Proposed Project Title: Exploring COVID-19 vaccine myths, misinformation, misconceptions and sources among the PLHIV on the COVPN 3008 study at Matero CRS; and among the PLHIV at ART clinics in Lusaka, Zambia.

Proposed Project Dates: Flexible 8 -10 weeks On-site between (May 2024 – September 2024) Project

Project Site: Lusaka, Zambia (The Center for Infectious Disease Research in Zambia (CIDRZ) Matero Clinical Research Site (CRS)

Project Overview: With the coming of the COVID-19 pandemic, not only came with the world experience of a rapid spread of a deadly virus, but also misinformation and disinformation around it. The rate at which the infodemic was rising was too fast, with information which was false or misleading on digital platforms and in physical environments during COVID-19 pandemic. This may have contributed to the confusion and risk-taking behaviours observed during this period that may have resulted in self-harm health but also posed an increased risk to others. Understanding the COVID-19 vaccine myths, misinformation and misconceptions may not only help us with the COVID-19 but any other future pandemics and/or HVTN vaccine related work with regard the local community. One of the major topics of discussion in The HIV Trials Network (HVTN) is How to handle vaccine and science disinformation. Therefore, by understanding the common local community COVID-19 myths, misconceptions and misinformation especially amongst PLHIV, is critical to develop tailored strategies to increase acceptability of the COVID-19 vaccine and decrease hesitancy.

Project Summary: This study aims to highlight the common COVID-19 vaccine myths, misconceptions and misinformation; including sources amongst participants on the COVPN 3008 study at the Matero CRS and PLHIV at the ART clinics in Matero and George Clinic in Lusaka, Zambia. The study will target 200 participants. This will include the 100 participants enrolled in the COVPN 3008 (Ubuntu) study at the CIDRZ Matero CRS and 50 people living with HIV (PLHIV) at the ART clinics at Matero Hospital and George clinics respectively. 50 participants of which will have an in-depth focused interview; divide equally across the Matero CRS and ART clinics. This study will be an exploratory descriptive qualitative design, using purposive and convenient sampling methods. To highlight some of the factors contributing to vaccine reluctance amongst PLHIV in Zambia and among the COVPN 3008 (Ubuntu) study participants, we propose using surveys and/or in-depth interviews based on the WHO's Behavioral and Social Determinants (BeSD) paradigm, which allows for the investigation of a wide range of drivers of vaccination uptake. The study objectives will include:

1) The major study objectives and endpoints needed to achieve these objectives.
   a. General Objective
      i. This study aims to identify the common COVID-19 vaccine myths, misinformation, and misconceptions mostly amongst PLHIV that may contribute to vaccine hesitancy in this population in Lusaka, Zambia.
   b. Specific Objectives
      i. To identify the common COVID-19 vaccine myths, misinformation, and misconceptions; amongst 100 PLHIV enrolled in the COVPN 3008 (Ubuntu) study at Matero CRS; and 50 PLHIV in the ART clinics at Matero Hospital and George Clinic respectively, in Lusaka, Zambia.
      ii. To identify the common sources of misinformation on COVID-19 vaccines amongst 100 PLHIV enrolled in the COVPN 3008 (Ubuntu) study at Matero CRS; and 50 PLHIV in the ART clinics at Matero Hospital and George Clinic respectively, in Lusaka, Zambia.
Regulatory requirements for the project and plans for completing them: Ethical approval will be acquired from The University of Zambia Biomedical Research Ethics Committee (UNZABREC) and The National Health Research Authority (NHRA) before conducting the study. The CRS staff will assist in the development and completion of site specific documents. Every effort will be made to protect participant privacy and confidentiality to the extent permitted by law. Study-related information will be stored securely at the CIDRZ Matero research site (CRS).

Given that local ERB turn-around time is estimated to be around average 6-8 weeks. The clinical research site (CRS) will ensure that study protocol and protocol related documents are submitted, and approvals are acquired before the scholar arrives at the site.

Expected Deliverables:
- HVTN – presentation
- Manuscript for submission

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