

Namibians approve of government's COVID-19 response, but many doubt vaccine safety

Afrobarometer Dispatch No. 518 | Christiaan Keulder and Theodora Aba Abekah Koomson

Summary

Namibia reported its first case of COVID-19 on 13 March 2020. Four days later, the government declared a state of emergency that would eventually encompass a ban on international travel and mass gatherings, social distancing, and phased lockdowns (WHO Africa, 2020).

Since then, the country has experienced four waves of rapid increases in new infections, hospitalisations, and deaths. As of 7 May 2022, Namibia had officially recorded 159,136 cases of COVID-19 and 4,026 deaths (Africa CDC, 2022).

The government's swift and massive response included an Incident Management System (IMS), a strengthened National Public Health Emergency Operation Centre (NPHEOC), and a COVID-19 Communication Centre with twice-daily news conferences.

As of late April 2022, 457,277 adults (31% of the adult population) and 20,665 children had received at least shot of a COVID-19 vaccine.

The government's stimulus and relief package included support to businesses, employees who lost income, farmers, and households (Shiimi, 2020). While no official labour force surveys were conducted during 2020 and 2021, deteriorating economic conditions cost thousands of workers their jobs in the hospitality/tourism, retail and wholesale, and manufacturing and construction sectors (Petersen, 2021). The country's GDP growth rate, which declined from -0.9% in 2019 to -7.9% at the end of 2020, is expected to grow at 1.2% in 2021/2022 (Shiimi, 2022).

While the country did not experience widespread protests against COVID-19-related restrictions or government conduct when enforcing public health mandates, misinformation about COVID-19 was widespread, spreading everything from bogus cures to anti-vaccine conspiracies (Links, 2020). In response, the government introduced regulations making misinformation about COVID-19 a criminal offence, punishable by a fine or up to six months in prison. Thus far only one person has been found guilty.

A recent Afrobarometer survey confirms the pandemic's massive toll on Namibians, both through health consequences and economic effects.

Vaccine uptake remains low, as many Namibians say they are unlikely to get vaccinated.

Overall, most Namibians are satisfied with government's response to the pandemic. But they are less positive about the government's relief efforts, and many believe that COVID-19 resources have been lost due to corruption.

Most Namibians also believe that their government is not adequately prepared for future health emergencies and should invest in preparations for such crises, even at the cost of other health services.

Afrobarometer surveys

Afrobarometer is a pan-African, nonpartisan survey research network that provides reliable data on African experiences and evaluations of democracy, governance, and quality of life. Eight rounds of surveys have been completed in up to 39 countries since 1999. Round 9 surveys (2021/2022) are currently underway. Afrobarometer conducts face-to-face interviews in the language of the respondent's choice.

The Afrobarometer team in Namibia, led by Survey Warehouse, interviewed a nationally representative, random, stratified probability sample of 1,200 adult Namibians in October and November 2021. A sample of this size yields country-level results with a margin of error of +/-3 percentage points at a 95% confidence level. Previous standard surveys were conducted in Namibia in 1999, 2003, 2006, 2008, 2012, 2014, 2017, and 2019.

Key findings

■ Effects of the COVID-19 pandemic:

- Three in 10 Namibians (30%) say a member of their household or family died of COVID-19, while more than one-third (35%) say someone in their household lost a job, business, or primary source of income due to the pandemic.

■ Attitudes toward vaccines:

- About a quarter (27%) of Namibians say they have been vaccinated against COVID-19.
- About the same proportion say they are “somewhat likely” (15%) or “very likely” (12%) to try to get vaccinated.
- More than four in 10 citizens (43%) say they are not likely to get vaccinated, including 29% who consider it “very unlikely.”
- A majority of vaccine-hesitant citizens cite concerns about the safety of COVID-19 vaccines as their main reasons.
- Only about four in 10 Namibians say they trust the government “somewhat” (22%) or “a lot” (16%) to ensure the safety of COVID-19 vaccines.

■ Government response to COVID-19:

- A majority (62%) of Namibians say the government is doing “fairly well” or “very well” in managing the response to the COVID-19 pandemic.
- About six in 10 are also satisfied with the government's efforts to minimize disruptions to children's education (61%) and to ensure that health facilities are adequately resourced (57%).
- But only 39% think the government has done a good job of providing relief assistance for vulnerable households, and more than two-thirds (68%) believe that “some” or “a lot” of the resources intended for the COVID-19 response have been lost to corruption.
- More than two-thirds (69%) of citizens approve of using the police or military to enforce public health mandates during a pandemic, but views are more divided when it comes to censoring media reporting and postponing elections in response to a public health crisis.

■ **Looking ahead:**

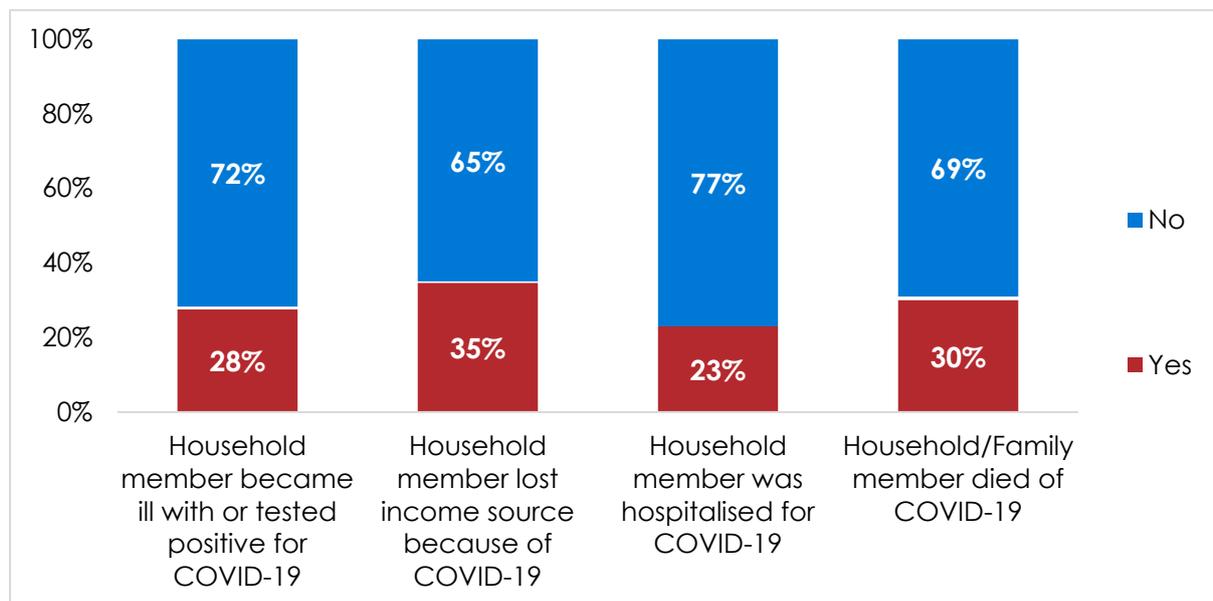
- Almost two-thirds (64%) of Namibians say the government is not prepared to deal with future public health emergencies.
- About the same proportion (62%) think the government needs to invest more in such preparations, even if it means fewer resources are available for other health services.

Effects of COVID-19

About three in 10 Namibians (28%) say a member of their household became ill with or tested positive for COVID-19. A similar proportion (30%) say someone in their household or family died of the disease. Somewhat fewer (23%) report that someone in the household was hospitalised because of COVID-19. More than one-third (35%) say someone in their household lost a job, business, or primary source of income due to the pandemic (Figure 1).

Regarding the roughly equal proportions of citizens reporting COVID-19 cases (illness or positive test result) and deaths, both of which exceeded hospitalisations, we note that while the survey questions about cases and hospitalisations asked only about members of “the household,” the question about deaths asked about “a member of your household or family member,” which may include a considerably larger pool of people.¹

Figure 1: Effects of COVID-19 | Namibia | 2021



Respondents were asked: Please tell me whether you personally or any other member of your household have been affected in any of the following ways by the COVID-19 pandemic: Became ill with, or tested positive for, COVID-19? Temporarily or permanently lost a job, business, or primary source of income? Hospitalised for COVID-19? A member of your household or family member died from COVID-19?

These numbers may provide support for the belief that due to limited COVID-19 testing and treatment capacities, as well as home treatment and deaths, official data on cases,

¹ According to the Africa CDC (2022), Namibia had recorded 4,026 COVID-19 deaths as of 7 May 2022, in a total population of approximately 2.54 million people, or about one in every 630 people.

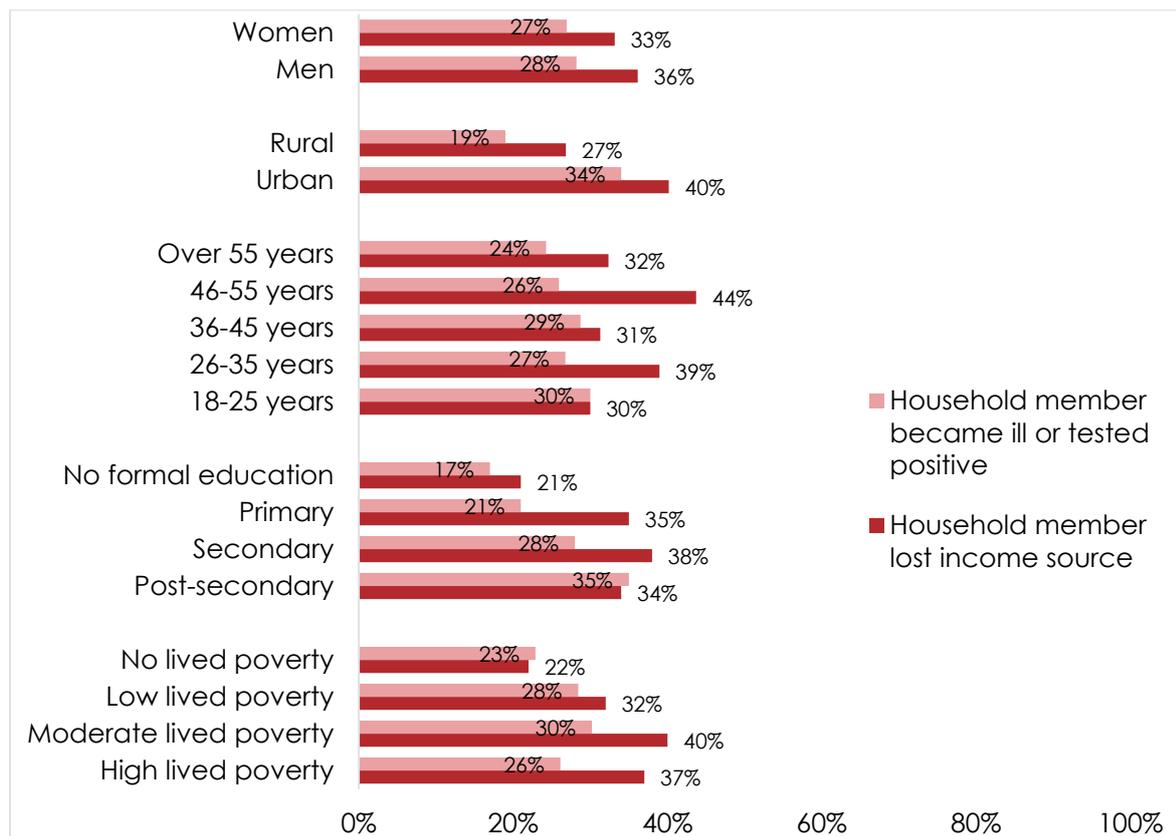
hospitalisations, and deaths may significantly under-represent the pandemic's true toll in many African countries (WHO Africa, 2021; Kreier, 2022). In other words, these findings may align with the possibility that many COVID-19 infections were never diagnosed through testing and many infected people died at home without ever receiving hospital care, although families may still have concluded that their relatives died of COVID-19.

In Namibia, a Ministry of Health and Social Services (2021) investigation in the Omaheke Region in August 2021 “confirmed anecdotal reports of delayed health seeking behaviours, wide use of unauthorized medications notably the animal medicine ivermectin, use of non validated testing kits and use of home remedies for self-treatment. ... It was observed that patients were likely to turn up late at hospital for appropriate supportive treatment leading to poor prognosis and home deaths.”

The investigation was sparked by a high case fatality rate noted in the region, but it is possible that similar behaviours and outcomes were also common elsewhere.

The effects of COVID-19 appear to be more widely experienced in cities than in rural areas. Urbanites are significantly more likely than rural residents to report losing an income source (40% vs. 27%) and becoming ill with or testing positive for COVID-19 (34% vs. 19%) (Figure 2).

Figure 2: Effects of COVID-19 | by socio-demographic group | Namibia | 2021



Respondents were asked: Please tell me if you personally or any other member of your household have been affected in any of the following ways by the COVID-19 pandemic: Became ill with COVID-19? Temporarily or permanently lost a job, business or primary source of income? (% who say “yes”)

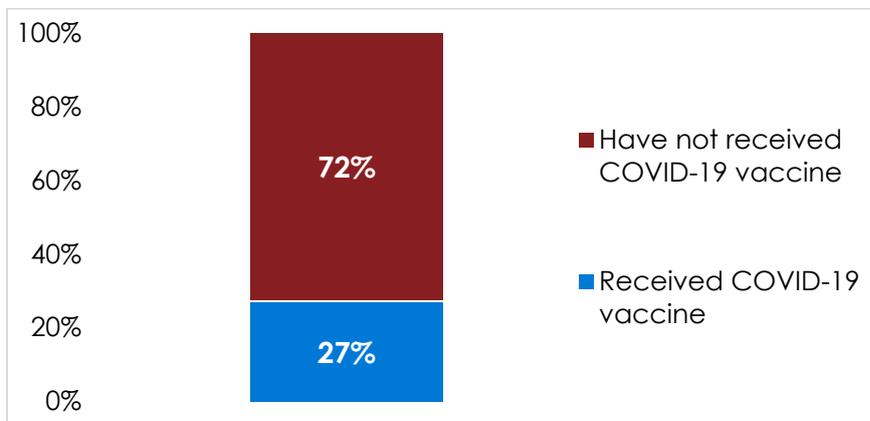
Illness and/or positive COVID-19 tests are somewhat more common among the youngest respondents (30% of 18- to 25-year-olds) than among those over age 45 (24%-26%), and increase in frequency with respondents' education level, ranging from 17% of those with no formal education to 35% of those with post-secondary qualifications.

Loss of an income source is least common among those with no formal education (21%, vs. 34%-38% of more educated respondents). But it is also more common among poorer citizens (37%-40% of those experiencing moderate or high lived poverty,² compared to 22% of the wealthy).

Attitudes toward vaccination

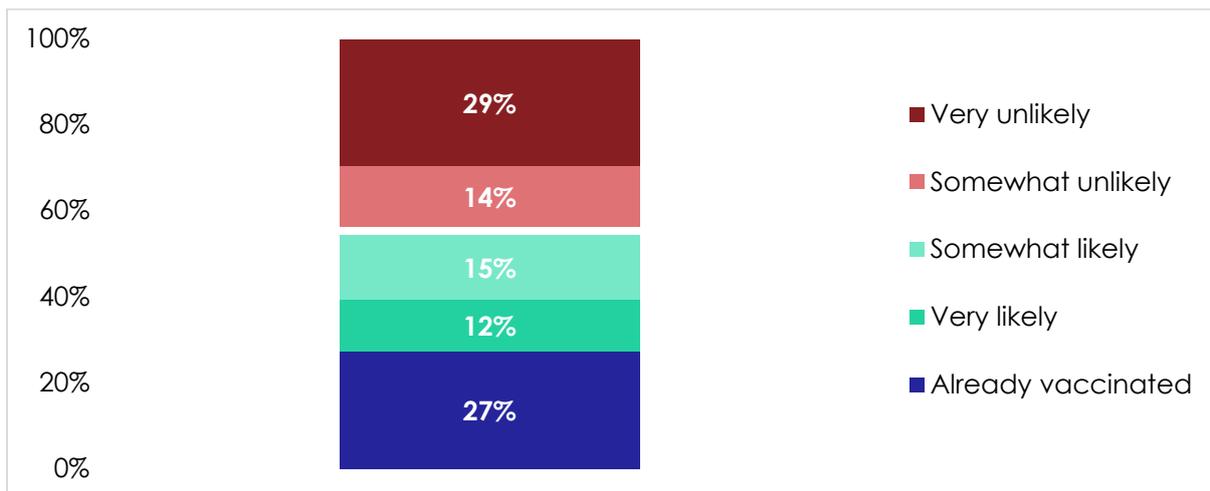
About one in four Namibians (27%) say they have been vaccinated against COVID-19 (Figure 3). More than seven in 10 (72%) have not received the shot, including more than four in 10 who say they are “very unlikely” (29%) or “somewhat unlikely” (14%) to try to get vaccinated. About one-fourth describe themselves as “somewhat likely” (15%) or “very likely” (12%) to try to get vaccinated (Figure 4).

Figure 3: Received COVID-19 vaccines | Namibia | 2021



Respondents were asked: Have you received a vaccination against COVID-19, either one or two doses?

Figure 4: Likelihood of trying to get vaccinated | Namibia | 2021



Respondents who have not yet been vaccinated against COVID-19 were asked: If a vaccine for COVID-19 is available, how likely are you to try to get vaccinated?

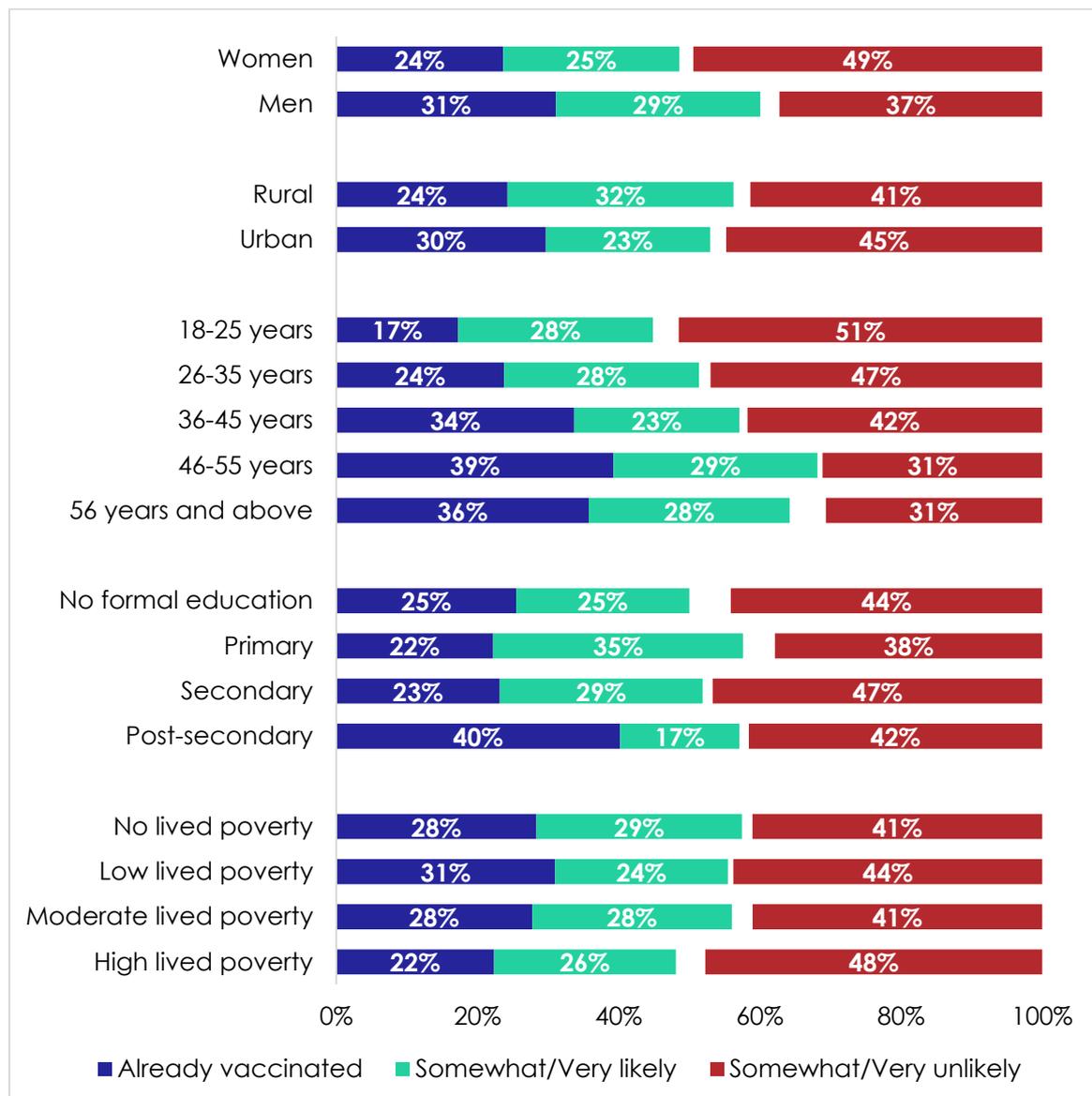
² Afrobarometer’s Lived Poverty Index (LPI) measures respondents’ levels of material deprivation by asking how often they or their families went without basic necessities (enough food and water, medical care, enough cooking fuel, and a cash income) during the preceding year. For more on lived poverty, see Mattes (2020).

Vaccination rates are higher among men (31%) and urban residents (30%) than among women (24%) and rural residents (24%) (Figure 5). Citizens over age 45 (36%-39%) are about twice as likely as young adults aged 18-25 (17%) to be vaccinated.

Highly educated citizens (40%) are also far more likely than their less educated cohorts (22%-25%) to have received the vaccine, while the poorest respondents are least likely to have done so (22%).

Vaccine hesitancy is higher among women (49% not likely to vaccinate), citizens experiencing high lived poverty (48%), and younger adults (51%) than among men (37%), those experiencing moderate to no lived poverty (41%-44%), and older adults (31%). Although the vaccination rate is higher in cities, urban citizens are also somewhat more unlikely than rural residents to want to get vaccinated (45% vs. 41%).

Figure 5: Likelihood of trying to get vaccinated | by socio-demographic group
 | Namibia | 2021

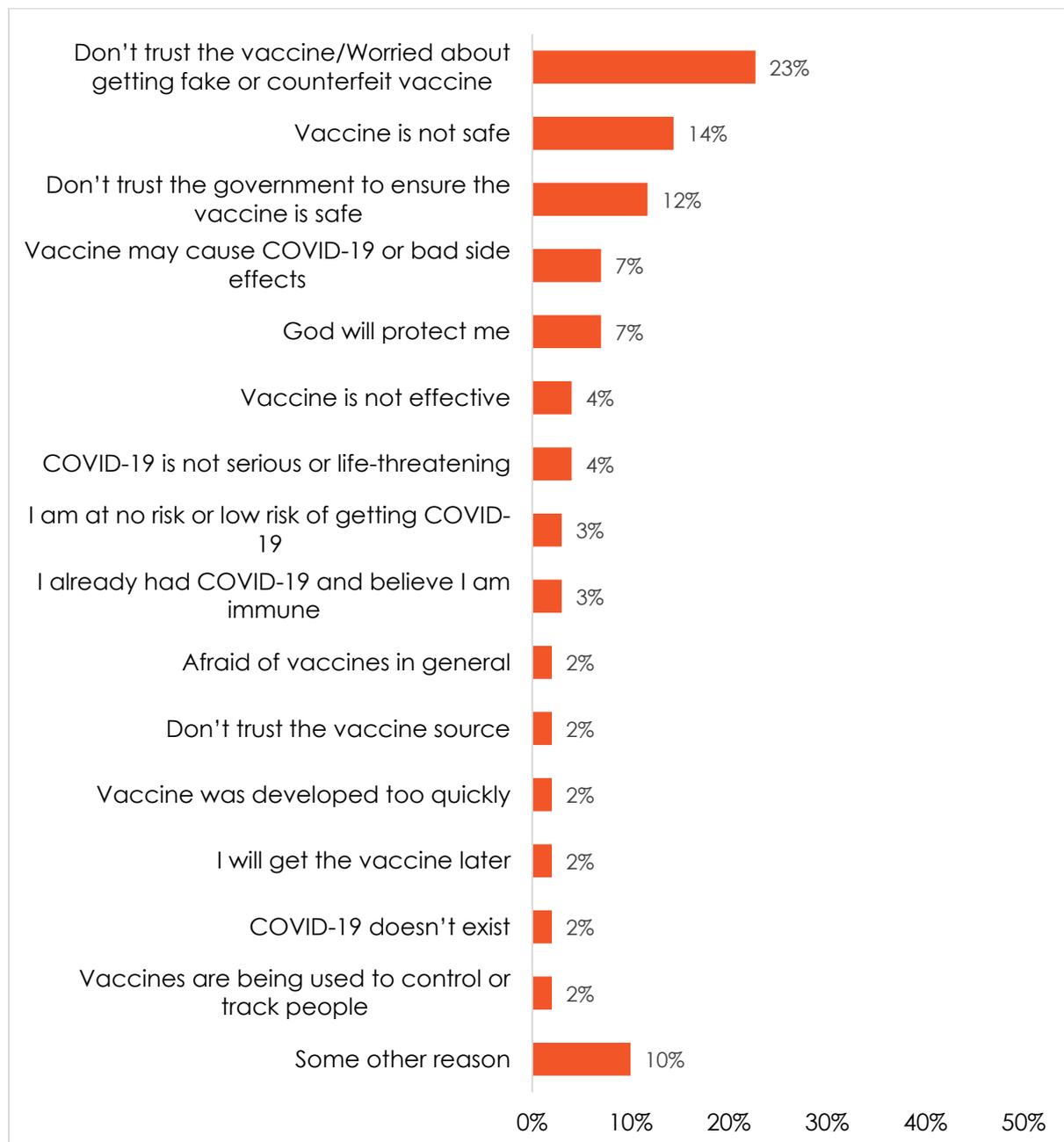


Respondents were asked: *If a vaccine for COVID-19 is available, how likely are you to try to get vaccinated?*

Among citizens who say they are unlikely to get vaccinated, a majority cite reasons related to vaccine safety as the main reason for their stance (Figure 6): They don't trust the vaccine or are worried about getting a fake or counterfeit vaccine (23%), they don't think the vaccine is safe (14%), they don't trust the government to ensure that the vaccine is safe (12%), they fear that the vaccine may cause COVID-19 or bad side effects (7%), they don't trust the source of the vaccine (2%), or they think the vaccine was developed too quickly (2%) (Figure 6).

Others believe that God will protect them against COVID-19 (7%), that the vaccine is not effective (4%), or that COVID-19 is not a life-threatening illness (4%) or doesn't exist (2%).

Figure 6: Main reason for vaccine hesitancy | Namibia | 2021

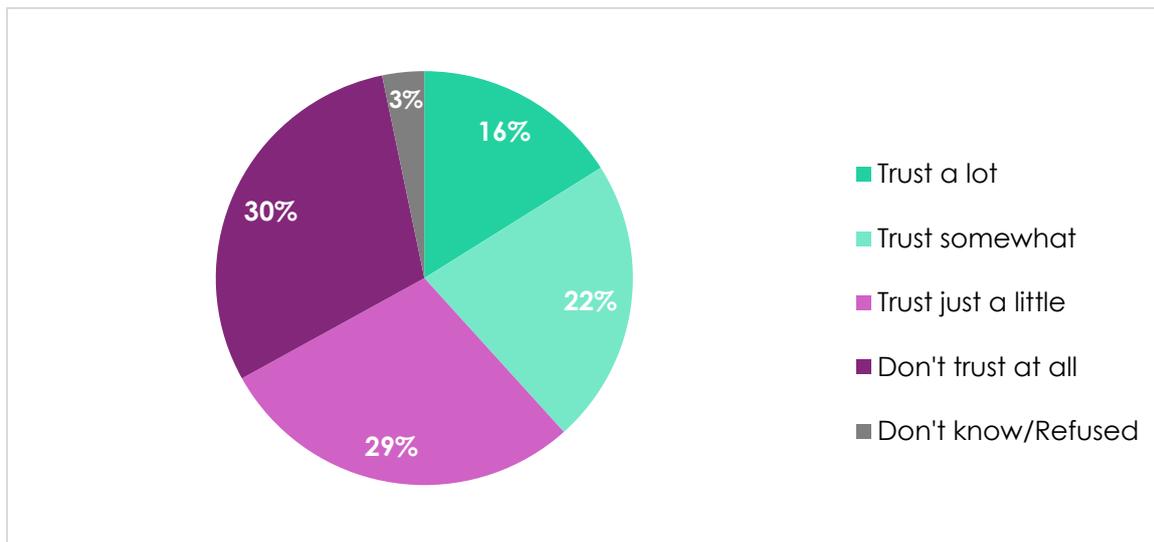


Respondents who say they are not likely to get vaccinated were asked: What is the main reason that you would be unlikely to get a COVID-19 vaccine?

Widespread concerns about vaccine safety present a major hurdle for government efforts to vaccinate the population. Only about four in 10 Namibians say they trust the government “somewhat” (22%) or “a lot” (16%) to ensure the safety of COVID-19 vaccines, while a majority express “just a little” trust (29%) or not trust at all (30%) (Figure 7).

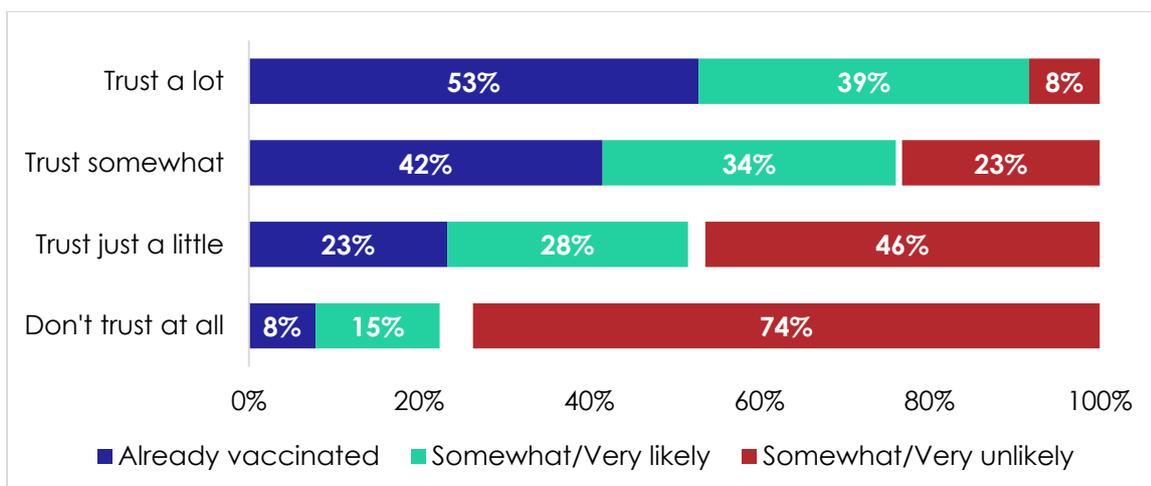
Citizens' willingness to get vaccinated against COVID-19 is strongly correlated with their trust in the government's ability to ensure the safety of the vaccine. Citizens who trust the government “a lot” to ensure vaccine safety are about seven times as likely to be vaccinated as those who express no trust at all (53% vs. 8%). Vaccine hesitancy is nine times more common among the “no trust” group (74%) compared to the “trust a lot” group (8%) (Figure 8).

Figure 7: Trust government to ensure vaccine safety | Namibia | 2021



Respondents were asked: How much do you trust the government to ensure that any vaccine for COVID-19 that is developed or offered to Namibian citizens is safe before it is used in this country?

Figure 8: Likelihood of trying to get vaccinated | by trust in government to ensure vaccine safety | Namibia | 2021



Respondents were asked:

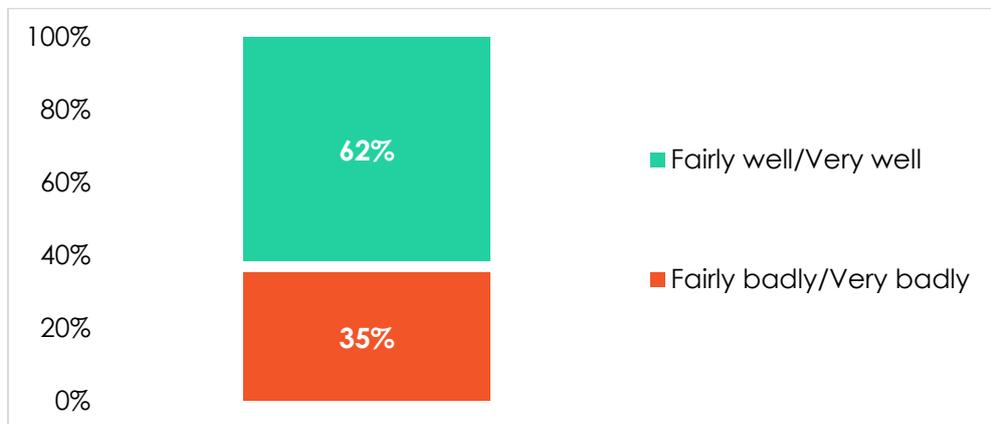
If a vaccine for COVID-19 is available, how likely are you to try to get vaccinated?
 How much do you trust the government to ensure that any vaccine for COVID-19 that is developed or offered to Namibian citizens is safe before it is used in this country?

Government response to COVID-19

While trust in the government's ability to ensure vaccine safety is relatively weak, almost two-thirds (62%) of Namibians describe the government overall performance in managing the response to the COVID-19 pandemic as "fairly" or "very" good, while 35% say it is doing a poor job (Figure 9).

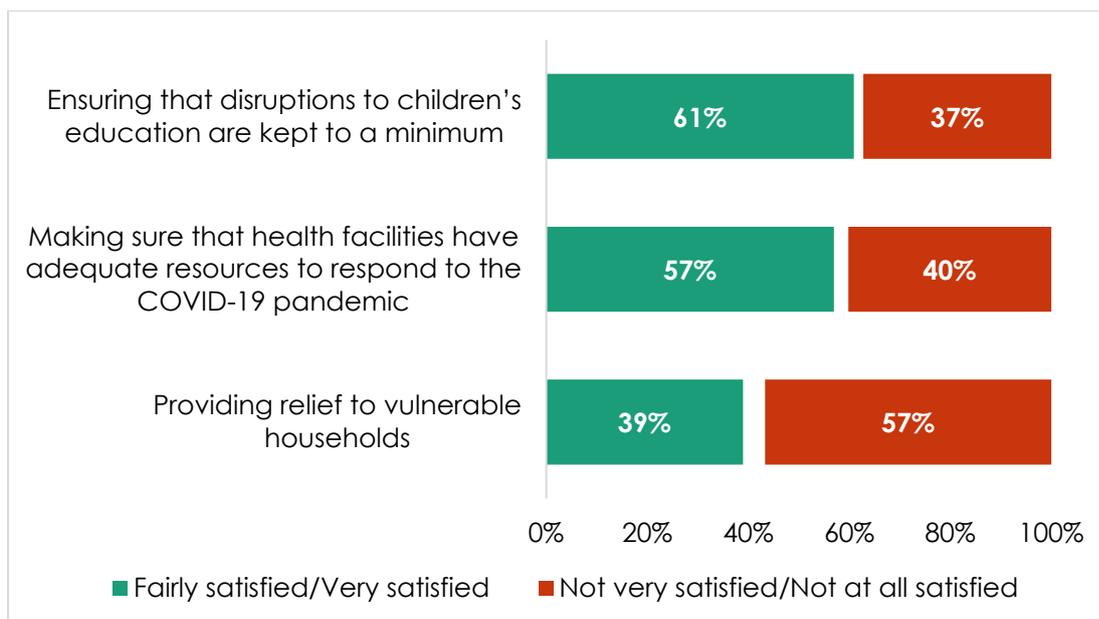
On specific aspects of the COVID-19 response, views are more mixed (Figure 10). Majorities say they are "fairly satisfied" or "very satisfied" with the government's efforts to ensure that disruptions of children's education are held to a minimum (61%) and to ensure that health facilities are adequately resourced to deal with the pandemic (57%). However, only 40% express satisfaction with the government's efforts in providing relief assistance to vulnerable households.

Figure 9: Government response to COVID-19 | Namibia | 2021



Respondents were asked: How well or badly would you say the current government has managed the response to the COVID-19 pandemic?

Figure 10: Satisfaction with government's response to COVID-19 | Namibia | 2021

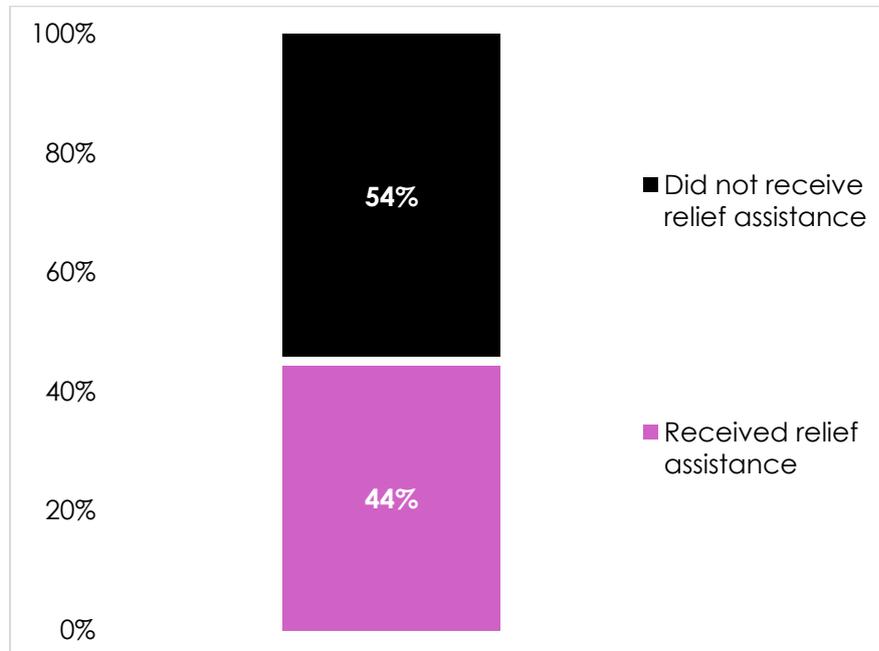


Respondents were asked: How satisfied or dissatisfied are you with the government's response to COVID-19 in the following areas?

COVID-19 relief assistance

More than four in 10 Namibians (44%) report that their household received COVID-19 relief assistance from the government, while 54% say they did not (Figure 11).

Figure 11: Access to COVID-19 relief assistance | Namibia | 2021



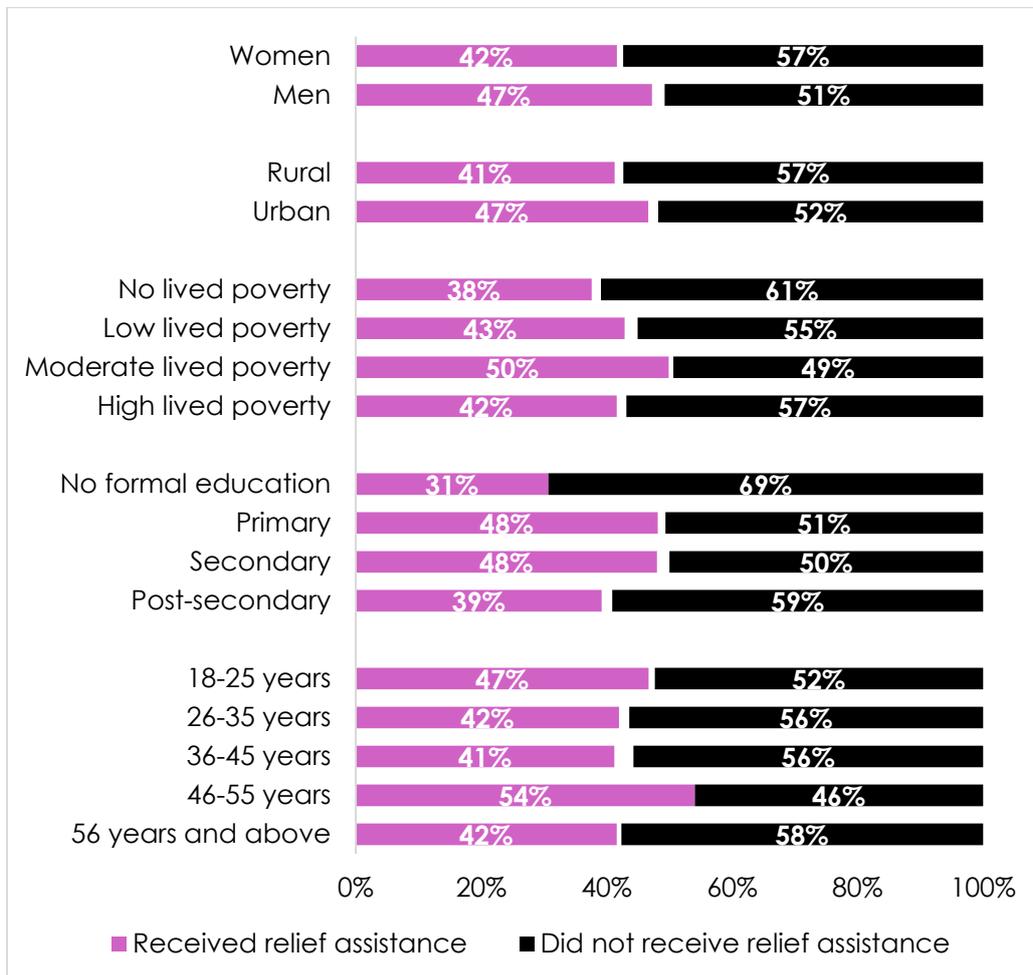
Respondents were asked: *Since the start of the COVID-19 pandemic, have you or your household received any assistance from government, like food, cash payments, relief from bill payments, or other assistance that you were not normally receiving before the pandemic?*

Urban households were somewhat more likely to benefit from government assistance than those in rural areas (47% vs. 41%), as were men compared to women (47% vs. 42%) (Figure 12). Respondents with no formal education (31%) are less likely to report having received assistance than their more educated counterparts (39%-48%), while assistance more frequently benefited households experiencing moderate lived poverty (50%) than those in other economic categories (38%-43%).

Two-thirds (66%) of citizens say that COVID-19 relief was distributed “somewhat fairly” or “very fairly,” while just 30% say the distribution was unfair (Figure 13).

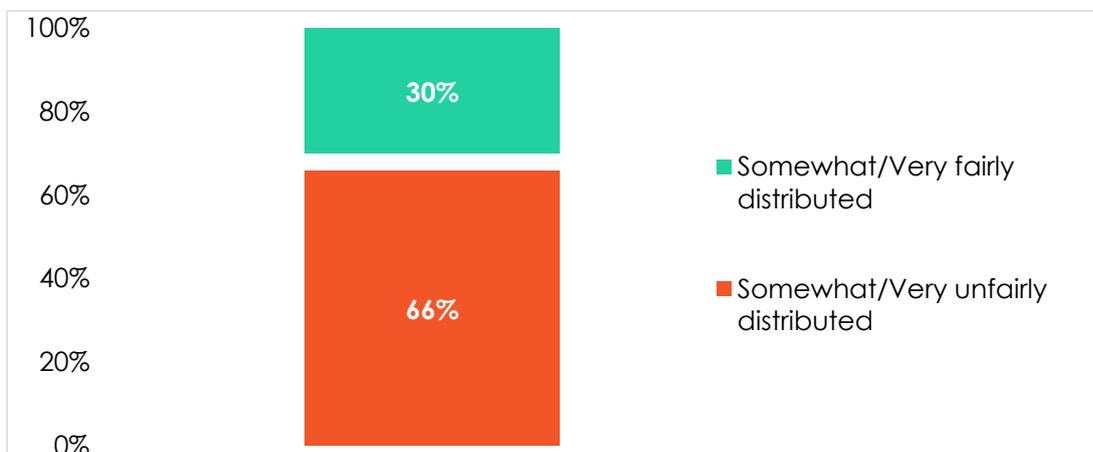
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Figure 12: Access to COVID-19 relief assistance | by socio-demographic group
 | Namibia | 2021



Respondents were asked: Since the start of the COVID-19 pandemic, have you or your household received any assistance from government, like food, cash payments, relief from bill payments, or other assistance that you were not normally receiving before the pandemic?

Figure 13: Was COVID-19 relief assistance distributed fairly? | Namibia | 2021

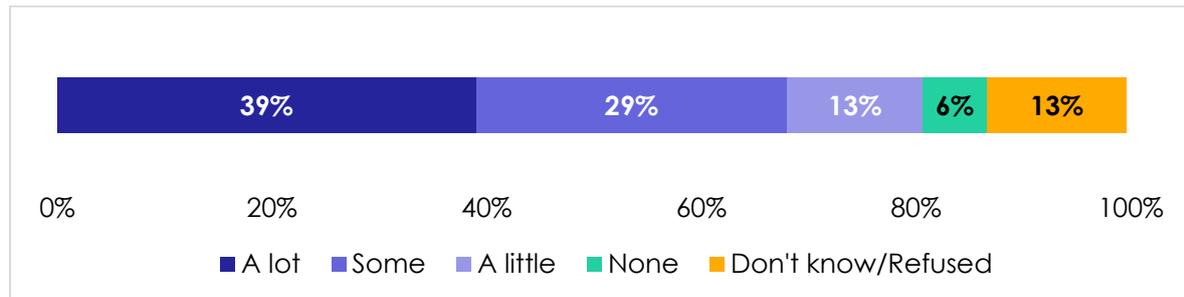


Respondents were asked: Do you think that the distribution of government support to people during the COVID-19 pandemic, for example through food packages or cash payments, has been fair or unfair?

Corruption related to COVID-19

In addition to expressing significant dissatisfaction with the fairness of government relief assistance, more than two-thirds (68%) of Namibians say they believe that “some” or “a lot” of the resources intended for the COVID-19 response have been lost to corruption (Figure 16). Only one in 20 (6%) think that none of these resources have been embezzled (Figure 14).

Figure 14: Perceived COVID-19 related corruption | Namibia | 2021



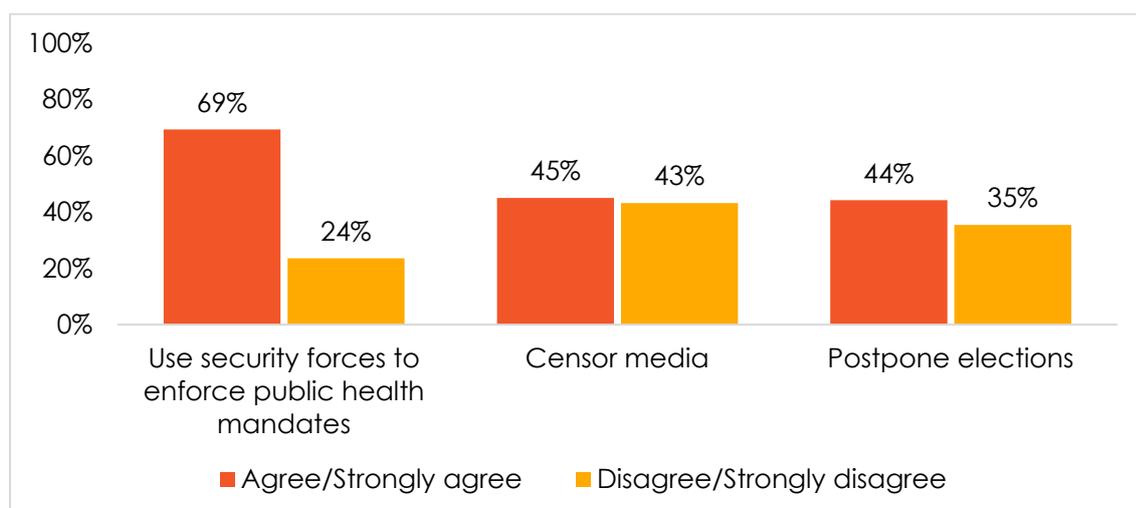
Respondents were asked: Considering all of the funds and resources that were available to the government for combating and responding to the COVID-19 pandemic, how much do you think was lost or stolen due to corruption?

Limit democratic freedoms during a pandemic?

Lockdowns and other pandemic-related restrictions in some countries have raised questions about the extent to which citizens are willing to forego certain freedoms, even temporarily, to protect public health.

In Namibia, more than two-thirds (69%) of citizens “agree” or “strongly agree” that it is justified for the government to use the armed forces or the police to enforce public health mandates during an emergency like the pandemic (Figure 15).

Figure 15: Limit demographic freedoms during a public health emergency? | Namibia | 2021



Respondents were asked: When the country is facing a public health emergency like the COVID-19 pandemic, do you agree or disagree that it is justified for the government to temporarily limit democracy or democratic freedoms by taking the following measures: Censoring media reporting? Using the police and security forces to enforce public health mandates like restrictions on public gatherings or wearing face masks? Postponing elections?

Views are divided when it comes to censoring media reporting during a public health emergency: 45% consider this acceptable, while 43% do not. About the same proportion (44%) would accept postponing elections during the pandemic, while 35% “disagree” or “strongly disagree.”

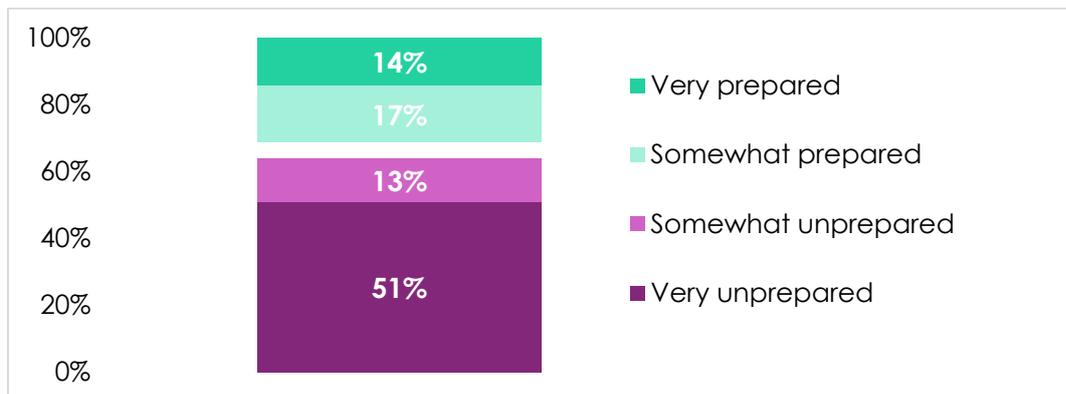
Looking ahead

After experiencing the COVID-19 pandemic, how prepared will Namibia's government be to deal with future public health emergencies?

Almost two-thirds (64%) of citizens think their government will not be prepared, including 51% who think it will be “very unprepared” (Figure 19). Only three in 10 (31%) believe government will be ready for the next public health crisis.

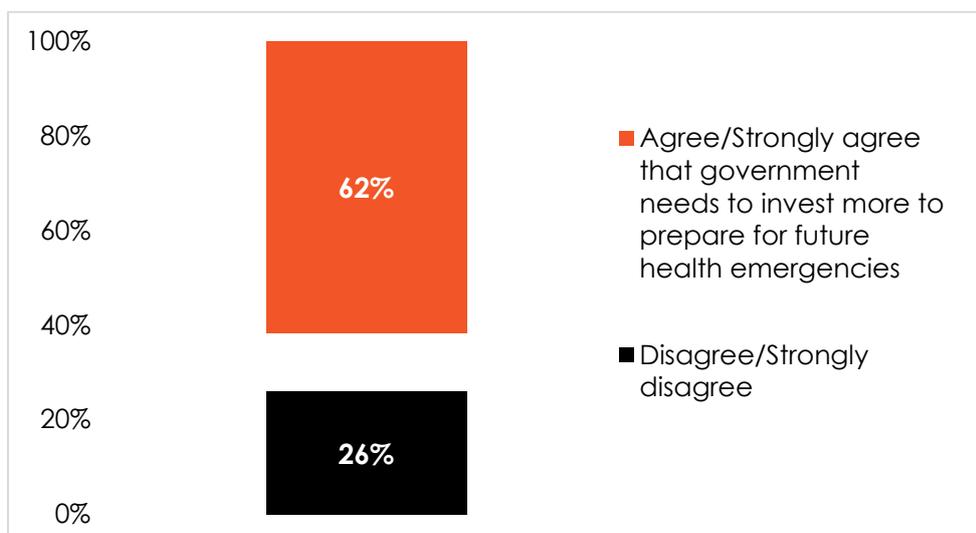
In line with these concerns, more than six in 10 Namibians (62%) “agree” or “strongly agree” that the government needs to invest more in preparing for future public health emergencies, even if it means that fewer resources are available for other health services (Figure 17).

Figure 16: Preparedness for future health emergencies | Namibia | 2021



Respondents were asked: After experiencing the COVID-19 pandemic in Namibia, how prepared or unprepared do you think the government will be to deal with future public health emergencies?

Figure 17: Invest more to prepare for future health emergencies? | Namibia | 2021



Respondents were asked: Do you agree or disagree with the following statement: Our government needs to invest more of our health resources in special preparations to respond to health emergencies like COVID-19, even if it means fewer resources are available for other health services?

Conclusion

The COVID-19 pandemic has had a major impact on Namibians, both through its health effects and its economic fallout. The pandemic has battered the country's already embattled economy, leaving the government with little fiscal room to manoeuvre.

Despite these consequences, Namibians remain reluctant to get vaccinated. Trust-related issues drive vaccine hesitancy as many Namibians do not trust the government to ensure that the vaccine is safe and many voice concerns about the safety and possible side effects of the vaccine.

Overall Namibians are quite satisfied with the government's handling of the pandemic, including its efforts to limit disruptions to children's education and to keep health facilities stocked with resources to deal with the pandemic. But they are less satisfied with government's distribution of aid relief, and a majority believe that resources meant for fighting the pandemic were lost due to corruption.

Namibians are generally willing to allow the police or military to enforce public health mandates, although they have mixed feelings about censoring the media and possibly postponing elections in response to a pandemic.

The prevailing vaccine hesitancy remains a cause for concern. Although most travel restrictions, mask requirements, and other social distancing measures have been lifted to aid the hard-hit tourism sector, the industry remains concerned about its prospects due to high vaccine hesitancy and the threat of another wave of infections.

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Christiaan Keulder is the owner of Survey Warehouse and national investigator for Afrobarometer in Namibia. Email: c.keulder@surveywarehouse.com.na.

Theodora Aba Abekah Koomson is a PhD student in accounting at the University of Ghana and an intern with the Afrobarometer Analysis Unit. Email: tkoomson@afrobarometer.org.

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