



Salig Bangsamoro

(Trust Bangsamoro) is Rooted in Trust Philippines' biweekly rumor bulletin. Rooted in Trust is a global and local humanitarian response run by Internews to fight the spread of rumors on COVID-19. In the Philippines, the focus is on the Bangsamoro Autonomous Region in Muslim Mindanao (BARMM).

SALIG BANGSAMORO SPECIAL EDITION: COVID-19 VACCINE COMMUNITY BULLETIN | DECEMBER 18, 2020

What are people saying?



In this special edition, we highlight rumors circulating about COVID-19 vaccines and provide the basic information you need to know to counter these rumors.

"Vaccines are not safe, they have uses not related to treatment COVID-19"

We have documented rumors related to fear that COVID-19 vaccines are not safe. Rumors about vaccines that will cause you to have the disease and will be enforced next year recently resurfaced while there are rumors saying vaccines are dangerous and part of an evil plan:

- "There's a plan that COVID-19 vaccine will be compulsory in 2021 and of the 1,000 people who will be vaccinated, 10 of the vaccines have disease mixed on them. Those who will be vaccinated will feel the side effects in 5 years..."
- (Male, 60+ years old)
- "Nowadays, it is dangerous to be injected by the vaccine. In other countries, people died due to COVID-19 vaccine." (Male, 26-35 years old)
- "The QR Code ensures you a slot to be vaccinated. It is a Luciferian Agenda that sold your soul to the devil." (Male, 19-25 years old)

The recent news on the COVID-19 vaccine has given us hope to solve the pandemic – a light at the end of the tunnel. However, it also raises concerns and doubts, and this is not actually the first time. In the past, people also tend not to believe in vaccines. There are many possible reasons why people are hesitant to believe the COVID-19 vaccine one of which is the record speed of the development and trials. Since the virus is new to us, the uncertainties about new vaccines remain.

The commonly asked question is: These vaccines have been rushed, so are they safe? To measure safety is an essential part of vaccine trials right from pre-clinical trials when a vaccine candidate is tested in animals to human trials from Phase 1 to 3. But it does not stop there. Safety is monitored when the vaccine is rolled out to high-risk groups first, and then in the general population.

So to speed up trials, scientists overlap phases of the trials. But that doesn't mean that they compromise safety. Some trials were paused when there were safety concerns, but they were quickly resumed once it was found out that the medical problems were not related to the vaccine candidate. The public can be reassured that safety is a primary concern of researchers and they will continue to monitor it.



What are vaccines?

Vaccines are the single most, lifesaving and cost-effective medical intervention so far according to the World Health Organization.

Vaccines are biological product given to healthy people to prevent life-threatening infectious diseases. While treatments like medicines aim to cure people from disease, vaccines prevent them.

Vaccines reduce the risks of getting a disease. They work with your body's natural defenses to build protection against infections and make your immune system stronger. Most of the vaccines are given through injection, but some are given by mouth or sprayed into the nose.

DID YOU KNOW

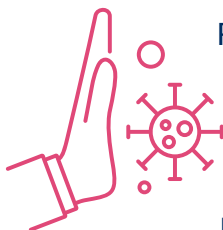
Vaccines have wiped out some of the most dangerous and fatal diseases in human history. The smallpox vaccine created in 1796 was the first successful one. The WHO declared smallpox eliminated in 1980. Today there are vaccines available to protect against at least 20-life threatening diseases like polio, measles, mumps, diphtheria, tetanus, rabies, and others. These vaccines save 3 million lives every year.

When you get a vaccine, your immune system:

Recognizes the invading germ, such as the virus or bacteria



Produce antibodies – proteins that are produced naturally to fight disease



Remembers the disease and how to fight it. Your immune system can quickly destroy it before you become unwell.



What is COVID-19 vaccine?

A vaccine for COVID-19 will help to bring this pandemic under control when combined with effective testing and existing prevention measures. There seems to be light at the end of the tunnel. People who have serious illness and are not advised to get vaccines will depend on the rest of those who will get vaccinated and help to reduce the spread of disease.

On November 16: Moderna announced that their COVID-19 vaccine has 94.5% efficacy based on Phase 3 clinical trials.

On November 18: Pfizer and Germany's BioNTech announced that their COVID-19 vaccine has 95% efficacy, even better than the 90% found in its initial analysis, and they will apply for emergency use authorization (EUA) from the US Food and Drug Administration (FDA).

On November 23: AstraZeneca, which partnered with the University of Oxford, announced that its COVID-19 vaccine reduced the risk of contracting the virus by an average of 70.4%, according to an interim analysis of large Phase 3 trials conducted in the UK and Brazil

Will it be safe and effective?

Vaccines undergo long trials and challenges to make sure it is effective and safe. In the Philippines, the Food and Drug Administration is the country's regulatory body to review the vaccines' safety. Globally, the WHO coordinates with a number of independent technical groups that review the safety of vaccines prior to and even after they have been introduced. The approved vaccines have gone through rigorous tests and clinical trials to show that they are safe and effective in controlling the disease.

What is vaccine efficacy and effectiveness?

VACCINE EFFICACY is used to measure how well a vaccine works to prevent a particular disease (in this case COVID-19) in controlled, research environments.

VACCINE EFFECTIVENESS studies examine how well a vaccine prevents a particular disease in the "real world" where people are doing things like going to the grocery store, work, and school.

If a vaccine has 95% efficacy, using an example of 100 trial participants in a given trial of a vaccine, 95 patients would not contract the disease, and 10 would contract COVID-19.

When the vaccines are distributed to large populations around the world, scientists will then be able to calculate vaccine effectiveness in real-world settings. Real-world vaccine effectiveness is a much more reliable and accurate term for telling us how helpful a vaccine is at preventing disease in daily life – not just in a controlled, research setting.



When will it be available?

The results announced by Pfizer-BioNTech and Moderna in mid-November have raised hopes that COVID-19 vaccines will start to become available between early-to-mid-2021, and also, perhaps, that other vaccines against the disease will also prove effective.

The first vaccines that will be available are likely to be two-dose vaccines, meaning it will be at least a month after you get the drug before you build your immunity enough to be confident that the virus won't make you sick.

In the best-case scenario, it will be late July or early September 2021 before most of the public is vaccinated. That is if people do not hesitate to get vaccinated if the vaccines get approval soon if state and local governments can organize distribution if the vaccines work as they are supposed to and if the drug companies can manufacture the vaccines at the speed everybody hopes they can.



Will it be affordable?

To make sure that any effective vaccine that emerges would be distributed equally around the world, regardless of where it was invented or of a country's ability to pay for it, COVID-19 Vaccine Global Access or COVAX was created.

COVAX aims to address strong global concerns about vaccine access. COVAX is designed to discourage national governments from hoarding a COVID-19 vaccine and to focus on first vaccinating the most high-risk people in every country.

COVAX proposes that all participating countries including the Philippines, regardless of income levels, will have equal access to these vaccines once they are developed.

The initial aim is to have 2 billion doses available by the end of 2021, which should be enough to protect high risk and vulnerable people, as well as frontline healthcare workers.

Wealthy countries that join COVAX will finance the vaccine purchases from their national budgets & will partner with 92 poorer nations supported through voluntary donations to the plan to ensure vaccines are delivered fairly.

To date, 76 upper-middle-income and high-income countries have signed up, agreeing in principle to procure COVID-19 vaccines through COVAX for their populations.

For lower income funded nations, who would otherwise be unable to afford these vaccines, as well as a number of higher-income self-financing countries that have no bilateral deals with manufacturers, COVAX is a lifeline and the only viable way in which their citizens will get access to COVID-19 vaccines.

COVAX

is composed of three orgs:

GAVI – the Vaccine Alliance, the Coalition for Epidemic Preparedness Innovations (**CEPI**), and the World Health Organization (**WHO**).

How some of the Covid-19 vaccines compare

Company	Type	Doses	How effective*	Storage	Cost per dose
Oxford Uni-AstraZeneca	Viral vector (genetically modified virus)	x2	62-90%	Regular fridge temperature	£3 (\$4)
Moderna	RNA (part of virus genetic code)	x2	95%	-20C up to 6 months	£25 (\$33)
Pfizer-BioNTech	RNA	x2	95%	-70C	£15 (\$20)
Gamaleya (Sputnik V)	Viral vector	x2	92%	Regular fridge temperature (in dry form)	£7.50 (\$10)

*preliminary phase three results, not yet peer-reviewed

Source: Respective companies, WHO



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COVID-19 vaccine: Status in the Philippines

The Philippines is actively negotiating with vaccine companies to secure at least 50-60 million doses by the first quarter of 2021. The government is working with China's Sinovac Biotech and Russia's Gamelaya Research Institute to ensure that this will be achieved. The more vaccine companies we get in touch with, the higher chances that we achieve our 50-60 million target by January to March 2021.

2.6 million doses of the COVID-19 vaccine from AstraZeneca from the United Kingdom were already secured by the government with support from the private sector and are expected to arrive by May or June next year. Half of these will be used by the government, while half will be used by private companies in the country

WHAT DOES ASTRAZENECA CONTAIN?

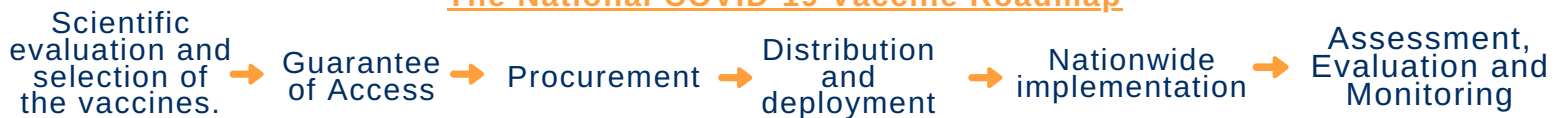
AstraZeneca contains a weakened version of a common cold virus that infects chimpanzees but does not cause illness in humans. Scientists have added the genetic code for the spike protein from the new coronavirus to this modified virus. When cells inside the body read the DNA, they use it to create copies of the spike protein. Because this is only a small fragment of the coronavirus, it can't cause infection or make a person ill but will teach our bodies to recognize and fight off future infection

WHY ASTRAZENECA?

- ✓ All ages protection
- ✓ Heat tolerant
- ✓ Manufactured locally
- ✓ Low cost
- ✓ Easily integrates into the health system

The government is targeting to vaccinate 60-70% of the population to achieve herd immunity where enough people will be protected against the disease. Priority will be given to the front liners (health workers, government workers from other agencies involved in the response, vulnerable groups such as the elderly, indigent Filipinos, and uniformed personnel of both the police and military.

The National COVID-19 Vaccine Roadmap



COVID-19 Vaccine: Frequently Asked Questions

1. Will I get COVID-19 from the vaccine?

None of the vaccines in development use the live virus that causes COVID-19. The goal of the vaccine is to teach our bodies to recognize and fight the virus that causes COVID-19. Sometimes this process may cause symptoms such as fever which are normal and are indicative of our body's way of building immunity. [Facts about COVID-19 Vaccines \(cdc.gov\)](#).

2. Will I test positive on COVID-19 tests if I get vaccinated?

COVID-19 tests are used to determine whether you have a current COVID infection. Vaccination will not cause you to test positive in viral tests. It may however give a positive result in Antibody tests since vaccines work so that bodies will produce these antibodies to fight off infections. [Facts about COVID-19 Vaccines \(cdc.gov\)](#).

3. Once we have a vaccine, the population will be immune through herd immunity, COVID19 will be eliminated, and everything will return to normal, right?"

NO. Initially, vaccines will be limited, so community immunity or herd immunity will build up very slowly. Returning to pre-pandemic activities will not happen overnight.

4. Will other vaccines help protect me from COVID-19?

There is no evidence that any other existing vaccine will protect you against COVID-19. [Coronavirus disease \(COVID-19\): Vaccines \(who.int\)](#).

5. If I get a coronavirus vaccination, do I still have to wear a mask? Physical distance?

Yes, since it may take time before everyone gets vaccinated. And, until we are certain of how well the vaccine works in a mass-scale, we should continue to practice precautions such as mask-wearing, physical distancing, frequent handwashing, and avoiding crowded places and close contacts. [COVID-19 Vaccine: What You Need to Know | Johns Hopkins Medicine](#)



We welcome your feedback, questions, and suggestions to help local media produce reliable and accurate reporting on COVID-19. Please contact: **Kia Obang, Data Analyst** (kobang@internews.org) or **Paola Mikaela Alpay, Information Manager** (palpay@internews.org)