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Special Edition

SOUTH AFRICA CONTINUES TO ADMINISTER THE CORONAVIRUS VACCINE ACROSS THE COUNTRY



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Department:
Public Works and Infrastructure
REPUBLIC OF SOUTH AFRICA

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SOUTH AFRICA'S COVID-19 VACCINE ROLLOUT PLAN IS WELL-UNDERWAY

South Africa continues to administer the Coronavirus vaccine to healthcare workers across the country. This after kick-starting its trial rollout on 17 February 2021, using the Johnson & Johnson vaccine which is administered as a single dose. South Africa is using the J&J vaccine as part of its Sisonke trial rollout. The country initially received 80 000 doses of this vaccine, which President Cyril Ramaphosa said “has been shown in extensive trials to be safe and efficacious and will protect the country's healthcare workers from illness and death from COVID-19”. This batch was approved by the SA Health Products Regulatory Authority (SAHPRA) under the Sisonke protocol. More doses have been secured to inoculate healthcare workers.

The first healthcare worker to receive the Coronavirus vaccine in the country was Nurse Zoliswa Gidi-Dyosi, who was vaccinated on the same day as President Ramaphosa and Health Minister Dr. Zweli Mkhize at a public clinic in Khayelitsha, Cape Town. President Ramaphosa said he and the Health Minister chose to join the first healthcare workers to receive the shot in order to demonstrate their confidence in the vaccine and help allay any fears that people may have.

He also called on leaders in various sectors and parts of the country to lead by example and get inoculated publicly. “We will therefore witness some Premiers, MECs and leaders from civil society, religious formations and traditional leadership being vaccinated in all provinces,” revealed President Ramaphosa. The President also called on all South Africans to choose vaccination and protect one another. South Africa expects to receive more vaccine doses through Covax and from pharmaceutical companies like Pfizer.

The rollout plan was temporarily suspended in South Africa in April 2021, after the Food and Drug Administration (FDA) identified a rare and severe type of blood clot in six women in the United States who had received the Johnson and Johnson vaccine. Symptoms of the unique thrombus occurred six to thirteen days after the vaccination was administered. Minister Mkhize said the suspension of the Johnson & Johnson vaccine was based on the advice of scientists as they continue to monitor and investigate the possible relationship between the development of blood clots and the vaccine. He also revealed that under the Sisonke Protocol, 289 782 healthcare workers had been vaccinated when the US announcement was made and said there were no reports of any clots that had formed after vaccination in South Africa.



Government is currently calling on all citizens aged 60 years and above to register for vaccination on the Electronic Vaccination Data System (EVDS). The data from the system will assist government to allocate the vaccines to the vaccine service points, ensuring that enough vaccines are available on a particular vaccination day. Government also appealed to those who are technologically savvy to assist citizens aged 60 years and above, register. The system will assign a vaccination site closest to an individual's home or work. People encountering problems during the registration process are encouraged to contact the COVID-19 Hotline at 0800 029 999.

As the country's vaccination rollout is underway, the Health Department continues to avail several documents on everything we need to know about COVID-19 and vaccines. In this Special Edition of *WorxNews* we share with you, the reader all you need to know about the Coronavirus vaccine. Kindly see parts of a simple yet complete guide from Page 4.

Below is the vaccination rollout plan;

- Phase 1 began on 17 February 2021 and targets about 1.5 million frontline healthcare workers. It will run for 3 months until mid-May 2021.
- Phase 2 is planned to commence from mid-May to October 2021, targeting over 16,6 million people from vulnerable groups, like the elderly, frontline (people facing) workers and people living in congregate settings.
- Phase 3 is planned to commence from November 2021 to February 2022, targeting over 22 million healthy people 18 years and older.
- The vaccination rollout plan aims to vaccinate 67% of the population.

Get ready to also bust some COVID-19 vaccine myths, in this copy and view the COVID-19 Vaccination Frequently Asked Questions from Page 11.

Stay aware of the latest COVID-19 information by checking electronic DPWI daily bulletins.

Kindly share with us your comments and concerns by contacting the following colleagues;

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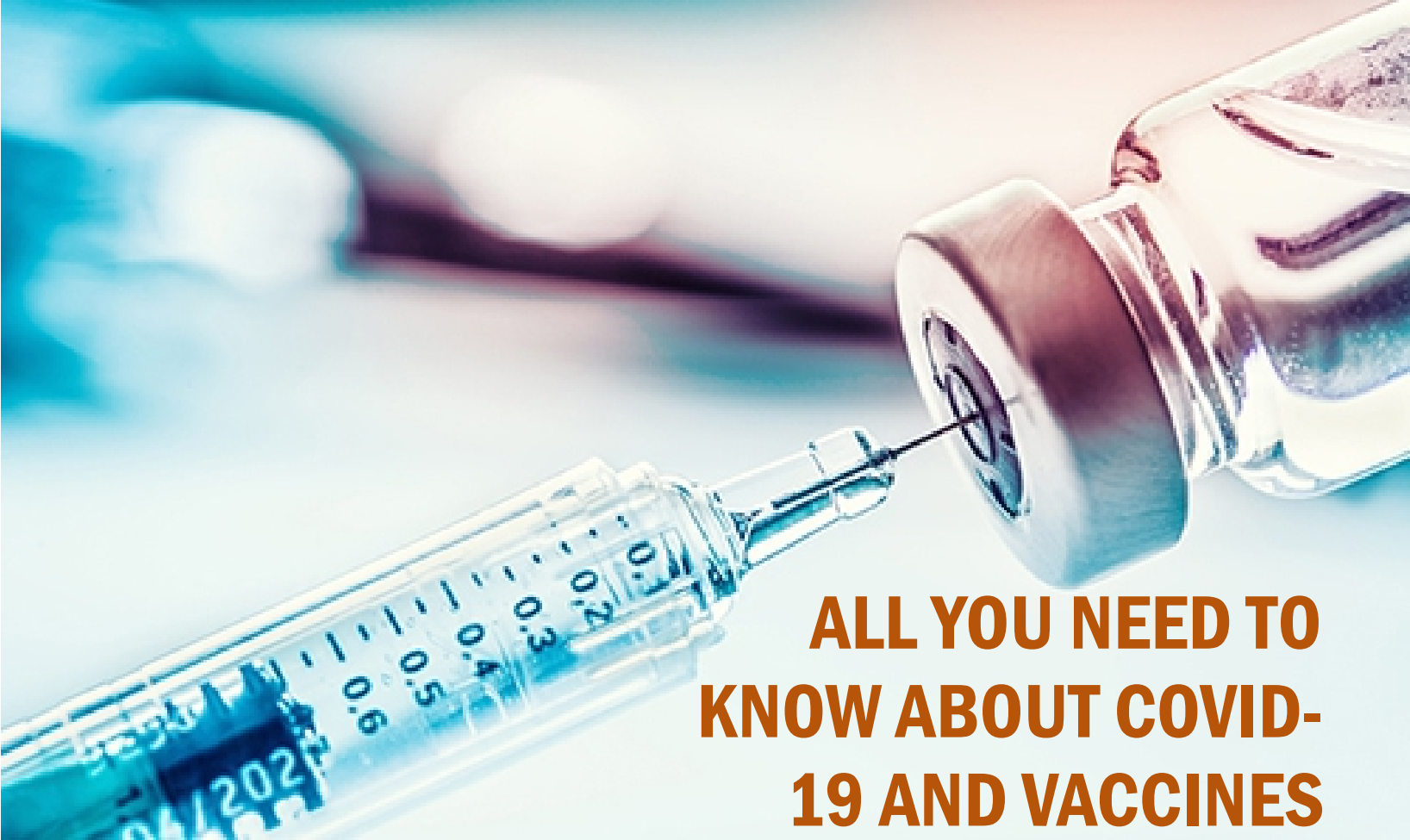
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**Izinqinamba zamanje ngohlelo
lomgomo lwaseNingizimu Afrika**

“ Noma zikhona izinhlelo zokugoma, sisanxusa umphakathi ukuthi uqhubeke nokugqoka izimfonyo, ukuma ngoku qhelelana siqhubeke sigeze izandla ngoba leligciwane lisakhona phakathi kwethu.





ALL YOU NEED TO KNOW ABOUT COVID-19 AND VACCINES

What is Coronavirus?

COVID-19 is a disease caused by a new strain of coronavirus. ‘CO’ stands for corona, ‘VI’ for virus, and ‘D’ for disease. The COVID-19 virus is a new virus linked to the same family of viruses as Severe Acute Respiratory Syndrome (SARS) and some types of common cold.

What are the symptoms of COVID-19?

Symptoms can include mainly:

Fever, cough and shortness of breath

In more severe cases, infection can cause:

Pneumonia or breathing difficulties

How does COVID-19 spread?

The virus is transmitted through direct contact with respiratory droplets of an infected person (generated through coughing and sneezing). Individuals can also be infected from and touching surfaces contaminated with the virus and touching their face (e.g., eyes, nose, mouth).

Why should I wear a mask?

When a person infected with COVID-19 coughs, sneezes, or talks, they produce respiratory droplets that can travel about two metres and can land in the mouths or noses of those nearby, infecting others with the virus. COVID-19 can also be spread by people who don’t know they have the virus since they aren’t experiencing any symptoms. Because of this, wearing masks can help slow the spread of the virus.

EIGHT steps to using your face mask correctly

It is very important that cloth masks are used correctly.

Incorrect use might result in users putting themselves at risk of spreading Covid-19.

- Only use a mask that has been washed and ironed.
- Wash your hands before putting the mask on and ensure that it covers both your nose and mouth properly.
- Make sure it fits well. Move it around to get the best fit. Never touch the cloth part.
- Once you have put on the mask, **DO NOT TOUCH YOUR FACE** again until you take it off.
- When you take it off, undo the ties, and carefully fold the mask inside out, hold it by the strings/elastic and place the mask in a container reserved for washing the cloth mask.
- Wash your hands thoroughly and dry before doing anything else.
- Wash cloth masks with warm soapy water and iron when dry.
- You must have at least two cloth masks per person so you will be able to wash one and have a clean one ready for use.

Why must I wash my hands with soap or an alcohol-based sanitizer?

COVID-19 spreads when mucus or droplets containing the virus get into your body through your eyes, nose or throat. Often, the virus can easily spread from one person to the next via hands.

How do I keep my hands clean?

To eliminate all traces of the virus on your hands, a quick scrub and a rinse won't cut it. Below is a step-by-step process for effective handwashing:

Step 1: Wet hands with running water

Step 2: Apply enough soap to cover wet hands

Step 3: Scrub all surfaces of the hands – including back of hands, between fingers and under nails – for at least 20 seconds.

Step 4: Rinse thoroughly with running water

Step 5: Dry hands with a clean cloth or single-use towel

Why must I keep a distance between myself and other people?

COVID-19 can spread through coughing, sneezing and close contact. By minimizing the amount of close contact we have with others, we reduce our chances of catching the virus and spreading it to our loved ones and within our community. This is why we should remain at least 1.5 metres away from other people.

Do you know the difference between quarantine and isolation?

Quarantine applies to anyone who was in close contact with a person infected with coronavirus and is not yet showing symptoms of infection.

Isolation is reserved for those who are already sick and/or have tested positive for COVID-19 infections, but do not require hospital admission for medical care.

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.

What is herd immunity?

When a lot of 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 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.

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), analyzes 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.

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 analyzes 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.

Are vaccines necessary to prevent the spread of COVID-19?

There is 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.

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.

Who will get the COVID-19 vaccine first?

We will begin by vaccinating our country's estimated 1.25 million healthcare workers

How do we make sure COVID-19 vaccines are safe?

Government is working closely with the South African Health Products Regulatory Authority (SAHPRA) to ensure there is no delay 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.

Who are our 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 second quarter of the year and we continue to work with various pharmaceuticals companies to ensure we immunise 67% of the population by the end 2021.

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.

How will the vaccine be distributed?

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

Phase 1 will focus on frontline healthcare workers

Phase 2 will vaccinate essential workers, persons in congregate settings, persons over 60 years and persons over 18 years with co-morbidities.

Phase 3 will focus on persons older than 18 years, targeting 22,500,000 of the population.

Who is purchasing the COVID-19 vaccine for South Africa?

Government will source, distribute and oversee the rollout of the vaccine. Government as the sole purchaser of vaccines will distribute it to provincial governments and the private sector. A national register for COVID-19 vaccinations will be established. The vaccination system will be based on a pre-vaccination registration and appointment system. All those vaccinated will be placed on a national register and provided with a vaccination card. A national rollout committee will oversee the vaccine implementation in both the public and private sectors.

MYTHS AND FACTS

Myth: Wearing masks is bad for your health

Fact: Prolonged use of any face mask has not been shown to cause carbon dioxide toxicity or lack of adequate oxygen in healthy people. Healthcare workers routinely wear masks for prolonged periods while performing their duties. Cloth masks provide an additional layer of protection by reducing the number of microorganisms that a person releases into the air. Mass mask wearing will ensure that fewer potential viral droplets are released into the air. Wearing a mask reduces the risk that someone will be exposed to the virus.

Myth: Lockdown measures deprive people of their freedoms and are in keeping with an authoritarian regime

Fact: The current measures are temporary and have been enacted to protect our nation and her people. Our freedoms will never be at risk and are protected by the Constitution, Bill of Rights and our commitment to the rule of law and democracy and freedom.

Myth: The spirits of those who have died from COVID-19 cannot rest with a plastic bag covering them

Fact: The human remains of a person who has died from coronavirus are considered contagious and should be kept only in designated mortuaries. Under no circumstances shall the human remains be directly handled, whether for aesthetic, hygiene preparations, cultural or religious reasons. No one is allowed to exhume a body for any reason unless they have permission from the relevant authorities to do so.

Myth: 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: 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 recognised 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: 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: 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: Government is working 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: 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.

**STAY
SAFE**

PROTECT SOUTH AFRICA

TOGETHER WE CAN BEAT CORONAVIRUS

Nurse Zoliswa Gidi-Dyosi is the first healthcare worker to receive the Coronavirus vaccine in South Africa



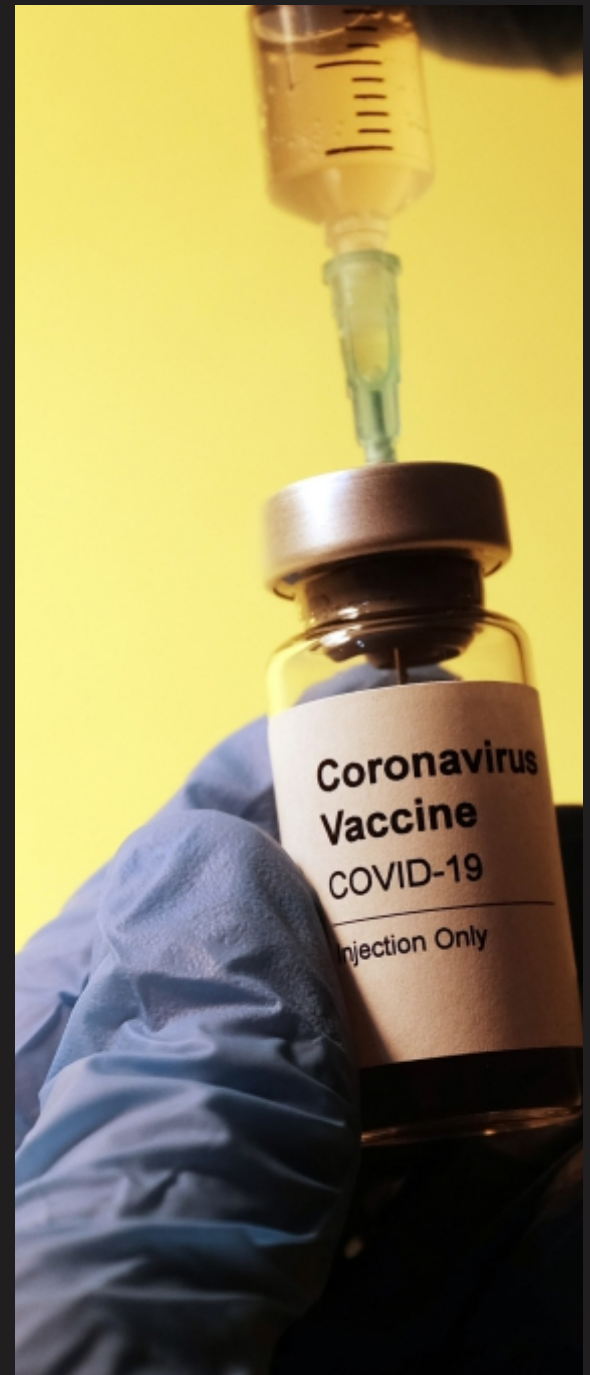
PLAYYOURPART



REPUBLIC OF SOUTH AFRICA



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Phase I

Front line health care workers (HCW)

Target population: 1,250,000

Phase II

Essential workers

Target population: 2,500,000

Persons in congregate settings

Target population: 1,100,000

Persons >60 years

Target population: 5,000,000

Persons >18 years with co-morbidities

Target population: 8,000,000

Phase III

Other persons >18 years

Target population: 22,500,000

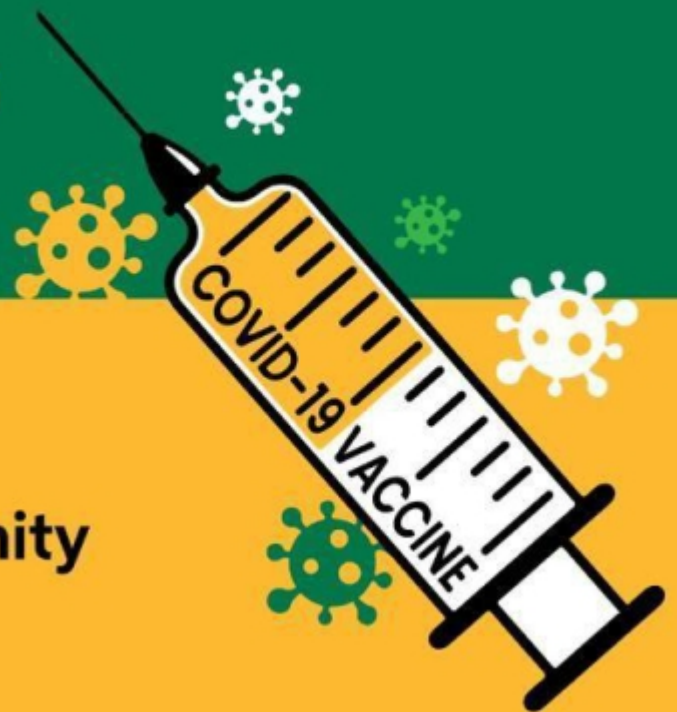
The vaccine will be given out in **3 PHASES:**

Why are Vaccines important?

- To prevent morbidity & mortality
- To achieve herd immunity & prevent ongoing transmission

When a person gets vaccinated against a disease, their risk of infection is also reduced.

#VaccineRolloutStrategySA



health

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Health
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Myth: 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: 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.

'SAFETY IS EVERYONE'S RESPONSIBILITY'

- Only employees who are not showing COVID-19 symptoms should be allowed to come to work.
- Should employees display any COVID-19 symptoms while at work, they should immediately inform their managers and be referred to the isolation room.
- The DPWI will continue communicating the Health and Safety Protocols such as giving information to employees on how to stay hygienic and safe around others as well as communicate any changes.

COVID-19 VACCINATION

FREQUENTLY ASKED QUESTIONS

What is vaccination?

Vaccination is a simple, safe, and effective way to protect people against harmful diseases, before they come into contact with them. It uses your body's natural defences to build resistance to specific infections and makes your immune system stronger.

How do vaccines work?

Vaccines train your immune system to create antibodies, just as it does when it is exposed to a disease.

When you get a vaccine, your immune system responds. It:

- recognises the invading germ, such as the virus or bacteria
- produces antibodies. Antibodies are proteins produced naturally by the immune system to fight disease
- remembers the disease and how to fight it. If you are then exposed to the germ in the future, your immune system can quickly destroy it before you become unwell.

However, because vaccines contain only killed or weakened forms of germs like viruses or bacteria, they do not cause the disease or put you at risk of its complications.

How are vaccines given to people?

Most vaccines are given by an injection, but some are given orally (by mouth) or sprayed into the nose.

Why is vaccination important?

Vaccination is a safe and effective way to prevent disease and save lives. When we get vaccinated, we are not just protecting ourselves, but also those around us. Some people, like those who are seriously ill, are advised not to get certain vaccines – so they depend on the rest of us to get vaccinated and help reduce the spread of disease.

What is "herd immunity"?

When a person gets vaccinated against a disease, their risk of infection is also reduced – so they are far less likely to spread the disease to others. As more people in a community get vaccinated, fewer people remain vulnerable, and there is less possibility for passing the germ on from person to person. Lowering the possibility for a germ to circulate in the community protects those who cannot be vaccinated due to other serious health conditions from the disease targeted by the vaccine. This is called "herd immunity."

"Herd immunity" exists when a high percentage of the population is vaccinated, making it difficult for infectious diseases to spread, because there are not many people who can be infected. But herd immunity only works if most people are vaccinated.

Why should I get vaccinated?

Two key reasons to get vaccinated are to protect ourselves and to protect those around us. Because not everyone can be vaccinated – including very young babies, those who are seriously ill or have certain allergies – they depend on others being vaccinated to ensure they are also safe from vaccine-preventable diseases.

Is there a vaccine for COVID-19?

Yes. There are COVID-19 vaccines that certain countries' regulatory authorities have approved for them to use and many more COVID-19 vaccines that are currently being developed.

Once vaccines are demonstrated to be safe and effective, they must be approved by national regulators, manufactured to exacting standards, and distributed. The World Health Organization (WHO) is working with partners around the world to help ensure equal access to safe and effective COVID-19 vaccines for the billions of people who will need them.

What must happen before COVID-19 vaccines can be delivered to countries around the world?

The first COVID-19 vaccines are beginning to be introduced in countries. Before COVID-19 vaccines can be delivered:

- the vaccines must be proven safe and effective in large clinical trials
- a series of independent reviews of the efficacy and safety evidence must be done, including regulatory review and approval in the country where the vaccine is manufactured, before WHO considers a vaccine product
- in addition to review of the data for regulatory purposes, the evidence must also be reviewed for the purpose of policy recommendations on how the vaccines should be used
- an external panel of experts convened by WHO, called the Strategic Advisory Group of Experts on Immunization (SAGE), analyses the results from clinical trials, along with evidence on the disease, age groups affected, risk factors for disease, and other information. The panel then recommends whether and how the vaccines should be used
- officials in individual countries decide whether to approve the vaccines for use in their country and develop policies for how to use the vaccines based on the WHO recommendations
- the vaccines must be manufactured in large quantities, which is a major and unprecedented challenge – all the while continuing to produce all the other important life-saving vaccines already in use
- as a final step, all approved vaccines will require distribution through a complex logistical process, with rigorous stock management and temperature control.

How quickly could COVID-19 vaccines stop the pandemic?

The impact of COVID-19 vaccines on the pandemic will depend on several factors. These include factors such as the effectiveness of the vaccines; how quickly they are approved, manufactured, and delivered; and how many people get vaccinated.

Most scientists anticipate that, like most other vaccines, COVID-19 vaccines will not be 100 per cent effective. The WHO is working to help ensure that any approved vaccines are as effective as possible, so they can have the greatest impact on the pandemic. National Department of Health FAQs on COVID-19 Vaccine Page 3 of 5.

Will COVID-19 vaccines provide long-term protection?

It is too early to know if COVID-19 vaccines will provide long-term protection. Additional research is needed to answer this question. However, it is encouraging that available data suggest that most people who recover from COVID-19 develop an immune response that provides at least some period of protection against reinfection – although we are still learning how strong this protection is, and how long it lasts.

Most COVID-19 vaccines being tested or reviewed now will need two doses.

How can we know if all countries will receive COVID-19 vaccines in a fair way?

A global alliance known as COVAX (which South Africa is part of) is working to speed up the development and manufacturing of COVID-19 vaccines and ensure that there is fair and equal access to these vaccines for all countries. COVAX will allocate vaccines across countries according to a framework developed by a group that includes ethicists, scientists, and other health experts and vetted by WHO's Member States.

What is COVAX?

COVAX is a global alliance bringing together governments, global health organisations, manufacturers, scientists, the private sector, civil society and philanthropy, with the aim of providing innovative and equitable access to COVID-19 vaccines. This will ensure that people in all corners of the world will get access to COVID-19 vaccines once they are available, regardless of their wealth.

How will the vaccines be allocated to different countries?

Once any of the COVAX vaccines have successfully undergone clinical trials and are proved to be both safe and effective, and have received regulatory approval, available doses will be allocated to all participating countries at the same rate, proportional to their total population size.

No country will receive enough doses to vaccinate more than 20 per cent of its population until all countries in the COVAX group have been offered this amount.

Will South Africa receive some of the COVAX vaccines?

Yes. In his address to the nation on Monday, 14 December 2020, President Cyril Ramaphosa announced that South Africa is set to receive initial vaccines from the COVAX facility to cover 10 per cent of our population in the early part of 2021.

What financing options were available to South Africa for the COVAX Facility?

The COVAX Facility offered self-financing countries two different options to participate in. In the "committed purchase" option, participating countries make a lower upfront payment, but need to make firm guarantees to procure doses from the facility without the option to opt-out of specific candidates. In the "optional purchase" option, participating countries make a larger upfront payment, but can opt-out of vaccine allocations while they still reserve the option for later vaccines.

In order to gain access to vaccines rapidly, South Africa agreed to participate in the "committed purchase" option of the COVAX Facility to vaccinate at least 10 per cent of South Africa's population.

What else is South Africa doing to get vaccines?

In addition to the COVAX vaccine, South Africa is also part of the African Vaccine Acquisition Task Team that is looking at alternative financing mechanisms to secure additional vaccines for African countries beyond COVAX.

Health Minister, Dr Zweli Mkhize, is part of this task team and is also looking at innovative partnerships with the private sector to ensure that South Africans have access to an effective vaccine that is suitable to local conditions.

How much vaccine is South Africa purchasing initially and why?

The Ministerial Advisory Committee on Vaccines (MAC) recommended that the commitment made by South Africa should be to purchase sufficient vaccines for 10 per cent of its population through the COVAX Facility. It also recommended continuing with the current ongoing bilateral discussions with vaccine manufacturers. Vaccination, even with the limited initial allocation, could be used to immunise front-line healthcare workers who are of critical importance to both manage COVID-19 patients and to sustain all aspects of health service delivery. Partial coverage of the population with a vaccine combined with non-pharmaceutical interventions, would significantly contribute to achieving a herd immunity threshold, thus protecting the population against forthcoming future waves of COVID.

Why did South Africa not procure vaccines directly from manufacturers?

South Africa was approached directly by vaccine manufacturers to consider bilateral purchasing agreements. However, the risk with these arrangements was that price negotiations were confidential; up-front payments could have been lost should the vaccine not have proved safe and efficacious; and South Africa would have been limited to only a few vaccines through this mechanism and could have run the risk of not having a vaccine if these candidates were not successfully licensed.

How will South Africa make sure that the vaccines we use are safe?

The Department of Health will work with the South African Health Products Regulatory Authority (SAHPRA) to ensure that whichever vaccine being recommended or made available through the COVAX Facility has met all the regulatory requirements of safety, efficacy, and quality.

When will South Africa get the first vaccines?

According to production estimates, we should expect to receive the first batch of stock in quarter two of 2021.

Will these vaccines have to be approved before it can be used in South Africa?

Yes. Before a vaccine can be rolled out the South African Health Products Regulatory Authority (SAHPRA) must assess the safety, efficacy and quality of the vaccine. SAHPRA has committed to ensuring the expeditious evaluation of these vaccines once they have been received, through various mechanisms that will shorten the timeframe it usually takes to approve a product.

Does South Africa have a strategy to distribute the vaccines once we receive them?

Yes. The Ministerial Advisory Committee on COVID-19 Vaccines has been developing a strategy for the implementation of a COVID-19 vaccination rollout. This strategy will include a review of available resources, services delivery platforms, and the required investment to ensure a successful administration to the selected priority groups. Collaboration between the private and public health sectors will be key to the successful implementation of this life-saving intervention.

What does the phased approach to vaccine rollouts mean?

A phased approach is recommended when limited supplies of vaccines become available. These are the various groupings of those who will receive vaccine tranches:

- 1) Health professionals and general health workers at high risk of infection, care home workers and traditional healers.
- 2) Persons with co-morbidities who are at risk for morbidity and mortality: These include persons 60 years and older, persons living with HIV, tuberculosis, diabetics, chronic lung disease, cardiovascular disease, renal disease, or obesity.

3) Persons in congregate or overcrowded settings: This includes persons in prison, detention centres, shelters and care homes. In addition, people working in the hospitality and tourism industry, and educational institutions.

4) Essential workers: This group includes police officers, miners and workers in the security, retail food, funeral, banking and essential municipal and home affairs, border control and port health services.

Note that the safety and efficacy of vaccines in children and pregnant women are not known and will probably be the subject of future trials and thus the framework will be revised if necessary.

How many people in South Africa can be vaccinated with the first batch of vaccines?

The first vaccines that South Africa will receive can vaccinate 10 per cent (roughly six million people) of the population. The country's membership in the COVAX facility ensures that South Africa receives its equitable share of the vaccines as it becomes available.

Who in South Africa will be vaccinated first?

The WHO's Strategic Advisory Group of Experts (SAGE) has provided recommendations about which populations within a country should be prioritised first. These include frontline healthcare workers at high risk of infection, older adults, and those people at high risk of death because of underlying conditions like heart disease and diabetes. In the second phase of the roll-out, as more doses are produced, vaccines should go to groups less at risk of being infected or of suffering badly.

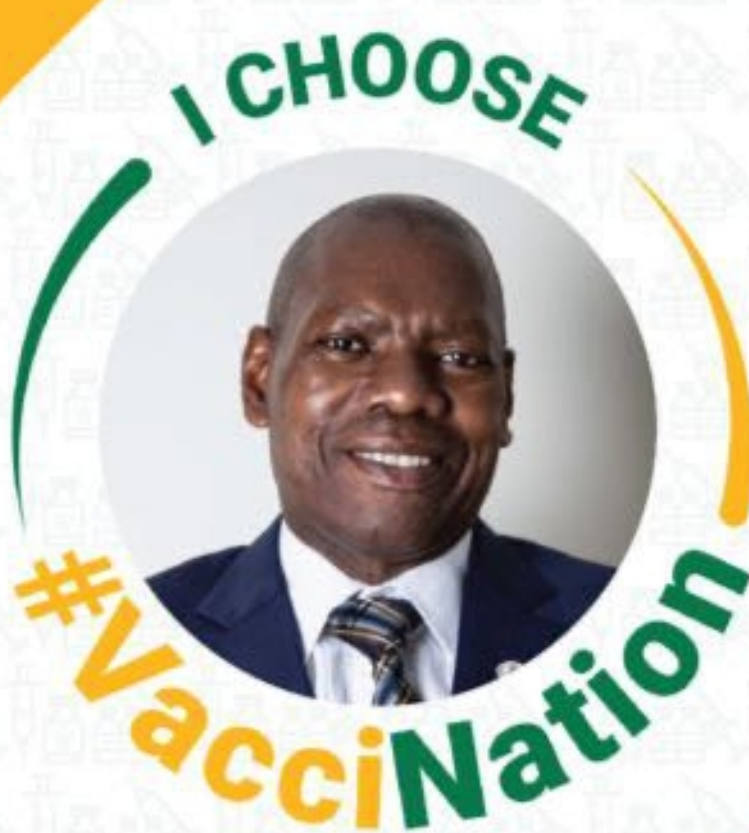
MYTH: You can test positive because of the vaccines



**You cannot
test positive
because of
the vaccines**



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



I choose to vaccinate to protect the people
I love - it will only work if we all do it

Dr Zweli Mkhize - Minister of Health

**DID
YOU
KNOW**



Were COVID-19 vaccines rushed?

Because of the risk from COVID-19 and its prevalence, it was possible to expedite the clinical trials without compromising safety:

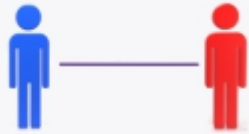
- Thousands of people signed up rapidly to participate in COVID-19 vaccine trials in 2020, compared to the 12-18 months it often takes to recruit far fewer participants for such trials
- These vaccines have been tested with more participants than many earlier vaccines for other diseases

PLEASE FOLLOW OUR '7-STEPS TO HELP PREVENT THE SPREAD OF COVID-19'

1

NO FACE MASK, NO ENTRY!

You should always wear a face mask when you come into a public building like this one, to help contain the spread of COVID-19.



DON'T STAND TOO CLOSE TO OTHER PEOPLE!

Please stand at least 1.5 metres away from other people. Follow the floor markers for physical distancing.

2

3

GO THROUGH TEMPERATURE SCREENING!

As a precautionary measure, all staff and visitors are required to go through temperature screening.



REMOVE YOUR GLOVES UPON ENTERING THIS BUILDING!

You should follow strict hand washing and sanitisation procedures.

4

5

USE HAND SANITIZER!

You can use your own sanitizer/wet wipes, in the presence of security personnel, ONLY if there is proof that these have at least 70% alcohol concentration.



ONLY THREE (3) PEOPLE ALLOWED INSIDE THE LIFTS!

Staff or visitors who are fit and younger, are encouraged to use the stairs.

6

7

WASH YOUR HANDS WITH SOAP FOR 20 SECONDS!

You should ALWAYS use soap and water to wash your hands after using the bathroom. Scrub your hands for at least 20 seconds.



For more infor:

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