Drivers of the COVID-19 vaccination process in Ugandan communities

August 2021
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Introduction

In response to the COVID-19 outbreak in 2020, governments across the world have issued countrywide lockdowns with the hopes of curbing the spread of the virus. Between March 2020 and August 2021, the Ugandan government has issued 2 lockdowns as the spread of the virus reached peak heights. According to the Ministry of Health (Uganda), the number of vaccinated citizens is just over 1 million today while the country’s population is approximated to be at 41 million with 21 million being among the population to receive priority for vaccination.

During the initial lockdown in April 2020, SEMA carried out a survey to find out which public services citizens felt that they needed the most, and their interactions with public offices, if any. Our research showed that health facilities were most needed, as this was a period of uncertainty across the country with little known about the COVID-19 virus and its prevention or treatment.

One year later, despite the development of treatments, the unrest about the virus has spiked yet again due to new variants of the COVID-19 virus that led to many more infections and deaths among Ugandans than during the previous lockdown. At the same time, vaccines have been developed and have become available in many parts of the world.

Having received vaccines from the governments of India, China and Norway, the Ministry of Health in Uganda has encouraged citizens within the priority populations to ensure they are vaccinated to reduce their chances of contracting the virus. After the implementation of the second lockdown in Uganda, we asked the COVID-19 Taskforce how SEMA could help in collecting valuable feedback from citizens about service delivery. Amidst a lot of misinformation, the suggestion was made to ask the Ugandan community what their views are on the COVID-19 vaccines and the vaccination process being carried out across the country. This report sets out the findings of our online survey into these views among urban Ugandan communities in July 2021.
Methodology and sample

Respondents were asked a series of 12 questions on their perceptions on the vaccines, their preference with regards to where they would rather receive the vaccine (public vs private health facilities) and if they have already received the COVID-19 vaccine. This was a self-administration survey shared via online means such as social media platforms (WhatsApp, Facebook and Twitter), our website, and via emails.

112 persons filled out the survey during a period of 2 weeks from 16th July to 31st July 2021. The respondents are 58% male and 42% female. The table below shows the age distribution.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-24 years</td>
<td>36.6%</td>
</tr>
<tr>
<td>25-30 years</td>
<td>32.1%</td>
</tr>
<tr>
<td>31-35 years</td>
<td>12.5%</td>
</tr>
<tr>
<td>36-40 years</td>
<td>8.0%</td>
</tr>
<tr>
<td>40-44 years</td>
<td>5.4%</td>
</tr>
<tr>
<td>45-49 years</td>
<td>0.9%</td>
</tr>
<tr>
<td>50 years and above</td>
<td>4.5%</td>
</tr>
</tbody>
</table>

Respondents to the survey were mainly urban citizens, of which 77% was living in Kampala and 19% in other towns across Uganda. Only 4% were living in rural areas at the time of the survey.

Have you ever tried to contact the emergency call line of the Ministry of Health?

Graph 1

Contacting the Ministry of Health during the lockdown

Since the onset of the lockdown in April 2020, the Ministry of Health has encouraged citizens to restrict their movements as a way of controlling the spread of the COVID-19 virus. This has led to the increased use of mobile and online means to receive information and services from institutions including the Ministry of Health. In addition, a gap in (reliable) information about the virus led the Ministry to open a toll-free line for citizens to call in case of questions or concerns regarding COVID-19. Our research shows that nearly twice as many people sought contact with this information line in 2020 as compared to 2021. Whereas in April 2020 still 8.7% of the respondents stated that they tried to call the emergency line of the Ministry of Health (See SEMA’s previous COVID-19 report), in July 2021 only 4.5% of respondents stated that they tried to contact the Ministry of Health through their emergency lines.
The success rate of citizens using the Ministry of Health emergency lines has, however, increased significantly compared to last year from 29.4% to 60% this year. This means the Ministry help line has been more effective for those calling it, yet the number of citizens calling it has decreased. Ugandan citizens have sought information and help around COVID-19 through other ways since the initial outbreak in the country.

### 2 How do citizens feel about the COVID-19 vaccine?

Citizens were questioned on their thoughts about the COVID-19 vaccine, regardless of their ability to access the vaccine. We divided the responses into categories to create a clearer picture of how citizens feel about the vaccine. The majority of respondents stated that the vaccine would be beneficial to the population and should therefore be taken up by the general public among those who are eligible to take it (45.2%). However, the second biggest category of citizens consisted of those who felt that the vaccine was not trustworthy (17.3%). This category was especially driven by the negative information surrounding the vaccines, such as issues of increased threat of death and the vaccine affecting one's fertility.

One citizen for instance said:

> “Am not assured of it's safety since there are different vaccines from different sources and we don’t know which is safe”.

Taken together it seems about 56.7% had a positive attitude towards the vaccine.

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**What are your thoughts on getting the COVID 19 vaccine?**

![Graph 2](image)

In addition to the categories within the above graph (Graph 2), citizens also stated that they felt that the government of Uganda should strive to acquire vaccines that its citizens can trust, share information on these vaccines (sensitize) and widely distribute these vaccines so that citizens have adequate access to both doses of the vaccines.

For example, one citizen said:

> “I have no problem. But there’s just too much misinformation at the moment. Once all clears we shall go get vaccinated”.

Some citizens felt that success stories of the vaccine should be shared as well so that citizens can stand witness to the effectiveness of the vaccine and thereby be encouraged to receive it themselves.
Other respondents felt that the vaccine is meant for only a specific group in the community such as the immuno-compromised and the elderly.

A number of citizens however, felt that taking the vaccines should be an individual choice that is to be respected. For instance, due to religious beliefs citizens may feel they don’t want to take any vaccinations. Individual negative attitudes towards the vaccine are however not always respected, as some employers have made it a requirement for their staff to be vaccinated in order to continue with work.

3 Uptake of the COVID-19 vaccine in Uganda

To further understand the degree to which the COVID-19 vaccines have been taken up in Uganda in July 2021, we asked respondents whether they had received the COVID-19 vaccine. Of the 112 respondents, 34.8% had received the vaccine while 65.2% reported that they were yet to receive the vaccine. These percentages show that the sample of our study was heavily biased towards the Ugandan community fortunate enough to access vaccines, as on a country-wide level less than 5% of the target population was vaccinated. Yet, as we’ve seen in the previous paragraph, even among this (‘fortunate’) population the sentiments about the vaccine were not solely positive.

Have you ever received dose 1 of COVID 19 vaccine?

Graph 3
Of the 34.8% respondents who had received the vaccine, the greatest motivating factor was towards protecting themselves from getting the COVID-19 virus. Some citizens felt that they are in high risk locations while others had family or friends who had died from the COVID-19 virus. Other citizens got the vaccine as part of mandatory vaccination for work while others still felt that it was right to get the vaccine as a result of listening to government officials and health experts.

For instance, one citizen said:

“It is the best line of long term protection that we have against the COVID-19 virus. I want to do my part to protect myself, my family, and my community”.

What motivated you to get a COVID 19 vaccine?

Why haven't you received dose 2 of the COVID-19 vaccine?

Out of the respondents who received the COVID-19 vaccine, 41% had also received the second dose of the vaccine. For the majority of the respondents who didn’t get the second dose, this was because the time between vaccination of dose 1 and 2 had yet to elapse (according to Ugandan Ministry of Health guidelines, this is a period of 8 weeks). For others however, this was because there was a shortage of vaccines at the health centres and/or the lack of transportation to the vaccination centres due to the lockdown.

For example, one citizen said:

“There was no vaccine when I was due on 17th July at 8 weeks. So I opted to push to 12 weeks”.

Graph 4

2.7%

97.3%

PREVENTION

MANDATORY
**Why haven't you received a COVID-19 vaccine?**

Of the respondents who stated that they are yet to receive the vaccine, the majority stated that this is because they do not trust that the vaccines procured by the government of Uganda are legitimate (27.5%). As shared by one citizen: “I don’t trust the drug yet. This seems like a trial drug under experiment”. There has been negative information around the virus with reports of those being vaccinated at higher risk of death. The peak number of deaths due to the COVID-19 virus in Uganda occurred on July 5th 2021 during a time when global reports attributed some deaths to effects of clotting caused by the COVID-19 vaccine making citizens more wary of taking the vaccine. This was also in line with the second biggest reason why citizens hadn’t taken the vaccine (14.5%): they were concerned about any other possible side effects associated with taking it.

**Why haven’t you received a COVID 19 vaccine?**

![Bar graph showing reasons for not getting COVID-19 vaccine](Graph 5)

- Don't trust the vaccine
- Worried about possible side effects
- Not in priority groups
- Doesn't feel the need for the vaccine
- No vaccines
- Is pregnant
- Don't trust the government

Other reasons raised for not taking the COVID-19 vaccine included:
- Lack of access to the vaccination centres as a result of the lockdown
- Lack of a national identification card
- Not knowing where to get it from
- Phobia for injections
- Preference for natural remedies
- Slow processes in terms of distribution of the vaccine

**Trusting public or private health facilities in Uganda**

Finally, we also asked citizens their preferences on where, between a public or private health centre, they would rather receive the COVID-19 vaccine from. The majority of citizens (38.4%) felt that they would rather receive the vaccine from a public health centre. The reason mentioned was that citizens felt that public health facilities would be less likely to administer fake vaccines, since there is direct procurement from the Ugandan government.

As shared by one citizen:

“There are few chances of it being a fake and they are also free unlike the private health centres which want to exploit people”.

Fake vaccines have been a growing concern amongst the population since the month of June 2021, when there were reports of approximately 800 Ugandans that were given fake vaccines by conmen targeting corporations seeking immunization services as reported by the Daily Monitor on 20th July 2021.
Other reasons raised for the preference of a public health centre was the assurance that the COVID-19 vaccine would be administered for free.

However, the second highest category (28.6%) stated that they would rather receive the vaccine outside of the country as they feel that the government of Uganda has not taken greater precautions in acquiring trustworthy vaccines for its citizens. There were also respondents who felt that they would rather not get the vaccine at all regardless of the institution. Respondents who felt that they would rather receive the vaccine from a private institution (25.9%) sighted the desire for convenience as services at the centres are delivered quickly, there is a more professional atmosphere and a less crowded environment at private health centres.

One citizen wrote:

“I got my first dose from a private facility and it was very organised. Vaccination was on appointment only so there was no crowding.”

Where would you rather get a COVID-19 vaccine from?

A public/government health centre

None

A private health centre

Others

Graph 6

Conclusions: counter fake information, sensitize, build trust and involve local government

The government’s efforts to vaccinate its populations is being affected by different perceptions Ugandans have on the COVID-19 vaccine. The greatest contributor to Ugandans not taking up the vaccine is the lack of trust in the vaccine, which comes as a result of fake information and negative reports about the vaccine. It is therefore urgent that fake information, misinformation and negative information about COVID-19 and the vaccine are countered.

At the same time, the Ugandan Ministry of Health should continue to sensitize the public on the (positive) effects of the vaccine and build trust with Ugandan communities in order to increase its uptake of vaccinations. There were a number of citizens who stated that they were unsure of where they could receive authentic vaccines. This is something that could be rectified through community engagements and news bulletins.

In addition, as there have been recurring announcements on the different media outlets informing citizens to get vaccinated, the Ugandan government should also involve local government entities in sharing information on the vaccination sites around them and develop a more positive report about the vaccine and its purpose.
SEMA is a social enterprise aiming to increase transparency and accountability of public services, by listening to citizen feedback. We collect feedback from citizens about their most recent experience with a public office, and present this feedback in actionable formats to those in government and at public offices providing the service. SEMA has experimented with innovative ways of collecting and delivering such feedback.

Our current data collection methods include hardware feedback devices, and online, mobile and in-person customer satisfaction surveys. Although we operate as an independent research organisation, we are working in formal partnership with the Ministry of ICT, the Kampala Capital City Authority, the Justice Law and Order Sector. To read our previous COVID-19 report or more information, please visit www.talktosema.org.