason to be vaccinated. If you are unvaccinated you are more likely to spread COVID and encourage variants. Vaccination will reduce the severity of an expected 5th See [here](#) and [here](#).
- **MISINFO:** ~~Closing churches during lockdown allowed the devil vaccine to do his work.~~ **TRUTH:** Public gatherings, especially indoor gatherings with large numbers, are known Covid spreader events, Churches where there is often singing helped in spreading Covid. See [here](#) and [here](#).

- **MISINFO:** Vaccines cause infertility and erectile dysfunction. **TRUTH:** There is no evidence to support this claims. However, Covid can impair sexual performance. See [here](#), [here](#) and [here](#).
- **MISINFO:** Vaccines have a tracker chip to track movement and shut you down if you misbehave. **TRUTH:** There is no evidence to support this claim – it's not true. See [here](#) and [here](#).
- **MISINFO:** People are dying from the Covid vaccine, and the government is hiding how many vaccine-related deaths there have been. **TRUTH:** There is no evidence of anyone dying in South Africa as a result of the vaccine (see [here](#)). Over 90% of people in SA who lost their lives to Covid in the 4th wave were unvaccinated or partially vaccinated (see [here](#)).
- **MISINFO:** Vaccines don't work — if they did they would stop us from getting Covid to begin with. **TRUTH:** If you have been vaccinated you are less likely to get Covid, and if you do get Covid it will most likely be far less severe. See [here](#), [here](#) and [here](#).

PROPOSED ACTIONS FOR RISK COMMUNICATION & COMMUNITY ENGAGEMENT

- **Covid isn't over.** As many feel Covid is now less of a threat, communication is need to explain that the pandemic hasn't disappeared, and what we do now can influence the severity of the expected fifth wave.
- **Youth focus.** Deliver communications campaign aimed at youth, stressing vaccination as a means to increased opportunities rather than fear.
- **Publicise where sites are.** There is still widespread uncertainty where local vaccination sites are, exacerbated this changing in many areas. Need to expand approaches such as loud hailing, community mobilization and more posters, especially in poorer areas.

SUGGESTED CONSIDERATIONS FOR OTHER SECTIONS OF HEALTH SYSTEM

- **Pop-ups with social mobilisation:** The UJ/HSRC research, together with activity by Community Organising Working Group, CCF and others, suggests that having Pop-up vaccination sites townships, informal settlements and rural areas can be very effective, if combined with social mobilisation with trusted local leaders and organisations ([here](#)).
- **Ensure vaccination sites for all.** The UJ/HSRC Study suggests that this should be made practice throughout SA, backed up by widespread communication, that anyone with or without official documentation can be vaccinated at any vaccination site. The study also suggests that the Bureaucratic rules should not block vaccination so that no one who comes for vaccination should be turned away, unless medically contra-indicated ([here](#)).

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), Covid Hotline, Health Systems Trust**
- **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, HealthEnabled, Deaf SA, SA National Council for the Blind, Treatment Action Campaign and Disability SA.

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