

WEBINAR

‘Religion plays role in vaccination reluctance’

SHAKIRAH THEBUS

shakirah.thebus@inl.co.za

RELIGION seems to be the fly in the ointment on why people are hesitant to get vaccinated against Covid-19.

The subject was raised during a webinar hosted yesterday (Mon) by Tshikululu, the social investment fund manager and adviser.

The webinar looked at the collaboration and combined efforts needed by every sector to assist with the national vaccination drive, and unpacked key issues related to the vaccination plan – such as demand-side challenges, myths and misinformation leading to vaccine hesitancy and the predicted fourth wave.

Panellists included DG Murray Trust chief executive David Harrison, South African Clinician Scientists Society president Dr Salome Maswime, the

University of Cape Town Professor Emeritus in Public Health, Johnny Myers, and Tshikululu Social Investments specialist, Graeme Wilkinson and chief executive Tracey Henry.

Tracey Henry said although the past 19 months had been challenging, it was also a time of tremendous advancements with the acceleration of the adoption of technology in the development of Covid-19 vaccines.

To date, about 50% of the world’s population has received at least one dose of the Covid-19 vaccine, with around 27 million doses administered each day, globally, said Henry.

Harrison said that as a country, we have not seen the tremendous uptake of the vaccine that is required.

“We are operating at about 50% of where we as a country need to be in order to cross those critical thresholds

of scale before about March of next year,” said Harrison.

“It’s not cost-neutral for people to come for vaccinations. Even if the vaccination is free, there are other costs. In the context of South Africa and in the context of anxiety, some of the inertia is just holding people back. Small stones in the road that need to be lifted.”

Myers said the fourth wave would not be as bad as the third wave in terms of Covid-19 related deaths, due to the vaccine.

“Unfortunately, most of our death data is completely inaccurate for every province except for the Western Cape.”

Professor Myers said hesitancy is also seen in young people who believe they would not fall severely ill after contracting the virus, and in religious groups.

“A lot of vaccine hesitancy comes

from religious groupings and I think there needs to be some sort of policy approach to try to motivate religious leaders – first to engage with them and to train religious leaders to really have the best life interests of their congregants at heart, to engage with religious leaders who are anti-vax and then that would trickle down on the congregations as well.”

Dr Maswime said making the vaccine accessible isn’t enough.

“Just because the vaccine is there and people can get it, it doesn’t mean that people are going to use it and so its unpacking issues around perceptions, the geographical distance that people need to reach, communication and messaging, that simply making it accessible isn’t enough.

“It’s going that extra mile to understand what are the barriers to people using the vaccine.”