

## South Africa Covid-19 & Vaccine Social Listening Report

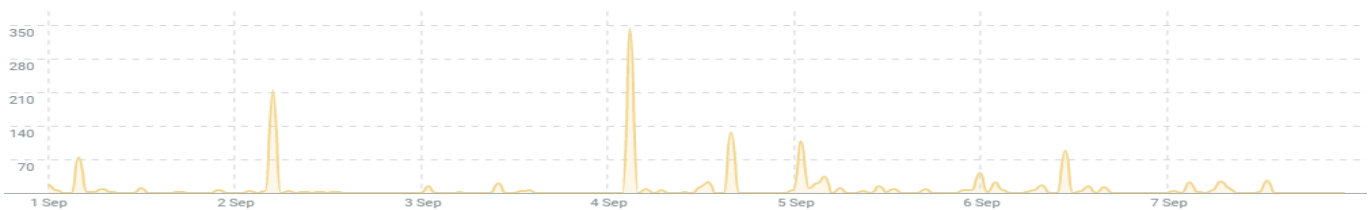
### 12 September 2022, Report 66

This is a weekly report of Covid-19 and vaccine sentiment, rumours & misinformation in SA. Thanks to all who contribute to this report each week.

### KEY TRENDS

**COVID-19 vaccine-related interest and conversations.** There was a marked increase in search queries on Google over the past week in relation to, “*walk in vaccination sites near me*” (+5000% compared to the previous week); “*Guillain Barre syndrome*” (+5000%); “*Biovac Covid vaccine*” (+5000%); “*Clicks online Covid vaccine booking*” (+2200%). Social media interest in COVID-19 vaccines generated 9.9k engagements on Facebook as of Sept 7, 2022, about “*vaccines accompany us through different stages of our lives and protect against [against severe illness]*”, and “*More studies need to be done to show whether these new vaccines would have a comparative advantage*”. *Engagement with vaccine related tweets and news articles dropped significantly: tweets generated 1.5k engagements (-80% compared to last week).* The top digital news which included; *booster drive* ([Here](#)), *vaccine mandates* ([Here](#)) *wastewater* ([Here](#)), *medicine regulator* ([Here](#)), and *Charli Dean* ([Here](#)) generated over 2k engagements (-90% compared to the previous week).

Engagement over time for COVID-19 vaccine conversation, Twitter, South Africa (*UNICEFSA*)



**False news headlines on the impending sixth wave.** The NICD has distanced itself from the predictions of the sixth wave, saying the news headlines in various news platforms on “wastewater Covid data indicating an impending wave” were erroneously attributed to the NICD. It said although “its experts had not alluded to the impending sixth wave”, media headlines were false by suggesting otherwise. Professor Barry Schoub, a virologist, had predicted the next wave in September or October, saying; “*If the Covid-19 infection trajectory follows previous patterns, South Africa may have a sixth wave in the next few weeks.*” ([Here](#))

**Concern for COVID-19 orphans.** People expressed shock and concerned following the news about 150 000 children who were orphaned by COVID-19 in South Africa, excluding children who lost their primary or secondary caregivers, such as a grandparent, according to UNICEF SA. The UN agency has called for “a holistic and child-centred response to support minors, adding that efforts should be made to scale up and strengthen the capacity of family-based care and social protection systems.” ([Here](#)) The local sentiments were mixed, and more concerned about the numbers. “*How is that possible, didn’t only 25k people die?*” ([Here](#))

**Fears of a polio resurgence.** Following the news about an unvaccinated man in New York who contracted polio in July 2022 – the first case in US since 2013, the occurrence was described as “reflecting a larger potential spread of the virus because most people infected either don’t show any symptoms or have a very mild illness with symptoms similar to the flu” ([Here](#)) There were also concerns about cross-border spread to South Africa after a child contracted Polio Type 1 in Mozambique in May 2022. ([Here](#)) Over 7.5 million children in Mozambique will be vaccinated against Polio. ([Here](#)) UNICEF is supporting the SA Risk Communication and Community Engagement (RCCE) Technical Working Group to prepare in an outbreak, and to help ensure South African has access to the latest vaccines for circulating strains.

**Ongoing threat of measles.** It was reported that a total of 700 children in Zimbabwe died last week due to measles, of which 37 occurred on 1 September. . About 6 291 cases were also confirmed as of 4 September. Some people have called for mandatory vaccination against measles. Sentiments included that *“the church gatherings led to the spread of measles to previously unaffected areas,”* which resumed after the easing of COVID-19. [\(Here\)](#) No new cases of measles were confirmed in South Africa since the measles outbreak with four cases in Tshwane in July 2022. However, there were concerns about the spread through migration. A measles vaccination campaign targeting children aged 6 months to 14 years was announced to increase immunity and prevent new measles cases in Gauteng in July. [\(Here\)](#)

**COVID-19 vaccines and heart inflammation.** Uncertainty was fuelled by a claim that an autopsy confirmed heart inflammation was related to COVID-19 vaccines, which generated more traction on social media following a news article that *“both COVID-19 illness, caused by infection with the SARS-COV-2 virus and COVID-19 vaccination, ostensibly prevent SARS-COV-2 infection and serious COVID-19 morbidity, have been associated with the development of myopericarditis i.e. inflammation of the heart muscle itself (myocarditis) or its suspending sack (pericarditis)”* [\(Here\)](#) The conversations about this article called for more autopsies to study this phenomenon. There were suggestions that “people who are performing autopsies should look at occurrences such as *“thrombo- embolic events as macro/microthrombi, vasculitis, myocarditis, peculiar inflammatory reactions (auto-immune-reactions) and foreign material”*. [\(Here\)](#)

*“We need to get onto social media wherever this story is and ask are the proper protocols being followed to include checking if the deaths could have been caused by the C19 vaccines. Do tests to assess whether a death was caused by the COVID vaccine. This is the most important part of this post for anyone doing medical examinations and autopsies: how to do an autopsy on a patient who died within 6 months of vaccination. [\(Here\)](#) “Only 6% of the African population is vaccinated, yet we have the lowest Covid death rate. Why? [\(Here\)](#) “My stance is early treatment made sense, vaccines needed focus on high-risk groups, and vaccine mandates were unethical.” [\(Here\)](#)*

**COVID-19 vaccine’s claimed effects on pregnant and breastfeeding women.** A screenshot claiming that the UK government recently changed its COVID-19 vaccine guidelines to advise against the Pfizer shot for pregnant and breastfeeding people was shared on social media. The post falsely implied that vaccines were not safe for those who were pregnant and breastfeeding. The sentiments included *“Ohhhh would you look at this! UK Government quietly removes approval for use of covid vax in pregnant and breastfeeding women, 2 YEARS AFTER INJECTING THEM WITH IT!!! [\(Here\)](#) “The social media users are misrepresenting a section of a summary report about Pfizer shot that was published by the UK medical regulatory agency in late 2020 as part of the initial authorization process. The real-world data supports vaccinating people during pregnancies and while breastfeeding”*. [\(Here\)](#)

In South Africa, the claims also created confusion with serious communication implications for the national vaccine demanding creation efforts. The local sentiments included *“shuuurrrup about this lie”* and others were concerned about *“the side effects of J&J vaccine Guillen Barre syndrome that people are suffering right now”*. [\(Here\)](#)

**Questions about Ivermectin resurfacing:** There were reports that some people were falsely promoting the drug as a remedy for long Covid following a study published on August 31, 2022, [\(Here\)](#) According to WHOAIRA, the users had been sharing a “prospective observational study” with unverified claims that the use of Ivermectin as prophylaxis for COVID-19 had led to a reduction in mortality rate in a dose response manner, and promoting. [\(Here\)](#) and spreading misinformation “that those treated early for COVID-19 with repurposed therapies including IVM, suffer less Long COVID if any.” [\(Here\)](#)

The following are the sentiments:

- *“Ivermectin won't treat COVID-19, but it might kill you, CDC warns” — LiveScience [\[Here\]](#)*
- *“Covid trends like ivermectin are deadly distractions. Why can't we stop them?” [\[Here\]](#)*
- *“People are poisoning themselves trying to treat/prevent C-19 with a horse de-worming drug” [\[Here\]](#)*
- *““You are not a horse’: FDA tells Americans to stop taking dewormer for Covid” [\[Here\]](#)*

**Scepticism around inhaled COVID-19 vaccine.** The news about China becoming the first country to approve an inhaled COVID-19 vaccine were received with mixed feelings.” [\(Here\)](#) Although many people showed interest, others were sceptical. *“Would any one trust a Chinese substance enough to inhale into their lung? Lol” [\(Here\)](#) “Nothing like making profit off misery with no solution. it's like living with HIV, keep taking your medicine. Lol” [\(Here\)](#) “We'll soon see the lotion and body cream forms of the vaccines” [\(Here\)](#)* Other

researchers, including teams in the UK and the US, were also investigating nasal spray vaccines for “added immunity in the lining of the nose and upper airways, where Covid typically enters the body”.[\(Here\)](#)

**COVID-19 misinformation spill over to TB.** There were concerns about the high number of asymptomatic TB cases. However, some regarded the news as scare tactics to get more people to vaccinate or to justify extended restrictions. [\(Here\)](#) About 40% of people who were screened during a prevalence survey did not have symptoms but were eligible for testing, and 58% of those who tested for TB were asymptomatic. [\(Here\)](#) The sentiments were more negative. “Are you setting up TB to be the justification for extending restrictions, mask mandates etc?” and “*you so desperate to get majority population vaccinated.*” [\(Here\)](#)

**COVID-19 test accuracy questioned.** Community members were questioning the accuracy of the testing rate claiming that many facilities no longer offered COVID testing. “*Government is not testing people for covid anymore. NICD stop lying to South Africans that numbers are down*”, “*Just went to my local clinic and they don’t do covid testing*”, “*So, how will they know if people are infected or not?, if it’s bad flu or actual covid? How can you know if you are not testing?*” Others were questioning the relevance of testing. “*Why are you still using those useless tests, it cannot differentiate between flu or anything... stop testing*”, “*As far as I know covid disappeared in RSA, now we dealing with heatwave and loadshedding.*” and “*We are being misled in order to push the public to vaccinate*”, according to the NICD.

**National COVID Call Centre.** There was no major change to the volume of calls into the contact centre over the past two weeks.

- Most calls were around customer service and managing current data for citizens, which include updating records or assistance with vaccination certificates.
- Very few people are requesting assistance with registration. The sense is that citizens are now aware of the procedures and can easily walk into a public or private health site and be directed towards the vaccination process.
- Requests and escalations are mainly driven by the urgent need for access to certificates for travel.
- Two cases of fraudulent attempts were reported for citizens who tampered with Vaccination cards. These were identified by cross checking batch numbers which were found to be incorrect.

---

## COMMUNITY FEEDBACK

Government’s target was to vaccinate 70% adults by end of 2021, but it only reached 45%. In a presentation, Prof. Kate Alexander showed that South Africa’s vaccination rates are lower than in some countries that are much poorer, including Zimbabwe and India. According to Prof. Shabir Madhi, half of the 300 000 Covid-19 deaths could have been saved had the rollout “not been such a disaster”. Evidence showing lack of access to the vaccine as a major barrier to uptake was clear from June 2021, according to Alexander, but “Government failed to respond adequately to vaccine inequity, even though the acting minister had called for ‘vaccine to the people.’ Reasons for this were not clear – failure to support civil society? Wrong communication strategy – but this should be examined so that similar mistakes are not made in future outbreaks,” said Prof Alexander.

The following is Prof Alexander’s summarised evidence from the ground, to illustrate experience impact of civil society involvement in vaccine promotion:

**Protea, Johannesburg south.** In trying to highlight the relation between vaccine hesitancy and the cost of getting to the vaccination site, UJ researchers worked with local activists in taking old people to a local clinic. They were enthusiastic about vaccination once the financial barrier had been broken. Research in Limpopo, KZN and Western Cape revealed similar challenges and led to the formation of the National Vaccine Monitoring Group. In Grahamstown, a local leader used the government’s “vaccine to the people” slogan to convince the taxi association to alter some routes to include vaccination sites, which reduced the transport cost and increased vaccinations. In Protea south, the group worked with the Johannesburg sub-district, two councillors and a committee of activists to mobilise people around the informal settlement and had 700 vaccinated in two days. “We could do bits and pieces, but we needed more resources. We demonstrated what was possible, and the government should have responded positively. It makes me sad to think about the unnecessary loss of lives,” said Prof Alexander.

---

## MISINFORMATION

**MISINFO:** The UK government is withdrawing Pfizer Covid vaccine for pregnant and breastfeeding women. **TRUTH:** Governments have not withdrawn advice for pregnant and breastfeeding women to not be vaccinated. SA government recommends being vaccinated. See [here](#), [here](#) and [here](#)

**MISINFO:** COVID vaccinations make you more susceptible to serious illness and death and most COVID deaths now are triple vaccinated people. **TRUTH:** No evidence to support these claims. More people did lose their lives during COVID – due to COVID not the vaccine see [here](#) and [here](#) and [here](#).

**MISINFO:** More than half of the pregnant women miscarried during the Pfizer vaccine trial. **TRUTH:** Not true, the figures released was based on inaccurate data and miscarriage trends were in line with people outside of the trial. See [here](#) and [here](#).

**MISINFO:** COVID vaccines are not safe for children. **TRUTH:** No evidence to support the claim. Vaccines have been found to be safe for children. See [here](#), [here](#) and [here](#)

**MISINFO:** The COVID Vaccine death reported by SAHPRA is not the first and hundreds more have died from being vaccinated. **TRUTH:** No evidence to back up this claim. SAHPRA was transparent because it was the first clearly attributable death. See [here](#) and [here](#).

**MISINFO:** Monkey Pox and Chicken Pox are the same thing and used to spread fear. **TRUTH:** Monkeypox is an orthopoxvirus, while chickenpox is a herpes virus and shingles are not the same virus. See [here](#) and [here](#).

**MISINFO:** People who have been vaccinated are more likely to get seriously ill from COVID. **TRUTH:** No evidence to support this claim. People who have been vaccinated far less likely to experience severe symptoms. See [here](#) and [here](#).

**MISINFO:** Monkeypox is just the scam name for the side effects of the Pfizer covid vaccine. **TRUTH:** Monkeypox is a viral disease and not an auto-immune diseases so it cannot be caused by a side effect to a vaccine and the vaccines do not have any live virus in them. See [here](#) and [here](#).

**MISINFO:** Monkey pox is the new Covid and is scam to control or kill us. **TRUTH:** Monkey Pox is not new but it has changed to allow it to spread further but it is a different disease and different virus to COVID. See [here](#) and [here](#)

**MISINFO:** Messages saying you have participated in a COVID drug trial asking you to take action to get paid are legitimate. **TRUTH:** Participation in any legitimate clinical trial in South Africa requires informed consent, and any payments must be approved by an ethics committee and will usually only cover transport. See [here](#) for all the policies followed locally and [here](#) for informed consent.

**MISINFO:** Vaccines cause infertility and erectile dysfunction. **TRUTH:** No evidence to support these claims. COVID however can impair sexual performance. See [here](#), [here](#) and [here](#).

**MISINFO:** Covid vaccines cause heart attacks and inflammation of the heart. **TRUTH:** While there are some cases of inflammation of the heart (myocarditis, the risk is very low, see [here](#)) there is no evidence to support claims that covid vaccines directly cause heart attacks. See [here](#).

**MISINFO:** COVID Regulations been dropped so no need to get vaccinated now and they don't help anyway. **TRUTH:** Its still recommended to ventilate spaces and get vaccinated as it will prevent serious illness. See [here](#) and [here](#)

**MISINFO:** Vaccines side effects are being under reported and can kill you. SA Adverse reactions site shows how many have died! **TRUTH:** No evidence to support this claim, most side effect are mild and self-resolving. See [here](#), [here](#) and [here](#). SA has excellent adverse reporting mechanisms backed by evidence see [here](#) for credible local site on adverse reactions.

---

## 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 the Viral Facts content responding to misinformation which can be used freely. Here are the latest [Viral Facts Africa](#) resources. You can also find previous AIRA infodemic trends reports now hosted on the [AIRA page](#) and [TechNet-21](#).

### Key Monkeypox Misinformation Trends

~~"New" strain of monkeypox has been identified.~~ A second strain of monkeypox has reportedly been discovered in the United Kingdom after an individual travelled to West Africa. While a significant portion is focused on the potential stigma this will cause for the region, others have claimed the report of the case coming from West Africa is simply, "more lies."

**What to do:** Address the claims that the strain is new and clear up the "clickbait" claim by sharing information on the strain likely being a previously known mutation. Latest Monkeypox VFA content: **Monkeypox explainer** [\[LINK\]](#)

### Key COVID-19 Misinformation Trends

~~Ivermectin has been proven effective against COVID-19.~~ Users have been sharing a "prospective observational study" that reportedly has shown that the use of Ivermectin as prophylaxis for COVID-19 has led to a 92% reduction in mortality rate in a dose response manner.

**What to do:** Engaging with prominent voices on social messaging apps is crucial as many voices have moved away from public social media platforms. Ivermectin VFA content: **Ivermectin explainer** [\[LINK\]](#)

---

## PROPOSED ACTIONS FOR RISK COMMUNICATION & COMMUNITY ENGAGEMENT

- **Promote vaccinations at all levels of healthcare, including the uptake of the Polio vaccine among the unvaccinated.** The successful uptake of the Polio vaccine as a lifesaving medical intervention needs to be promoted at all levels of healthcare.
- **Conduct a needs analysis in terms of vaccine hesitancy in each province and district.** Understanding vaccination hesitancy is an iterative process and requires continuous community engagement efforts.
- **Use national events such as the comrade's marathon to promote public health interventions such as safe sex, vaccinations and general cleanliness.**
- **COVID-19 and HIV/AIDS sensitisation training for all members of the public sector.** It is important that the entire public sector is trained on the impact of COVID-19 as well the impact of HIV/AIDS in 2022/2023. COVID-19 integration into healthcare is a vital component of public health management.
- **Engage with communities around misinformation and vaccine hesitancy through the community healthcare workers.** By upskilling the CHW, they can serve as a real time community engagement mechanisms also addressing vaccine hesitancy among the local communities. In addition to this, there is a need to investigate the CHW in terms of their challenges within the communities so that the "on the ground" perspective can have a trickle up effect in terms of communication within the healthcare system.
- **Incorporate routine vaccination communication training within patient facing healthcare workers.** All patient facing healthcare workers (nurses, phlebotomists, pharmacists, medical officers, allied health professionals etc.) need to be trained on the effective risk communication strategies when working with routine patients, as to sensitise the vaccine uptake and demand
- **Collaborate with general practitioners, church leaders, and traditional healers around vaccination programmes and what information is responsive and important to share with communities.** The more involved risk communication is with people facing societal functions, the better the reach of interventions.
- **Collaborate with the department of basic education to strengthen the vaccine rollout within basic education.** There engagements are underway but should be universal between public and private education institutions.

---

## 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-19 contact centre:** Reports from the national call centre
- **Praekelt.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
- **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-19 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 RESOURCES**  
 SACoronavirus Website [Here](#)  
 Report Misinfo [Here](#)  
 National Call Centre 0800 029 999  
 Healthcheck WhatsApp 0600 123 456

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.

*The drafting team this week includes Charity Bhengu (NDOH), Herkulaas Combrink (UFS), Janine Meyer-Simons (UNICEF SA), and William Bird (Real 411). The data for this report was collected by NDOH, NICD, Real 411, UNICEF SA, HST, UFS, UJ and COVID Call Centre. The report has been reviewed and approved by Nombulelo Leburu*

**Contact:**

Nombulelo Leburu, National Department of Health	nombulelo.leburu@health.gov.za	082 444 9503
Peter Benjamin, HealthEnabled	peter@healthenabled.org	082 829 3353
Charity Bhengu, National Department of Health	charity.bhengu@health.gov.za	083 679 7424