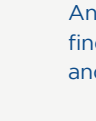


# COVID-19 UPDATE #04

- Wash your hands for at least 20 seconds with soap & water
- Keep at least 2 metres away from others
- STAY AT HOME
- Always wear a cloth mask when out in public



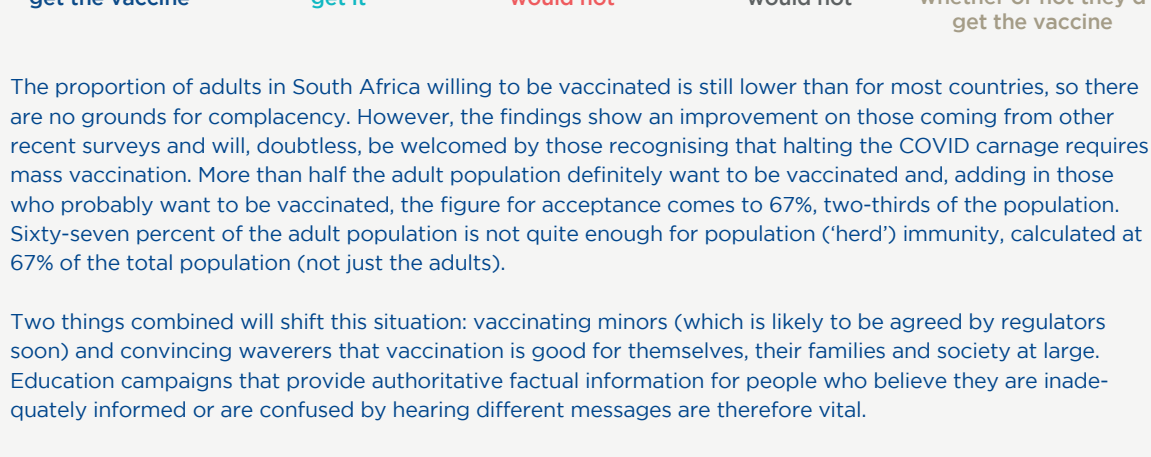
## WILL YOU GET THE COVID-19 VACCINE ONCE IT'S AVAILABLE TO YOU?

**“Two-thirds (67%) of the South African adult population would definitely get or probably get a COVID-19 vaccine if it was available.”**

This is the key finding of the latest UJ/HSRC Covid Democracy Survey, the largest and most comprehensive survey to consider the issue of vaccine acceptance and hesitancy in South Africa.

Analysis is based on 10 618 completed questionnaires that were weighted by race, education and age, making findings broadly representative of the total adult population. It was conducted between 29 December 2020 and 6 January 2021.

### A breakdown of the findings:



The proportion of adults in South Africa willing to be vaccinated is still lower than for most countries, so there are no grounds for complacency. However, the findings show an improvement on those coming from other recent surveys and will, doubtless, be welcomed by those recognising that halting the COVID carnage requires mass vaccination. More than half the adult population definitely want to be vaccinated and, adding in those who probably want to be vaccinated, the figure for acceptance comes to 67%, two-thirds of the population. Sixty-seven percent of the adult population is not quite enough for population ('herd') immunity, calculated at 67% of the total population (not just the adults).

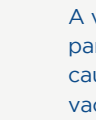
Two things would shift this situation: vaccinating minors (which is likely to be agreed by regulators soon) and convincing waverers that vaccination is good for themselves, their families and society at large. Education campaigns that provide authoritative factual information for people who believe they are inadequately informed or are confused by hearing different messages are therefore vital.

The big problem now is not public acceptance, it is getting vaccines into people's arms.

### What is Fedhealth's stance?

Fedhealth strongly recommends that our members get vaccinated once the vaccine becomes available. We believe that the COVID-19 vaccines are safe and that it's in the best interests of all eligible South Africans to get vaccinated – the sooner, the better.

We do understand that there is plenty of information doing the rounds with regards to COVID-19 vaccinations. Many of these sources are not reliable or accurate, so always make sure you obtain your info from a reputable source, and be careful not to spread or share misinformation.



## A SHOT AT HEALTH: UNPACKING COVID-19 VACCINE QUESTIONS AND MYTHS

The information below has been provided by the Department of Health via the [sacoronavirus.co.za](https://sacoronavirus.co.za) website and its COVID-19 and Vaccines guide.

### Frequently asked questions

#### Q 1. What is a COVID-19 vaccine?

A vaccine is intended to provide immunity against COVID-19. In general, vaccines contain weakened or inactive parts of a particular organism that triggers an immune response within the body. This weakened version will not cause the disease in the person receiving the vaccine, but it will prompt their immune system to respond. Some vaccines require multiple doses, given weeks or months apart. This is sometimes needed to allow for the production of long-lived antibodies and development of memory cells. In this way, the body is trained to fight the specific disease-causing organism, building up memory against the pathogen so it can fight it in the future.

#### Q 2. Why are vaccines important?

- To prevent morbidity and mortality.
- To achieve herd immunity and prevent ongoing transmission. When a person gets vaccinated against a disease, their risk of infection is also reduced.
- Lowering the possibility for a pathogen to circulate in the community protects those who cannot be vaccinated (e.g. due to health conditions, allergies, age) from the disease targeted by the vaccine.

#### Q 3. What is herd immunity?

When many people in a community are vaccinated, the pathogen has a hard time circulating because most of the people it encounters are immune. So the more that others are vaccinated, the less likely people who are unable to be protected by vaccines are at risk of even being exposed to the harmful pathogens. This is called herd immunity.

But no single vaccine provides 100% protection, and herd immunity does not provide full protection to those who cannot safely be vaccinated. But with herd immunity, these people will have substantial protection, thanks to those around them being vaccinated. Vaccinating not only protects yourself, but also protects those in the community who are unable to be vaccinated.

#### Q 4. What process is followed before a vaccine is given to the public?

Before COVID-19 vaccines can be delivered:

1. The vaccines must be proven safe and effective in large clinical trials.
2. A series of independent reviews of the efficacy and safety evidence is required.
3. The evidence must also be reviewed for the purpose of policy recommendations on how the vaccines should be used.
4. An external panel of experts convened by WHO, called the Strategic Advisory Group of Experts on Immunization (SAGE), analyses the results from clinical trials.
5. The panel then recommends whether and how the vaccines should be used.
6. Officials in individual countries decide whether to approve the vaccines for national use and develop policies for how to use the vaccines in their country based on the WHO recommendations.

#### Q 5. What steps are taken to ensure the COVID-19 vaccine is safe?

COVID-19 vaccines go through a rigorous, multi-stage testing process, including large trials that involve tens of thousands of people. These trials, which include people at high risk for COVID-19, are specifically designed to identify any common side effects or other safety concerns. Once a clinical trial shows that a COVID-19 vaccine is safe and effective, a series of independent reviews of the efficacy and safety evidence is required, including regulatory review and approval in the country where the vaccine is manufactured, before WHO considers a vaccine product for prequalification. An external panel of experts convened by WHO analyses the results from clinical trials, along with evidence on the disease, age groups affected, risk factors for disease, and other information. The panel recommends whether and how the vaccines should be used.

#### Q 6. Are vaccines necessary to prevent the spread of COVID-19?

There's overwhelming scientific evidence that vaccination is the best defence against serious infections. Vaccines do not give you the virus, rather it teaches your immune system to recognise and fight the infection. The COVID-19 vaccine presents the body with instructions to build immunity and does not alter human cells. Vaccines have reduced the morbidity and mortality of infectious diseases such as smallpox, poliomyelitis, hepatitis B, measles, tetanus, whooping cough and pneumococcal conjugate across the world. Vaccinating enough people would help create herd immunity and stamp out the disease.

#### Q 7. Are vaccines safe to use?

Vaccines undergo rigorous trials to ensure they are safe and effective. All vaccines go through a comprehensive approval process by medical regulators to ensure that they are safe. Pharmaceutical companies hand over all laboratory studies and safety trials to validate that the vaccine does work. Any safety concerns are picked up by regulators when reviewing the data. Vaccines are made to save lives – not to oppress, bewitch, possess or indoctrinate people.

#### Q 8. From where is South Africa getting its first vaccines?

South Africa received 1 million doses of the Oxford University-AstraZeneca vaccine at the start of February from the Serum Institute of India (SII), with a further 500 000 doses to arrive later in February.

#### Q 9. Who will get the COVID-19 vaccine first?

The country's estimated 1.25 million healthcare workers will be vaccinated first.

#### Q 10. How do we make sure COVID-19 vaccines are safe?

Government is working closely with South African Health Products Regulatory Authority (SAHPRA) to ensure there is no delay in approving the vaccine for use. The Oxford University-AstraZeneca vaccine has already been approved by various regulators around the world and is being rolled out in other countries.

#### Q 11. Who are SA's other vaccine suppliers?

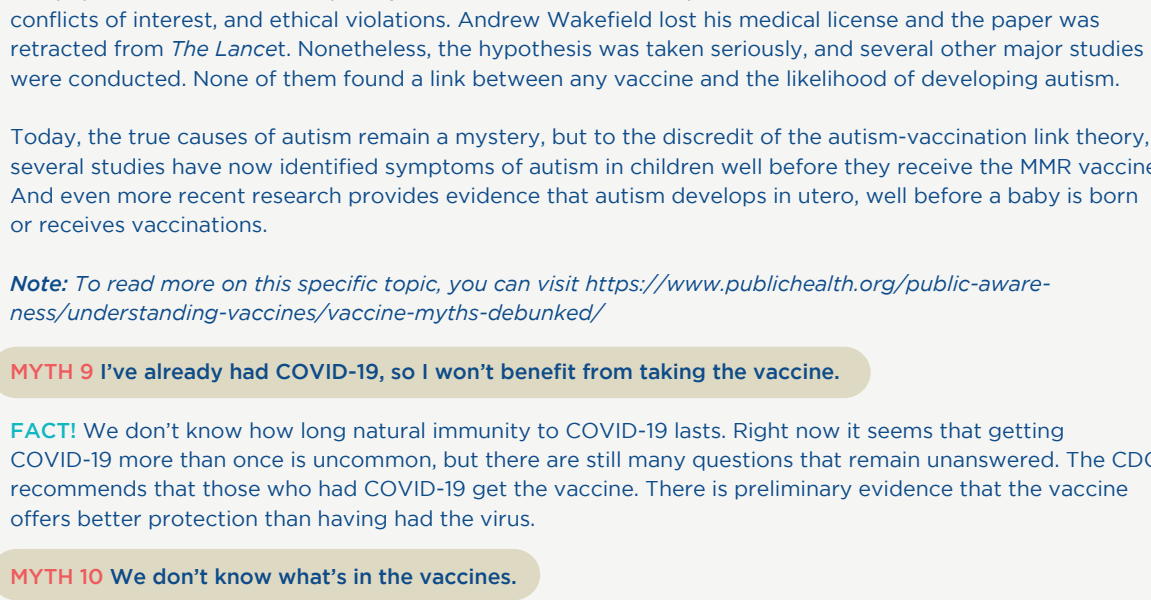
We have also reached an agreement with the COVAX Facility to secure vaccines to immunise 10% of the population. These doses are expected at the beginning of the second quarter of the year and we continue to work with various pharmaceutical companies to ensure we immunise 67% of the population by the end of 2021.

#### Q 12. Was there a deliberate delay in acquiring a COVID-19 vaccine for South Africans?

There has been no deliberate delay to access the COVID-19 vaccine; as the situation remains fluid, all factors have to be taken into account. We are selecting vaccines on their safety and efficacy, ease of use, storage, distribution, supply sustainability and cost.

#### Q 13. How will the vaccine be distributed?

The rollout of the vaccine will take a three-phase approach that begins with the most vulnerable in the population. The target is to vaccinate 67% of the population by the end of 2021, which will allow South Africa to achieve herd immunity.



- **Essential workers:** Police officers, miners and workers in the security, retail food, funeral, teachers, banking and essential municipal and home affairs, border control and port health services.
- **Persons in congregated settings:** Persons in care homes, detention centres, shelters and prisons, persons working in the tourism and hospitality industry, and educational institutions.
- **Persons >18 years with co-morbidities:** Persons living with uncontrolled diabetes, chronic lung disease, poorly controlled cardiovascular disease, renal disease, HIV, tuberculosis and obesity.

#### Phase I will be delivered using three platforms:

1. **Work based vaccination programme**  
Venue? District level public & private hospitals  
Who? Most suitable for hospital linked healthcare workers
2. **Outreach work based vaccination programme**  
Venue? Mobile teams move from facility to facility  
Who? Healthcare workers in primary healthcare, community healthcare workers and private medical centres
3. **Vaccination centres: remote or facility based**  
Venue? Vaccination centres, e.g. community pharmacies  
Who? Independent healthcare workers

#### Phase II & III high-risk priority groups and general public platforms:

1. **Public facility vaccination:** Primary healthcare  
Suitable in rural settings for community access
2. **Vaccination centres:** Remote or facility based vaccination centres e.g. community pharmacies, GPs or NGOs.  
Suitable for urban settings for community access
3. **Outreach vaccination programme:** Service provided via mobile clinics. Suitable for congregated settings i.e. old age homes
4. **Work based vaccination programme:** Suitable for essential workers e.g. mining sector, industry and departments

#### Q 14. Who is purchasing the COVID-19 vaccine for South Africa?

Government will purchase, distribute and oversee the rollout of the vaccine. Government as the sole purchaser of COVID-19 more than once is uncommon, but there are still many questions that remain unanswered. The CDC recommends that those who had COVID-19 get the vaccine. There is preliminary evidence that the vaccine offers better protection than having had the virus.

### Vaccine myths and facts

#### MYTH 1 Vaccines are unsafe and normal safety protocols have been circumvented to fast track their authorisation for use.

**FACT!** The fast development and approval of vaccines is a great human feat worthy of celebration. This has been possible because we have learnt over many decades how to make and test vaccines and we were able to take those lessons and challenge ourselves to produce a vaccine much quicker. No step in the development, testing or ratification of the COVID-19 vaccines has been skipped. The world was able to develop vaccines fast because scientists and governments around the world collaborated in a manner that has never been achieved before, and pooled resources and information to ensure that everyone can contribute to the knowledge.

#### MYTH 2 Vaccines contain a form of microchip that will be used to track and control an individual.

**FACT!** There is no vaccine 'microchip' and there is no evidence to support claims that such a move is planned. Receiving a vaccine will not allow people to be tracked and personal information would not be entered into a database.

#### MYTH 3 The vaccine will change my DNA.

**FACT!** Vaccines work by stimulating the body the same way the virus would if someone were infected. That means when you receive the vaccine the body then recognises that it looks like the coronavirus and then it releases certain chemicals that start a chain reaction to make immune cells that can fight the real virus. The vaccine does not work on the DNA of the body. Some people think that because some of the vaccines are made using RNA technology that means the RNA will interact with the DNA. That is not how it works. The technology is simply the way the vaccine is made – not what it will do to the body.

#### MYTH 4 Big businesses are pushing vaccines to improve profits.

**FACT!** The COVID-19 crisis has caused massive upheaval across the globe and no nation has been spared. A vaccine represents the best hope to save lives and to restore our way of life. Many governments have therefore entered into direct talks with vaccine makers to ensure a timely supply of vaccines.

#### MYTH 5 Government is complicit with big businesses in pushing vaccines despite the risks.

**FACT!** Government is committed to saving lives and livelihoods. The fastest way to return to our way of life is through ensuring that the majority of the population are protected from the virus. Vaccines are the simplest and most effective way to do this.

#### MYTH 6 The vaccines have the mark of the Beast: 666.

**FACT!** Vaccines have no connection with any religious organisations and cannot be infused with spirits, demons or other abstract ingredients. There is no conspiracy to possess, bewitch or control anybody.

#### MYTH 7 Vaccines are a way for our former oppressors to oppress us again.

**FACT!** Government would never allow a situation where any country or nation would be allowed to oppress our people through any means. Scientists and governments all over the world, including our own, have all contributed to the knowledge that has led to the development of the vaccines. It has not just been the work of Western and rich countries, but a global collaboration.

#### MYTH 8 Vaccines cause autism.

**FACT!** The widespread fear that vaccines increase the risk of autism originated with a 1997 study published by Andrew Wakefield, a British surgeon. The article was published in *The Lancet*, a prestigious medical journal, suggesting that the measles, mumps, rubella (MMR) vaccine was increasing autism in British children.

The paper has since been completely discredited due to serious procedural errors, undisclosed financial conflicts of interest, and ethical violations. Andrew Wakefield lost his medical license and the paper was retracted from *The Lancet*. Nonetheless, the hypothesis was taken seriously, and several other major studies were conducted. None of them found a link between any vaccine and the likelihood of developing autism.

Today, the true causes of autism remain a mystery, but to the discredit of the autism-vaccine link theory, several studies have now identified symptoms of autism in children well before they receive the MMR vaccine. And even more recent research provides evidence that autism develops in utero, well before a baby is born or receives vaccinations.

**Note:** To read more on this specific topic, you can visit <https://www.publichealth.org/public-awareness/understanding-vaccines/vaccine-myths-debunked/>

#### MYTH 9 I've already had COVID-19, so I won't benefit from taking the vaccine.

**FACT!** We don't know how long natural immunity to COVID-19 lasts. Right now it seems that getting COVID-19 more than once is uncommon, but there are still many questions that remain unanswered. The CDC recommends that those who had COVID-19 get the vaccine. There is preliminary evidence that the vaccine offers better protection than having had the virus.

#### MYTH 10 We don't know what's in the vaccines.

**FACT!** Vaccine manufacturers are required to declare their ingredients to SAHPRA before the vaccine is approved for use. Despite theories circulating on social media, they don't contain microchips or any form of tracking device. If they did contain such items, SAHPRA would not authorise use of the vaccine.

#### MYTH 11 You can test positive because of the vaccines.

**FACT!** There's no live virus in the vaccines, so it can't infect you. Basically the vaccines stimulate our immune system to produce antibodies which fight the virus when it enters the body.

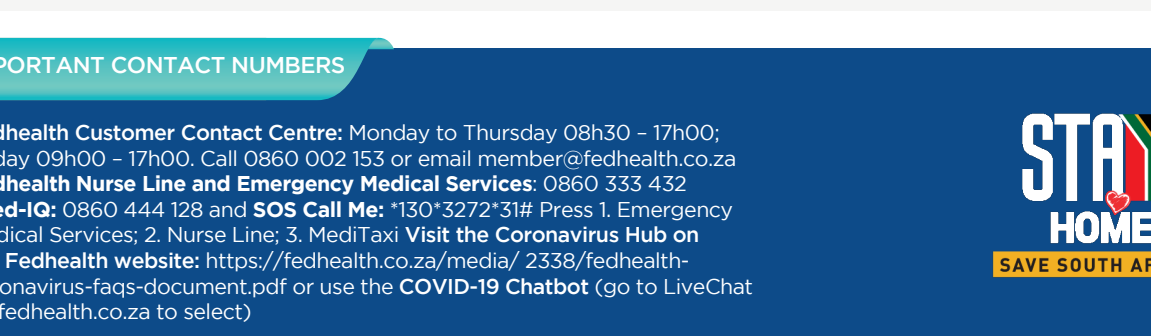
#### MYTH 12 5G networks cause the coronavirus through radiation emissions.

**FACT!** The World Health Organisation has made it clear that viruses cannot travel on radio waves and mobile networks. COVID-19 is spreading in many countries that do not have 5G mobile networks.



## THE LATEST FEDHEALTH COVID-19 STATS

We share Fedhealth's latest COVID-19 statistics with you (as of 25 January 2021).



CO-MORBIDITIES OF MEMBERS WHO HAVE BEEN ADMITTED										
	Hypertension	Diabetes	Chronic Renal Disease	Oncology	Obesity	Cardiac Disease	Asthma	COPD	TB	HIV
COVID-19 survivors	372	215	34	94	23	243	54	11	15	59
COVID-19 deaths	90	50	5	25	3	59	9	0	3	9
Total	462	265	39	119	26	302	63	11	18	68

### IMPORTANT CONTACT NUMBERS

Fedhealth Customer Contact Centre: Monday to Thursday 08h30 – 17h00; Friday 09h00 – 17h00. Call 0860 002 153 or email [member@fedhealth.co.za](mailto:member@fedhealth.co.za)  
**Fedhealth Nurse Line and Emergency Medical Services:** 0860 333 432  
**Paed-IQ:** 0860 444 128 and **SOS Call Me:** \*130\*3272\*31# Press 1. Emergency Medical Services; 2. Nurse Line; 3. Medi Taxi Visit the **Coronavirus Hub** on the Fedhealth website: <https://fedhealth.co.za/media/2338/fedhealth-coronavirus-facts-document.pdf> or use the **COVID-19 Chatbot** (go to LiveChat on [fedhealth.co.za](https://fedhealth.co.za) to select)



### IMPORTANT COVID-19 RESOURCES

COVID-19 online resource and news portal: <https://sacoronavirus.co.za/>  
 The National Institute for Communicable Diseases (NICD): <https://www.nicd.ac.za/>