REGIME CHANGE AND CRISIS MANAGEMENT IN TANZANIA:

A COMPARATIVE STUDY ON MANAGING COVID-19 PANDEMIC IN

DAR ES SALAAM

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CERTIFICATION

The undersigned certifies that he has read and hereby recommends for acceptance by the Open University of Tanzania a Dissertation entitled: **Regime change and Crisis Management in Tanzania: A Comparative Study on Managing COVID-19 Pandemic in Dar es Salaam**. In partial fulfilment of the requirements for the Degree of Master of Arts in Governance and Leadership (MA GL).

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Date

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DECLARATION

I, Lubunga Kakozi, declare that, the work presented in this dissertation is original. It has never been presented to any other University or Institution. Where other people's works have been used, references have been provided. It is in this regard that I declare this work as originally mine. It is hereby presented in partial fulfilment of the requirements for the Degree of Master of Arts in Governance and Leadership.

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Signature

…………………

Date

DEDICATION

To my elder brother who funded my postgraduate studies.

ACKNOWLEDGEMENT

ABSTRACT

The first quarter of the 21st century has witnessed a number of crises, from terrorism to forced migration, and increased digitalisation to epidemics and pandemics. How will a government manage to effectively control such threats for a sanito-economic and socio-political well-being of its population? This study assessed the ability of democratic governance to control crises; the aim being to determine effective measures to be taken in the fight against such crises like COVID-19 pandemic. Using a comparative analysis, this study scrutinized measures adopted by both, the fifth and sixth Tanzania regimes in the fight against SARS-CoV-2 infections and deaths in Dar es Salaam. A total of 370 respondents from Ilala, Kinondoni, and Ubungo municipalities participated in this study. Also, literature survey and documentary analysis were carried out in order to get informed assumptions and people's preferences. The research found a correlation between tough measures and effective curbing of COVID-19 pandemic. Further studies are needed to establish a causal relationship between exceptionally tough measures and population safety and well-being in critical situations.

Keywords: Democratic governance, COVID-19 Pandemic, Tough measures, Population safety

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ABBREVIATIONS

As   - Anal swabs

2019-nCoV   - 2019 new/novel Coronavirus

CoV   - Coronavirus

COVID-19   - Coronavirus Disease 2019

CSSE   - Centre for Systems Science and Engineering

MERS   - Middle East Respiratory Syndrome

MoHCDEC   - Ministry of Health, Community Development, Gender, Elderly and Children

MoH   - Ministry of Health

PCR (t)   - Polymerase Chain Reaction test

PRC   – Popular Republic of China

Rs   - Rectal swabs

SARS   - Severe Acute Respiratory Syndrome

SARS-CoV-2   - Severe Acute Respiratory Syndrome Coronavirus 2

WHO   - World Health Organisation

CHAPTER ONE

INTRODUCTION

1. 1. Introduction

This chapter provides an overview of this study: the background to the study, statement of the research problem, objectives of the study, research questions, the significance of the study, limitations of the study, and a summary of the organisation of the study.

1. 2. Background to the Study

Since its outbreak in December 2019, COVID-19 has remained a challenge to political regimes (Cepaluni *et al*., 2020; Kavanagh and Singh, 2020). Each government is struggling to define protective mechanisms for the sanito-economic and socio-political well-being of its population. As a country, Tanzania is not left behind; its government has, since then, tirelessly struggled to define measures for the safety and well-being of its population (Tarimo & Wu, 2020).

Whereas from COVID-19 outbreak, some countries have proven their greater and effective ability to respond to crises, other countries have conversely proven their inability to control the same. Pandemic response is different from much of population health—with effective responses requiring the ability to act quickly, implement effectively, and gain public compliance (Kavanagh and Singh, 2020).

Initially, there were conflicting views among key actors on which measures should have been adopted in the fight against COVID-19 around the world (closing borders, travel bans, quarantining victims and cities, and so on), as Trump put it, "…Why did they [WHO] give us such a faulty recommendation?" (Trump's tweet, April 07, 2020 at 15:04:16). Tough measures adopted by authoritarian governments made their countries reduce the number of cases and deaths (Cepaluni *et al*., 2020), and saw the economy sustained amid the pandemic in most less democratic countries; while their democratic counterparts severely suffered high morbidity and mortality, and economic downfall (World Bank, 2021; Cepaluni *et al*., 2020).

Against the view that democratic processes are superior as they promote freedom, individual and collective self-determination, and moral autonomy (Dahl, 2020: 45); and from this, the assumption that they can serve better in controlling COVID-19 (Cepaluni *et al*., 2020), the pandemic has proven the opposite: according to Covid-19 dashboard by the Centre for Systems Science and Engineering [CSSE] at the Johns Hopkins University, as of May 2020, nine of the ten nations with the highest cumulative cases of COVID-19 were democracies (Kavanagh and Singh, 2020).

Through the first, second, and third waves, democracies are likely to continue suffering the effects of COVID-19 pandemic. Practically, some authors argue that an already challenging situation for leaders is made even more so if they are functioning in a democratic system (Schwartz, 2012). Despite the fact that it is admitted that democracy has positively impacted public health (Besley and Kudamatsu, 2006), securing public health during a novel pandemic is quite different (Cepaluni *et al.*,

2020). In order to determine democratic governance ability to curb crises, this study focuses on how the fifth and sixth Tanzania administrations struggled to effectively control COVID-19 public health crisis from the outbreak to the third wave.

1. 3. Statement of the Research Problem

The world population currently faces a number of dangers from terrorism to forced migration, and increased digitalisation to epidemics and pandemics; these threats force governments to choose between providing security to their people, or accord them freedom; between protecting civil liberties and minimizing the risk of deaths. Thus, effective governance remains very crucial in deciding on the right approach to be adopted by the entire population.

Amid COVID-19 pandemic, Tanzania experienced a shift in governmental approach in the fight against SARS-CoV-2 new infections and deaths; where the fifth administration (from the outbreak to mid-March, 2021) is viewed as less democratic and obscure (Cheeseman, 2021; Buguzi, 2021); the sixth administration is seen by analysts as more democratic and transparent; as Buguzi (2021) puts it, [Suluhu] has reportedly pushed for more transparency in government reporting. As of 21 July 2021, the country counted 682 COVID-19 cases (MoHCDEC, 2021).

Although social scientists have tended to agree, albeit with caveats, that democracy is beneficial for public health (Kavanagh and Singh, 2020); is democracy really able to effectively curb such crises like COVID-19 pandemic? This study establishes parallels and differences between the fifth and six Tanzania regimes' approach in the

fight against SARS-CoV-2 with the aim to assessing the ability of democratic governance to control COVID-19 pandemic.

1. 4. Objectives of the Study

1. 4. 1. General Objective

The main objective of this study was to assess the ability of democratic governance to control crises and determine effective measures to be taken in the fight against such crises like COVID-19 pandemic.

1. 4. 2. Specific Objectives

i. To identify measures taken by the fifth and sixth Tanzania administrations in the fight against SARS-CoV-2 in Dar es Salaam.

ii. To compare and contrast measures taken by the fifth Tanzania regime to those taken by the sixth regime in their effort to control COVID-19 pandemic in Dar es Salaam.

iii. To measure the degree of effectiveness of mechanisms applied by both, the fifth and sixth Tanzania administrations in the fight against COVID-19 in Dar es Salaam.

1. 5. Research Questions

1. 5. 1. General Research Question

What are effective measures to be taken in the fight against such crises like COVID-19 pandemic?

1. 5. 2. Specific Research Questions

i.   What measures were taken by the fifth and sixth Tanzania administrations in the fight against SARS-CoV-2 in Dar es Salaam?

ii.   What are the similarities and differences between measures taken by the fifth and sixth Tanzania regimes in their effort to control COVID-19 pandemic in Dar es Salaam?

iii.   How effective are mechanisms applied by both, the fifth and sixth Tanzania administrations in the fight against COVID-19 in Dar es Salaam?

1. 6. Significance of the Study

There are still potential health threats to lives of people (Bollyky and Kickbusch, 2020; Kavanagh and Singh, 2020). Whether epidemiological, social, economic or political threat, this study contributes to the understanding of the necessity to adopt exceptionally strong mechanisms during crises with the aim to preserve people's security and well-being.

To prospective leaders, this research increases awareness on mechanisms to be used in times of epidemiological and other crises. That only a government with higher level of intuition and commitment will always emerge victorious under health and security threats (Schwartz, 2012: 314).

To the researcher, this study provides clarifications on democratic governance ability to control crises; it offers insight on the necessity of the adoption of strong

mechanisms in the fight against crises for the preservation of people's security and well-being.

1. 7. Limitations of the Study

First, the sample size was comparatively small (370 respondents); while a bigger sample would possibly enhance the reliability of the results. Second, some inaccessible crucial procedures and actors probably created obstacles to the study, hence limiting the information (Kothari, 2004: 96). Third, governmental efforts to control COVID-19 public health crisis might have been politically influenced by some additional factors which were not mentioned in this research. Fourth, lack of available literature of locally conducted research on the subject matter is another factor which contributes to the limitations of this research.

1. 8. Organization of the Study

This dissertation is composed of five chapters. Chapter One introduces the study by highlighting the background, statement of the research problem, objectives, research questions, the significance, and limitations. Chapter Two provides a review of the existing literature on the subject matter. In this section, the definitions of key terms, theoretical literature review, empirical literature review, conceptual framework, and research gap are presented. Chapter Three contains the research philosophy, research strategy, study population, research area, sampling design and procedures, variables measurements procedures, methods of data collection, methods of data analysis, expected results, ethical considerations, and chapter summary. Also, Chapter Three presents issues of validity and reliability. Chapter Four presents the research findings

and thoroughly discusses them. And finally, Chapter Five provides the conclusions

and recommendations relying on the findings.

CHAPTER TWO

LITERATURE REVIEW

2. 1. Introduction

This chapter covers a review of the existing literature on the subject of this research. It starts with definitions of key terms, and proceeds to theoretical literature review, empirical literature review, conceptual framework, research gap, and chapter summary.

2. 2. Definition of key Terms

2. 2. 1. Democratic Governance

Dahl (2020: 38) views democratic governance as a ruling method which upholds, amongst other criteria, control of the agenda, where, the control of the agenda is the exclusive opportunity to decide how, and choose what matters are to be put on the agenda. While Diamond (2020) associates democracy with human prosperity, Rummel (1995) insists that democracy is the safest form of government to live in.

Considering citizen's safety in democracies, an open debate on democratic capacity to control crises is on-going following the many challenges confronting democratic governance in the first quarter of the 21st century (Kavanagh and Singh, 2020; Crozier *et al.*, 1975). Thus, democracy will remain a point of debate in comparative politics (Greer *et al.*, 2020). Different from expectations of the majority, democracies, unlike their political rivals, have easily crumbled to the hits of SARS-CoV-2. Has democracy failed to control COVID-19 pandemic?

Despite the difficulties faced by political regimes in the fight against novel crises like SARS-CoV-2 outbreak, studies have shown less democratic regimes winning praise for their quick and determined response (Cepaluni *et al.*, 2020; Kavanagh and Singh, 2020; Schwartz, 2012). Kavanagh and Singh (2020) are convinced that disease outbreaks and political institutions have been understudied in comparative politics—with much of the literature focused on infant mortality or life expectancy.

Still, there is a strong belief amongst political theorists and analysts that democratic qualities like transparency, and freedom of expression enable a better information flow and public trust; thus, making democracies stronger in the struggle to control crises (Cepaluni *et al.*, 2020; Greer *et al.*, 2020). However, the same features of democracy that are thought to yield better public policies also work to constrain the speed and incisiveness of democratic decision-making process (Malesky and London, 2014; Weeks, 2008 as cited in Cepaluni *et al.*, 2020).

Schmitter and Karl (1991) admit, "…democracies are not necessarily more efficient administratively. Their capacity to make decisions may even be slower than that of the regimes they replace…" Noticed open inability to make a quick shift in decision-making makes democracies weak in dealing with novel crises like SARS-CoV-2 outbreak. Schwartz (2012) remarks, "the leadership must quickly identify the challenge, engage relevant bureaucracies, implement a response, communicate the nature of the crisis and response effectively and clearly to the public …."

2. 2. 1. 1. Effects of Crises on Democratic Preferences

Life in the twenty-first century is threatened by a number of emergencies including terrorism, forced migration, increased digitalisation, epidemics, and pandemics. Until 2020, this century has already experienced four pandemics: SARS in 2002, 'Bird flu' in 2009, MERS in 2012, and Ebola which peaked in 2013-14 (Gössling *et al.*, 2020). And currently, COVID-19 pandemic is still disturbing the health, security, economy, and technology of the world population.

Hence, the pandemic imposes some conditions for an effective response. Among other things, Greer *et al.* (2020) confess that state capacity matters. Where according to Greer and colleagues, state capacity is the control over health care systems as well as public administration, matters to all elements of response and shapes what policymakers perceive as available options (*ibid.*); this quality lacks in democracies as the powers are decentralized and there is definitely no easy way to recentralize powers.

On whether COVID-19 can affect democratic preferences, Amat *et al.* (2020) argue that the characteristics of the pandemic make it a potential case for eroding preferences for democratic governance, at least in the short run. Alon *et al.* (2020: 158) confess that the pandemic provides a window for us to fight back, an opportunity for us to recognize the shortcomings of our institutions (…). How the fifth and sixth Tanzania political regimes dealt with COVID-19 public health crisis in Dar es Salaam is the question which we address in this study.

2. 2. 2. Authoritarian Rule

Political theorists understand authoritarianism mainly as failure to organise elections and sabotaging accountability (Glasius, 2018; Linz & Linz, 2000). This study views authoritarianism as a kind of strong leadership which prioritises efficient services delivery method; as Bergström *et al*. (2012) eloquently argue in their abstract, many reforms within local government in the last decades have been preoccupied with efficiency rather than democracy.

Authoritarian strategies of curbing crises have given it a new magnitude in this era as scholars are starting to believe that authoritarianism is the regime worth ruling (Kavanagh and Singh, 2020; Glasius, 2018; Schwartz, 2012; Ackerman, 2008). Less democratic regimes have proven to do better than their democratic counterparts in controlling novel crises.

2. 2. 2. 1. Authoritarianism versus Crises

For effectiveness in the struggle to control a crisis, it is thought that, threats brought about by a crisis are less worrying and challenging in authoritarian regimes than in democracies. Schwartz (2012: 314) argues that authoritarian leaders enjoy an 'authoritarian advantage', being less likely to need to negotiate with bureaucracies over jurisdictional powers or struggle to disentangle overlapping institutions. Furthermore, the media and by extension the message to the public are more easily controlled.

To address the issue of efficient response in the fight against the outbreak and the spread of COVID-19, this comparative analysis of pandemic response by the fifth and sixth Tanzania regimes helps in understanding whether a regime type can greatly influence the degree of effectiveness in crisis management.

2. 2. 3. COVID-19

This is a highly infectious disease caused by the 2019 novel coronavirus scientifically known as *Severe Acute Respiratory Syndrome Coronavirus-2 (SARS-CoV-2)* (CDC, 2020). By the end of January 2020, the WHO declared COVID-19 outbreak, a public health emergency of international concern; and later on 11 March of the same year, COVID-19 was declared a pandemic (WHO, 2020b).

Unfortunately, studies have failed to find the real source of the virus (whether zoonotic or laboratory) and its pathway to humans (whether directly, or through an intermediate host):

Although the role of civets as intermediate hosts in the outbreak of severe acute respiratory syndrome (SARS) in 2002-4 had been favoured and a role for pangolins in the outbreak of COVID-19 was initially posited, subsequent epidemiological and epizootic studies have not substantiated the contribution of these animals in transmission to humans. The possible intermediate host of SARS-CoV-2 remains elusive (WHO, 2021).

Tanzania recorded its first case in March 2020; and since then relevant bureaucracies were mobilized, and all citizens were informed. Preventive measures were defined by

the then Tanzanian government including scheduling for media educational and mobilisation campaigns on precautionary procedures across the nation in general, and Dar es Salaam in particular. Only the then President or his Premier could give updates on the evolution of the pandemic.

2. 3. Democracy and Authoritarianism under COVID-19 Threats

While some countries have greatly suffered COVID-19 threats, some others have surprisingly resisted threats posed upon them by the pandemic. The world witnesses the opposite: seemingly organised regimes in terms of system management and governmental impact on health (Cepaluni *et al.*, 2020; Besley and Kudamatsu, 2006) have crumbled from a single hit of SARS-CoV-2. Democracies have really accepted the challenge and are currently put under siege.

However, less democratic regimes have proven to be resilient under COVID-19 threats (Cepaluni *et al.*, 2020; Kavanagh and Singh, 2020). Is there an authoritarian advantage in diseases response? (Cepaluni *et al.*, 2020; Kavanagh and Singh, 2020; Schwartz, 2012). While nationally the virus has evolved into a new, more perilous variant, the *Deltacoronavirus*, far from being subjected under control; now is the time for political scientists to start understanding how and why the fifth and sixth Tanzania governments responded the way they did, and explore how effective adopted measures appear to be; what this study is set to examining.

2. 4. Theoretical Literature Review

2. 4. 1. Centralized Decision-making Powers

This is the ability of the central government to take total control in case of emergencies or when an issue should, according to the centre, be given high priority. Schwartz (2012) remarks:

When the newly established (2001) Chinese CDC proved insufficiently effective in responding to SARS, the central government transferred responsibility for SARS to the MoH. In an unusual step for the PRC, the minister of health was replaced with a vice-premier (Wu Yi). Wu Yi's high rank and status in the Party/state lent tremendous prestige and power to the MoH, signalling the seriousness with which the centre took the outbreak.

Chinese government's response to SARS reveals authoritarian advantage in an attempt to effectively control the crisis: the Chinese leadership was able to recentralize decision making power, enforce strict top-down regulations on SARS treatment control and reporting; mobilize state and non-state actors and the public as a whole; and, control the message deriving from the mass media (*ibid.*).

However, when the Chinese authoritarian regime took strong measures against the spread of COVID-19, western democratic countries decried them as authoritarian, brutal, invasive, repressive, and even impossible to implement in democracies (Cheibub *et al.*, 2020). While ignoring the facts that, first and foremost, China has an experience of 2002-3 SARS pandemic; second, that stringent measures saw China through the 2002-3 SARS pandemic; and finally, that the virus (SARS-CoV-2) was

first diagnosed in China (WHO, 2021; WHO, 2020); which implies that at the outbreak of SARS-CoV-2, the Chinese government was at least the most informed on the virus morbidity and mortality rates.

To compliment authoritarian regimes intuition in containing the virus, by early March 2020, western democracies were compelled to adopting tough measures as the virus became more and more threatening to the health of their population. Public meetings, including religious observances, were banned in most democracies (Cheibub *et al.*, 2020).

From the available evidence on different regimes approaches to COVID-19, Cheibub *et al.* (2020) conclude that democracies reacted slower to the crisis and that the most solidly democratic among them were particularly disinclined to react. The effects of this slow response may be caused by two factors; first and foremost, uninformed decisions; and secondly, unfocussed decisions.

On the tenacity of decisions, for example, one of the most controversial issues in the fight against COVID-19 pandemic in the first and second waves in developing countries like Tanzania was the accuracy of tests results (Nkengasong & Mankoula, 2020). When the issue was noticed by the fifth regime, the then administration took measures to assure itself of the matter. But, when asked on why Tanzania government has decided to vaccinate its citizens, Samia simply responded that as a nation, we should go in a path that other nations go through.

2. 4. 1. 1. Tough Measures

Tough measures constitute one of the characters of authoritarian regimes; they encompass the limitation of civil liberties. Glasius (2018) puts it that the definition of authoritarianism continues to rely on the absence of freedoms, rather than on a positive definition of what authoritarianism actually is and what it does. Under health or political threats, authoritarian administrations always tend to apply tough measures in their effort to control crises.

According to many studies, it is obvious that under COVID-19 threats, authoritarian countries tend to have lower COVID-19 related deaths than their democratic counterparts (Annaka, 2021; Cepaluni *et al.*, 2020). On whether tough measures have helped less democratic regimes to effectively control the number of deaths caused by SARS-CoV-2, a study by Annaka (2021) revealed that stringent intervention is not necessarily a key determinant. This is because democracies possibly used highly tough measures than their authoritarian counterparts did (*ibid.*). When the threat of death became sufficiently severe, many democracies resorted to the same measures as autocracies (Cheibub *et al.*, 2020).

The application of tough measures was not a new strategy in authoritarian regimes; and every when they were adopted, the only epithet which came to minds of many is that 'only because it is an authoritarian regime.' Besides, unlike democracies, few authoritarian regimes adopted tough measures in their effort to control COVID-19 pandemic. Most democracies shook to the tone of the pandemic, which made them

weak in responding to the pandemic. This study also compares measures taken by both, the fifth and sixth Tanzanian regimes in the fight against COVID-19 pandemic.

2. 4. 1. 2. Misinformation in the Fight against Crises

Loomba *et al.* (2021) define misinformation as false or misleading information which is considered incorrect based on the best available evidence from relevant experts at the time. While, Cuan-Baltazar *et al.* (2020) define misinformation as unregulated, and its quality remains questionable. Unregulated information means unchecked by relevant authority; which implies the following possibilities: insufficient, uninformed, distorted, with an ill will, and so on.

In the Munich security conference held on February 15, 2020, Ghebreyesus warned against the dangers of misinformation as he stressed, "We're not just fighting an epidemic; we're fighting an infodemic." (WHO, 2020). Misinformation causes greater effects on the struggle to containing a public health crisis including lack of trust and rebelling against government's initiatives, which can result into more deaths (Schwartz, 2012).

During crises, misinformation constitutes a second direct danger as it highly affects the effort put in to control threats. For instance, Loomba *et al.* (2021) clarify on the effects of misinformation on citizens' attitude towards COVID-19 vaccines: that it (misinformation) lowers peoples' intent to accept the vaccines. Hence, the aforementioned dangers of misinformation raise the question of the importance of data control measure in the fight against crises. Under threats of a crisis, authoritarian

regimes use data control and data manipulation strategies to curb the dangers of misinformation in its struggle to control the crisis.

2. 4. 2. Data Manipulation and Data Control

Schwartz (2012) defines data manipulation as government ability to shape the tone of the crisis in the mass media. Data manipulation may also include underreporting [of new infection cases and deaths] [emphasis added] (Cepaluni *et al.*, 2020). In the dangers of a public health crisis like COVID-19 pandemic, failure to shaping the tone of the crisis may result into panic [and little accountability] (Buguzi, 2021; Schwartz, 2012); hence causing more deaths than expected [emphasis added].

According to Schwartz (2012), several health care workers and staff members broke quarantine, escaping by jumping out windows and climbing fences during the 2002-3 SARS crisis in Taiwan. Lacking faith in the government, scores of doctors and nurses resigned during the epidemic, including 160 in a single week (*ibid.*). For fear of endangering their lives, complete abstention or delay observed to health-care workers in attending allegedly SARS-CoV-2 victims was also reported in Tanzania in March and April 2020 until the time when the fifth phase government intervened to reshape the tone of the pandemic (MoHCDEC, 2020).

The ability to shape the tone of a crisis is a quality which lacks in most democracies. Ackerman (2008) is strongly convinced that this is due to lust for powers among politicians. When a democracy is threatened, competitive elections will tempt politicians to exploit the spreading panic to partisan advantage, challenging their

rivals as insufficiently tough… (*ibid.*). Liberally, in democracies, everybody is free to portray the tone of the danger or threat as they perceive it.

However, in admittedly less democratic governments, the centre reserves the right to inform the public on the intensity of the threat (Schwartz, 2012); and its evolution. Until the second wave COVID-19, only the President of Tanzania and/or his Premier could give updated information on the evolution of the pandemic, and announce government initiatives for public support (MoHCDEC, 2020).

An authoritarian regime might respond to an attack by a travel blockade and a media blackout, leaving most of the country in the dark, going on as if everything were normal (Schwartz, 2012). Until the government is sufficiently and intelligently informed on the threat, then it comes up with strategies or results. Although this approach is regarded by the opposition, political analysts, and advocates of democratic governance as 'a crisis downplay' and dangerous to socio well-being, it is a strategy used by authoritarian governments to ensure security and safety of their citizens.

2. 4. 3. COVID-19 Vaccines

COVID-19 vaccines administration constitutes another controversial strategy in the effort to control COVID-19 pandemic: apart from the origin of SARS-CoV-2 and adopted measures in the fight against the virus, COVID-19 vaccines have also posed so many quandaries. The current debate concerning safety and efficacy of the vaccines appears highly interesting to some, while to others, taking a COVID-19

vaccine is the only necessary step now. However, Loomba *et al.* (2021) remark that for these COVID-19 vaccines to be successful, they need not only be proven safe and efficacious, but also widely accepted.

Are SARS-CoV-2 vaccines safe for our health? How effective are COVID-19 pandemic vaccines? How long will protection from coronavirus vaccines last? (Katella, 2021). Those are some nagging questions which have dominated the current debate about COVID-19 pandemic. The possibility of a vaccinated patient to infect, or be infected, and even die is very awful and thought-provoking in this debate.

Scientists estimate COVID-19 vaccination levels for herd immunity at 55-85 % of acceptance depending on a country (Sanche *et al.*, 2020; Kwok *et al.*, 2020). Reaching these levels of acceptance is not easy job: many allegations on the safety of the under-trial vaccines participants are put forth; which threatens to limit public uptake of COVID-19 vaccines (Loomba *et al.*, 2021). Following the adoption of COVID-19 vaccines by the sixth Tanzania regime as a mechanism to eradicate SARS-CoV-2, this study measures the degree of effectiveness of COVID-19 vaccines as one of the measures applied in government's effort to reducing new infections and deaths among Dar es Salaam inhabitants.

A study by Bol *et al.* (2021) found that citizens have understood that strict social containment was necessary, and have rewarded governments that decided to enforce it, at least in the short term. In addition to having observed that Centralized decision-making powers may be advantageous when it comes to responding to pandemics,

Schwartz (2012) also found that public support for government initiatives is necessary in a unified effort to control a crisis. In his comparative study on the 2002-3 SARS crisis in Taiwan and China, Schwartz found that China was exceptionally able to effectively mobilize a variety of actors [and keep them active throughout (emphasis added)] (*ibid.*: 329).

This study comparatively assesses the degree of effectiveness of measures taken by the fifth Tanzania regime to those taken by the sixth administration in their effort to control SARS-CoV-2-related infections and deaths in Dar es Salaam; amongst others, the measures include centralized decision-making powers, data control, data manipulation, not quarantining the population, and even not importing masks.

2. 5. Empirical Literature Review

2. 5. 1. The Impact of Regime Type on Effective Crisis Control

In his comparative study on China's and Taiwan's effective response to the 2002–3 SARS outbreak, Schwartz (2012) finds centralised decision-making powers, public support for government initiatives, and government ability to shape the tone of the crisis in the mass media as key factors to effective response to crises; especially, public health crisis.

Following the outbreak of COVID-19, democratic countries experienced deaths sooner and on a larger scale more than their less democratic counterpart (Cepaluni *et al.*, 2020; Kavanagh & Singh, 2020). In the analysis, Cepaluni *et al.* (2020) present under-reporting and stringent measures taken as causes for the reduced deaths toll in

authoritarian regimes. However, a study by Annaka (2021) found that, democratic regimes used more stringent measures than authoritarian governments; which should affect the overall number of confirmed cases; from this, Annaka deduces that political regime affects COVID-19 related deaths through another factor than confirmed cases.

Just for illustration, from the diagnosis of its first SARS-CoV-2 infection case in mid-March until early June 2020 when the late Magufuli stopped the release of COVID-19 data, the country had documented a total of 509 cases and 21 deaths only (Buguzi, 2021); while from mid-April when Samia pushed for more transparency in government reporting on COVID-19 pandemic until 21 July 2021, the country counted 682 COVID-19 cases and 29 deaths (MoHCDEC, 2021).

In the case of Africa in general, and Tanzania in particular, very little literature is available for consultations and further studies; this sluggishness is, on the one hand, caused by lack of zeal within researchers and authors and on the other hand, little or lack of access accorded by political administrations as Buguzi (2021) mentions Godbless Charles, a researcher with the Liverpool School of Tropical Medicine who is based in Dar es Salaam, still doesn't have official epidemiological data to tell whether transmission is ongoing, has stopped, or is low or high.

2. 6. Research Gap

From the reviewed literature, some gaps can be identified on the studied variables in previous researches; which has engendered scepticism about the relevance and need

of mechanisms applied by less democratic governments although they were also, in one way or the other, applied by democratic governments and they got their people through the first and second waves. Against the assumption that autocratic advantage may be short-term and only observable in terms of the death toll directly due to the pandemic (Cepaluni *et al.*, 2020), there is a greater need to undertake more researches to assess the relevance of neglected variables like centralised decision-making, data control, and data manipulation in the control of COVID-19 pandemic.

2. 7. Conceptual and Theoretical Framework

We are living in the dangers of new or modern technology, and weakness in one country could quickly threaten the health and economic well-being of people around the world (Kavanagh & Singh, 2020). Being currently the most preferred regime, will a democratic government be able to effectively control crises for the safety and well-being of its population? Certainly, state capacity matters (Greer *et al.*, 2020). A study by Amat *et al.* (2020) shows that the characteristics of the pandemic make it a potential case for eroding preferences for democratic governance, at least in the short run. The pandemic provides an opportunity for us to recognize the shortcomings in our institutions. A new conceptualization of political capacity for disease response capacity is needed (Kavanagh & Singh, 2020).

2. 7. 1. Independent Variables

This study used the following independent variables to predict the value of dependent variables listed under section 2. 7. 2:

i)   Centralised decision-making powers,

ii) Data control and Data manipulation, and

iii) Effectiveness of COVID-19 vaccines.

2. 7. 2. Dependent Variables

Three (3) dependent variables were measured in this study; these include:

i) Reduced fear/ reduced deaths toll,

ii) Reduced panic/ reduced deaths toll, and

iii) Uncontrolled deaths.

2. 7. 3. Left-hand Side Variable

While it is argued that stringent measures constitute one of the characteristics of authoritarian governments (Annaka, 2021; Cepaluni *et al.*, 2020; Schwartz, 2012), this study also measured the degree of effectiveness of stringent measures such as not quarantining the population and not importing masks in the fight against such health crises like COVID-19 pandemic in the case of Dar es Salaam.

Table 2. 1: Conceptual Framework

Variable	Framework
Independent	Centralised decision-making powers, data control and data manipulation, and degree of effectiveness of COVID-19 vaccines.
Dependent	Reduced fear, reduced panic, and uncontrolled deaths.
Left-hand side	Not quarantining the population, and not importing masks.

Source: Author's observation, 2021

2. 8. Chapter Summary

This chapter has provided a review of available literature on the subject matter of this study. The author presented an overview of major variables under study as he proceeded from the definition of key terms, to theoretical literature review, empirical literature review, conceptual framework, and the research gap. A general conceptualisation of the working of the two compared regime types during the times of the crisis was outlined with regard to the functioning of the fifth and sixth Tanzania regimes.

CHAPTER THREE

RESEARCH METHODOLOGY

3. 1. Introduction

This chapter presents the research methodology while extending itself from the research philosophy, research strategy, study population, research area, sampling design and procedures, variables measurements procedures, methods of data collection, methods of data analysis, instruments of data analysis, data reliability and validity, expected results, ethical considerations, and chapter summary.

3. 2. Research Philosophy

While commenting on dilemmas in philosophy, James (1975) argued that there is, it must be confessed, a curious fascination in hearing deep things talked about, even though neither we nor the disputants understand them. To determine effective measures to be taken in the fight against such novel crises like COVID-19 pandemic, this study adopted a practical approach to evaluate theories and beliefs in terms of their success following their application in the fight against COVID-19 outbreak, and new infections and deaths control.

3. 3. Research Strategy

This study compared and contrasted mechanisms applied by both, the fifth and sixth Tanzania administrations in the fight against SARS-CoV-2 particularly in Dar es Salaam; it is basically a comparative research designed to determine effective measures to be taken in the fight against such public health crises like COVID-19

pandemic. Azarian (2011) insists that comparison as a scientific method refers to the research approach in which two or more cases are explicitly contrasted to each other regards to a specific phenomenon … in order to explore parallels and differences among the cases. One of the features which define a comparative analysis is an interest in the explanatory question of why the observed similarities and differences between cases exist (Pickvance, 2001).

3. 4. Study Population

The target population for this study was Dar es Salaam political leaders (Ward Executive Officers 'WEO'), religious leaders (Sheikhs and Priests), health specialists (laboratory technicians, and health-care attendants), scholars (in the field of political science and public administration), and ordinary citizens. While a total of 370 respondents from the above mentioned groups were involved in this study, the researcher purposively drew the sample from the total population within Ilala, Kinondoni, and Ubungo municipalities basing on the respondent's role and understanding of the subject matter for informed data.

3. 5. Research Area

A research setting is a geographical location, institution or organisation, entity, and/or a study unit characteristic to which the researcher has access, given the available sources (Stommel & Wills, 2004). Reasons behind the choice of Dar es Salaam as the study area for this research included first and foremost, the region's experience in a shift in governmental approach in the fight against the spread of SARS-CoV-2: Amid COVID-19 pandemic, the administration shifted from an

authoritarian to a democratic approach (Buguzi, 2021); this made it easy for the researcher to measure the degree of effectiveness of mechanisms applied by both, the fifth and sixth Tanzania administrations in the fight against COVID-19 in Dar es Salaam. Secondly, with the most reliable scientific and technical infrastructures in the country which are, the national laboratory and recommended hospitals by the government, Ubungo, Ilala, and Kinondoni-Dar es Salaam constitute the areas in Tanzania where a researcher can learn effectively health-specialists' experience in conducting COVID-19 tests and caring for victims of SARS-CoV-2; and from these, the accurate picture of the evolution of the crisis.

3. 6. Sampling Design and Procedures

Singh (2006: 82) admits that in social sciences, it is not possible to collect data from every respondent relevant to our study but only from some fractional part of the respondents; the process of selecting the fractional part is called sampling. However, a perfect representative sample is one that exactly represents the population from which it is taken (Saunders *et al.*, 2009).

According to 2012 population census, Dar es Salaam counts 4,364,514 inhabitants out of which 60 per cents are aged 18 and above; from the above, the sum of Ilala, Ubungo, and Kinondoni Municipalities population is 2,995,650 people. Considering 18 years old and above aged people as eligible respondents, a 95 per cent confidence level, and a plus or minus 5 per cent margin of error, the minimum sample size for this study was: $n = p\% \times q\% \times (\frac{z}{e\%})^2$ (Saunders *et al.*, 2009).

where,

n is the minimum sample size required for this study,

p% is the proportion belonging to the specified category (18 years old and above in Ilala, Ubungo, and Kinondoni, Dar es Salaam),

q% is the proportion not belonging to the specified category (Under 18 years old people in Ilala, Ubungo, and Kinondoni, Dar es Salaam),

z is the z value corresponding to the level of confidence required (for 95 per cent, z=1.96),

e% is the margin of error required (5).

$n = 60 \times 40 \times (\frac{1.96}{5})^2 = 2400 \times (0.392)^2 = 2400 \times 0.154 = 369.6 \approx 370$

So, the minimum sample size for this study was 370 respondents; selected from among individuals in the sample frame as follows in Table 3. 1:

Table 3. 1: Sample Size and Composition

Category of respondents	Number of respondents
Health specialists	74
Political Leaders	74
Religious Leaders	74
Ordinary citizens	74
Scholars	74
TOTAL	**370**

Source: Field data, 2021

Respondents were purposively selected basing on their age, duties, influence, experience, and position. Through their administrative decisions, political leaders have a duty to protect citizens; while religious leaders might highly influence

adopted measures by convincing their believers to either observe or boycott. Also, citizens remain key actors in preserving their own health and the health of their loved ones. Health workers are viewed as battlefield fighters in diagnosing the virus and caring for infected persons as a step to reducing new infections and control deaths; hence, having a tremendous experience on the development of COVID-19 pandemic. Finally, scholars can learn the causes; this makes them able to predict facts concerning a crisis, which is very important in this study.

3. 7. Variables and Measurements Procedures

Three (3) independent variables were measured during this study; these included centralized decision-making powers, data control and data manipulation, and COVID-19 vaccines provision in Dar es Salaam. Both, primary and secondary data were collected. Primary data was obtained from observations and interviews with respondents from among various groups of people living in Ilala, Kinondoni, and Ubungo municipalities. Secondary data was obtained from professional publications such as books, journals, government (s) and other official publications, and even relevant internet data base.

3. 8. Methods of Data Collection

3. 8. 1. Observation Method

With an observation checklist, this method was applied to learn major events in the evolution of COVID-19 pandemic in Dar es Salaam, and the shift in governmental decision-making strategies to control the pandemic. Observation becomes a scientific tool and the method of data collection for the researcher, when it serves a formulated

research purpose, is systematically planned and recorded and is subjected to checks and controls on validity and reliability (Kothari, 2004: 96).

3. 8. 2. Survey Method

It involved the administration of questionnaires to respondents to collect primary data. This study's respondents included political leaders (Ward Executive Officers 'WEO'), religious leaders (Sheikhs and Priests), health specialists (laboratory technicians, and health-care attendants), scholars (in the field of political science and public administration), and ordinary citizens. Survey method reduces bias of the interviewer by allowing answers in respondents' own words (Kothari, 2004).

Prior to actual data collection, a pilot study involving a total of ten (10) respondents from each category involved in the study was conducted; the aim being: a) to assess clarity of questions within questionnaires; b) to determine average time for administration of individual questionnaires; c) to identify any contextual shortfalls in the tools; and, d) to assess respondents' interpretation of questions to ensure that the order of questions does not influence answers from respondents.

3. 8. 3. In-depth Interviews

According to Kahn and Cannell (1957), an interview is a purposeful discussion between two or more people. Researchers use in-depth interviews to explore in depth a general area of interest (Saunders *et al.*, 2009). This method was used to stimulate political and religious leaders to talk more easily and broadly about events, behaviours, preferences and beliefs in relation to this topic; which helped to

enlighten the researcher more on their approach in the fight against COVID-19 in Dar es Salaam.

3. 8. 4. Literature Survey

Relevant documents such as books, journals, official reports, and magazines can be treated as a source of data in their own right (Denscombe, 2017). The researcher used literature survey method from government reports and professional journals for most recent studies from the wide-ranging array of scholars in the effort to finding secondary data.

3. 9. Data Analysis

3. 9. 1. Method of Data Analysis

Qualitative data analysis method involves factual and logical interpretation, comparison, and explanation of findings from data obtained. Enough effort was made to comparatively explain the existence of some factors, behaviour patterns, and preferences. The author was practically required to apply philosophical method of data analysis like induction and deduction; hence making this research really educational as Singh (2006: 122) emphasises, "the philosophical researches are conducted to establish truth or reality." For easy interpretation of the findings of this study, texts, figures, tables, and percentages were used to convey the findings of the analysis.

3. 9. 2. Instruments of Data Analysis

In order to ensure accuracy in the analysis of this research finding, the researcher used SPSS version 22 package for a standardised coding and analysis presentation and interpretation. Findings were presented in form of tables, charts, and even numbers for easy interpretation. Manual and/or hand coding and analysis were also applied for more accuracy in interpreting some explanatory questions of the survey.

3. 10. Data Reliability and Validity

According to Golafshani (2003), reliability defines whether the result is replicable; while validity defines whether the means of measurement are accurate and whether they are actually measuring what they are intended to measure. Therefore, checking for validity in qualitative researches means to check for the accuracy of the findings by using certain processes such as participants checking, triangulation of data, and conviction to the reader (Creswell, 2014). With regard to this study, especially the instruments and methodologies applied for data collection and data analysis, the researcher ensured reliability of data collection instruments during a pilot study arranged with respondents from among all selected groups; and then used member checking and triangulation methods for validity of research findings.

3. 11. Expected Results

First and foremost, this study will help to determine democratic governance ability to control crises; and effective measures to be taken in the fight against such crises like COVID-19 pandemic. Secondly, as health specialists are starting to warn about the necessity of treating COVID-19 not as a pandemic anymore, but more practically as

an endemic (Torjesen, 2021; Phillips, 2021; Cook *et al.*, 2021), this research will provide tools for political stakeholders and everybody involved in the continuing fight against SARS-CoV-2 new infections and deaths to plan effectively and get well-armed to control the crisis. Furthermore, the understanding of effective measures to be used in the fight against COVID-19 will influence the response of political leaders to potential future health crises.

3. 12. Ethical Considerations

Ethical consideration takes into account the issues of confidentiality, avoidance of deception, avoidance of physical or emotional harm to the participants, and informed consent (Babbie, 2020; Sarantakos, 2012). Where an informed consent can be given either orally or in writings, the researcher obtained a letter of permission and a research clearance letter from the Open University of Tanzania to enable him access and use governmental documents and statements, analysts', scholars', and other researchers' views. Participants were encouraged to voluntarily take part in the study, and confidentiality was assured to all participants in handling provided information. No influence whatsoever was posed on individual participants, institutions or other sources of information.

3. 13. Chapter Summary

In this chapter, the researcher has clearly and concisely outlined specific conditions under which the study was conducted: the research philosophy, research strategy, study population, research area, sampling design and procedures, variables measurements procedures, methods of data collection, methods of data analysis,

instruments of data analysis, and data reliability and validity. Furthermore, the researcher has pinpointed ethical considerations and expected results or findings.

CHAPTER FOUR

FINDINGS AND DISCUSSION

4. 1. Introduction

Given the objectives of this study, this chapter presents and discusses empirical findings of this research obtained from both, primary and secondary sources of data as collected from the field. The discussion compares the findings of this study with those of similar studies. Data were analysed using SPSS for frequency tables and percentages. Also, philosophical methods of data analysis like induction and deduction were applied for analysing qualitative data obtained during the study.

Of the 370 respondents involved in this study, only 151 respondents fully participated; which is equal to 40.8% of the respondents. The 151 full respondents included 33 health specialists or 21.9%, 12 political leaders or 7.9%, 24 religious leaders or 15.9%, 67 ordinary citizens or 44.4%, and 15 scholars of political leadership and public administration or 9.9% from Ilala, Kinondoni, and Ubungo - Dar es Salaam.

4. 2. Adopted Measures in the Fight against COVID-19 in Dar es Salaam

The first specific objective of this study was to identify measures taken by the fifth and sixth Tanzania regimes in the fight against SARS-CoV-2 in Dar es Salaam. Primo, respondents were given chance to list down any five (5) major mechanisms implemented by Tanzania government in the fight against SARS-CoV-2 infections in Dar es Salaam from COVID-19 outbreak to March 2021; a period related to the fifth

Tanzanian administration. Segundo, respondents had to list down any five (5) major mechanisms applied by Tanzania government in the fight against SARS-CoV-2 infections in Dar es Salaam from April 2021 to data collection time (September, 2021); a period related to the sixth Tanzanian administration. Table 4. 1 shows the most notable mechanisms applied:

Table 4. 1: Measures taken in the Fight against COVID-19 in Dar es Salaam

Fifth Administration	Sixth Administration
1. To educate citizens on modes of transmission and prevention of COVID-19	1. Vaccinating citizens
2. Not quarantining the population	
3. Not importing masks	
4. Testing SARS-CoV-2 infections	
5. Only the central government to provide information on the evolution of COVID-19 pandemic	
6. Only the central government to provide informed directives on adopted measures in the fight against COVID-19 pandemic	
7. Use of alternative means (eating body immunity increasing foods/ steaming the body with herbs/ inhaling steam/ special prayer sessions, …)	
8. The government to control data (of new infections and deaths, …)	

Source: Field observation, 2021

4. 3. Comparison of Measures adopted by both Regimes

The second specific objective of this study was to compare and contrast measures taken by the fifth Tanzania administration to those adopted by the sixth Tanzania regime in their effort to control COVID-19 pandemic in Dar es Salaam. Respondents were given a chance to list any three (3) mechanisms applied by Tanzania government from SARS-CoV-2 outbreak to data collection time (September, 2021); and say why they think the measures were most effective in the effort to control

COVID-19 in Dar es Salaam. The argue to compare and contrast measures taken by the fifth Tanzania regime to those taken by the sixth regime in their effort to contain the pandemic was due to observed open difference and shift in governmental approach in the fight against SARS-CoV-2 new infections and deaths in Dar es Salaam.

Whereas the fifth Tanzania regime was praised for ensuring that every citizen in Dar es Salaam has good understanding and observes modes of transmission and prevention of SARS-CoV-2, the sixth administration was seen as less committed in providing such education to citizens. The fifth administration's president himself or his premier not only mobilised citizens on the use of masks, hand sanitizers, and hands-washing with clean running water and soap, but also recommended what type of masks should be used.

This study revealed that while the sixth Tanzania administration seemingly adopted some measures taken by the fifth Tanzania regime, such as hands-washing with clean running water and soap, use of hand-sanitizers, and even wearing masks, there was an observed open lassitude in the implementation of the adopted measures. For example, little emphasis was put on the use of masks, hand sanitizers, and hand-washing with clean running water and soap: during data collection, it was observed that the majority of people could not put on masks; and that, even officials were seen putting on a facial mask only when they were with the president.

Also, containers previously used for hand-washing were not in use; instead, they were kept somewhere else in a store or at a corner. However, vaccines campaign and administration is the most notable strategy implemented by the sixth phase Tanzanian government in the fight against SARS-CoV-2 new infections and deaths.

While preventive measures such as the use of facial mask, hands-washing with clean running water and soap and/or hand sanitizers, and social distancing are, according to this research's respondents, most effective measures in the effort to containing COVID-19 pandemic; the WHO (2021), also recommended the same protective measures like hands-washing with clean running water and soap and/or hand sanitizers, and social distancing in the struggle to stopping COVID-19 and its new stronger variants.

4. 3. 1. Effectiveness of Tough Measures in the Control of COVID-19

Given the sanito-economic and socio-political situation of Dar es Salaam-Tanzania, this study measured the degree of effectiveness of mechanisms applied by both, the fifth and sixth Tanzania administrations in the fight against COVID-19 pandemic in Dar es Salaam; this involved the examination of the impact of tough measures (centralized decision-making powers, data control, data manipulation, and COVID-19 vaccines administration) on deaths control and economy.

4. 3. 1. 1. Centralized Decision-making Powers

More than 70 % of the respondents were either satisfied or strongly satisfied with the central government's decision to centralise powers of providing informed directives

on adopted measures in the fight against COVID-19 pandemic. These results have been interpreted from this study's findings as illustrated in Figure 4. 1

Only the central government to provide infromed directives on adopted measures in the fight against covid-19 pandemic in percentage
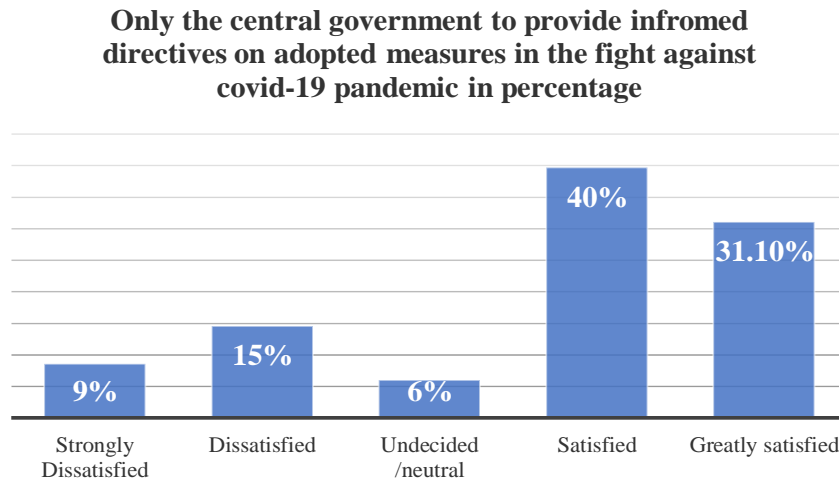
Figure 4. 1: Degree of Effectiveness of Centralized Decision-making Strategy

Source: Field data, 2021

4. 3. 1. 2. Data control and Data manipulation

Data control and data manipulation are strategies used by less democratic government during crises, especially public health crises; the aim being to control panic within citizens (Schwartz, 2012; Ackerman, 2008). The fifth Tanzania government also adopted this strategy in its efforts to containing SARS-CoV-2 new infection cases and deaths. While 60% of the respondents in this survey were satisfied by the measure, 54% of the respondents revealed that the measure was either effective or greatly effective. Appendix III, and IV respectively, illustrate the aforementioned results.

4. 4. The Virtues in not quarantining the Population and not Importing Masks

Both, not quarantining the population and not importing masks are measures exceptionally applied by the fifth Tanzania administration in its effort to control COVID-19 pandemic. To insist on the need to adopt measures depending on the current situation on the ground, Mehtar *et al.* (2020) eloquently argues, it is becoming clear that responses require action beyond the health sector and must be tailored to the local situation.

Mehtar and colleagues remarked that, lacking governmental financial support, as is being provided for populations and businesses in Europe and USA, most of Africa's poorest citizens will ignore quarantine directives and continue to engage in communal activities to earn incomes for their families (*ibid.*). In this study, more than 60% of the respondents said that not quarantining the population was an effective or a very effective decision taken by the fifth Tanzania regime in its efforts to control COVID-19.

Not Quarantining the Population in Percentages
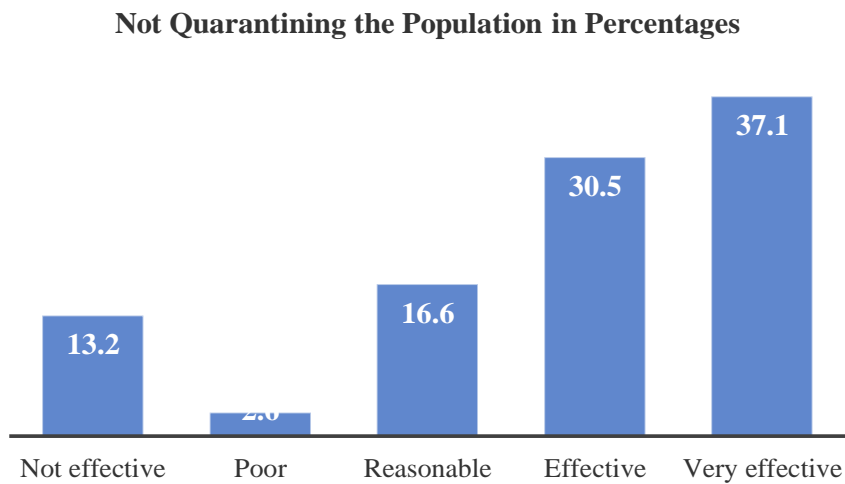
Figure 4. 2: Efficiency of not quarantining the population during COVID-19

Source: Field data, 2021

The impact of the effectiveness of not quarantining the population and not importing masks can be explained by the following factors: economically, not quarantining the population allowed Dar es Salaam inhabitants to continue with their economic activities to earn income for their families which ensured the sustainability of their economy amid the pandemic (World Bank, 2020). Whereas, quarantining the population would have resulted into other crisis like starvation in areas where it would have been implemented; and more specifically, areas where there was no special governmental financial support to citizens during the pandemic.

Furthermore, not importing masks has had some impact on the economy of inhabitants within Dar es Salaam: while at the outbreak of the pandemic, a mask was being sold at Tzs. 1,000.00, the cost was reduced to half of the initial cost after the fifth regime's president mobilised citizens and the Medical Store Department (msd)

to locally make own masks. According to the World Bank, Tanzania poverty headcount level at national poverty line is USD 1.35 per day, which is approximately equal to Tzs. 3,105.00; how could a Dar es Salaam inhabitant afford buying two or three disposable masks per day as per the requirements of health specialists while reserving extra money for other necessary needs like food and shelter? Alternatively, the fifth phase government mobilised people for the adoption of the use of fabric masks locally made to reduce costs.

Still, not importing masks is a decision which greatly impacted health of Dar es Salaam inhabitants by reducing the possibility of importing the virus. The fifth Tanzania administration believed that importing masks would increase infections: a political idea intuitionally conceived by the fifth-phase Tanzania government. So to speak, not quarantining the population and not importing masks greatly supported the fifth Tanzania regime's success to control SARS-CoV-2 infections and deaths in Dar es Salaam. Figure 4. 3 illustrates the degree of effectiveness of not importing masks:

Not Importing Masks in Percentages
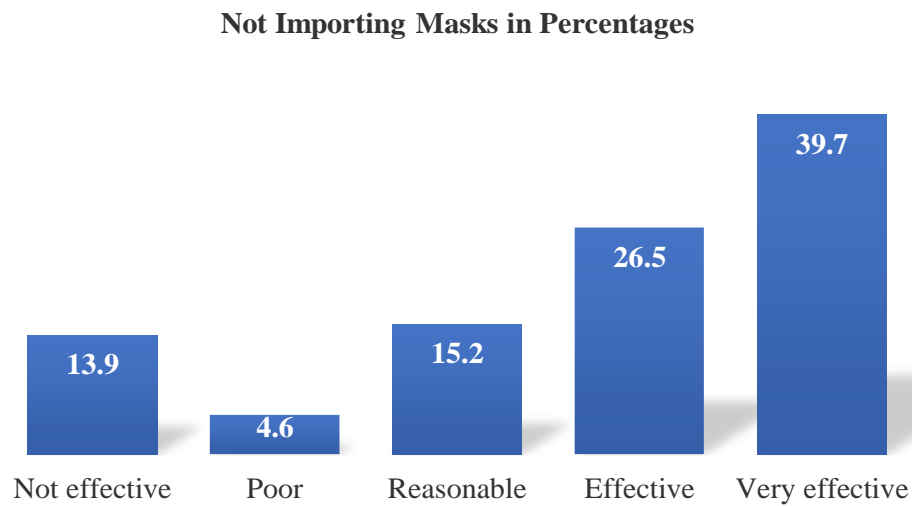
Figure 4. 3: Efficiency of not importing Masks during COVID-19 pandemic

Source: Field data, 2021

4. 5. The Sixth Tanzania Regime's Strategy to control COVID-19

Since the launching of COVID-19 vaccines provision on 28 July 2021, a lot has been observed, shared, and lived up to in the effort to controlling SARS-CoV-2 in Dar es Salaam. COVID-19 vaccines provision strategy is the only measure exceptionally attributed to the sixth phase government. While the fifth administration remained sceptical in adopting vaccines as a measure in the fight against SARS-CoV-2 new infections and deaths; the sixth phase government widely opened doors to vaccines in its effort to control the spread of the virus.

However, there was observed doubt about governmental decision to adopt vaccination as a strategy to fight COVID-19 pandemic. Although 43% of respondents were either satisfied or greatly satisfied with this decision, more than

fifty percent of respondents expressed their doubt on taking their COVID-19 vaccine; and only 50% was convinced by the effectiveness of the vaccines. This study revealed that scepticism about the nature of COVID-19 vaccines is due to four main factors which include,

i.   Little education among citizens;

ii.   That a vaccinated person can still infect others, or get infected;

iii.   Efficiency of COVID-19 vaccines and their life-span; and

iv.   Deaths of vaccinated people.

On little education among citizens, it is obvious that the adoption of vaccines as a measure to contain SARS-CoV-2 opposed the fifth regime strategy to control the virus; thus, it required citizens to make a shift in their approach against the pandemic. Owing to the fact that in fighting crisis, public support for government initiatives is a necessary factor for a successful control of a crisis (Schwartz, 2012), convincing the entire population in Dar es Salaam to make this shift was not an easy task.

Regrettably, instead of providing sufficient education on the necessity of being vaccinated against SARS-CoV-2, government officials tended to threaten citizens; which raised so many questions about the nature of the vaccines and make people fake the process of taking vaccines. A respondent revealed that, only immunocompromised people, government officials on mission abroad, businessmen and women, students who had gained their scholarships, and religious who wanted to go abroad for pilgrimage and pastoral missions necessarily took their shot.

In addition, greater uncertainty about the nature of COVID-19 vaccines was caused by the deaths of vaccinated people. It posed difficulty on Dar es Salaam citizens to decide to take their shots as they witnessed the deaths of their relatives who got vaccinated. During this study, health specialists revealed that, of ten (10) deaths related to COVID-19, at least 1 vaccinated person died; which was a bit frightening in a region which, by the time of the writing of this report (12 October 2021), had not yet vaccinated even 1% of its population. And by December 2021, vaccinated people's death toll increased up to 3 out of 10 COVID-19 related deaths (MoHCDEC, 2021).

CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

5. 1. Introduction

In this chapter, the researcher outlines conclusions and recommendations in relation to this study's findings. Also, areas for further researches are outlined as a step to ensuring optimisation, validity, and proper interpretation of this research's findings in future.

5. 2. Conclusions

5. 2. 1. Overview

This study's main objective was to assess the ability of democratic governance to control crises and determine effective measures to be taken in the fight against such crises like COVID-19 pandemic. The researcher proceeded from identifying measures taken by the fifth and sixth Tanzania administrations in the fight against SARS-CoV-2 in Dar es Salaam, to comparing and contrasting them; and finally measured the degree of effectiveness of mechanisms applied by both, the fifth and sixth Tanzania administrations in the fight against COVID-19 in Dar es Salaam; the aim being to find out which measures were much more helpful in reducing new infections and deaths.

To effectively assess the ability of democratic governance to control crisis, and determine effective measures to be taken in the fight against such crises like COVID-19 pandemic, this study tried to identify, to compare and contrast, and to measure the

degree of effectiveness of measures taken by the fifth and sixth Tanzania administrations in their effort to control COVID-19 pandemic in Dar es Salaam.

From providing citizens with education on modes of transmission and prevention of SARS-CoV-2 to vaccinating citizens against COVID-19, this study revealed that tough measures applied by the fifth administration such as centralized decision-making powers, data control, data manipulation, not importing masks, and not quarantining the population helped in reducing stress and panic from within hearts and minds of Dar es Salaam inhabitants which increased public compliance and gave people strength to accept the effects brought about by COVID-19; hence gaining much more public support in the struggle to control the pandemic.

Also, given the socio-economic situation of the people of Dar es Salaam-Tanzania, tough measures like not importing masks, and not quarantining the population helped to keep the economy positive despite observed small regression on its growth. Different from the thoughts of many, these strategies reduced the number of potential infections and deaths rate.

On whether democracy is more effective than authoritarianism in the struggle to control deaths amid a crisis (Rummel, 1995), this study found that democratic governance is less effective under such health crises like COVID-19 pandemic. Under threats of terrorism, forced migration, increased digitalisation, and even epidemics and pandemics, the world's population is starting to shift its preferences from democracy to technocratic governance and strong leadership (Amat *et al*.,

2020). And because strong leadership is a results-oriented leadership, it remains effective in the contemporary time (Bergström *et al*., 2012). Huntington (1991) confesses that political leadership is one of the two most decisive factors affecting the future consolidation and expansion of democracy.

5. 2. 2. Recommendations

With regard to successful control of COVID-19 pandemic, tough measures implemented by the fifth Tanzania administration have proven to exceptionally and effectively control the pandemic. While the world is currently at risk of many dangers such as terrorism, forced migration, increased digitalisation, and health crisis (Kavanagh and Singh, 2020); this study recommends the application of tough measures in order to ensure good health and security of citizens in times of crisis.

Diamond (2020) remarked that the siren song of strongman rule will be harder to resist if authoritarian regimes appear to be managing the virus more successfully. It is obvious that tough measures greatly helped authoritarian regimes like the fifth Tanzania regime to effectively manage to control COVID-19 pandemic more than democracies did.

What is referred to as tough or stringent measures in this study is actually any measure taken by the government, whether publicly communicated or not; but with the primary goal to ensure security and/or protect lives of the many citizens. In some cases, tough measures are taken with good intent; what this study recommends.

However, political partisanship hinders effective communication by discrediting the effort made; hence reducing public support during implementation.

Nevertheless, this study does not recommend any measures taken by the government (whether a democracy, or the regimes it replaces) that endangers lives of citizens and which may cause mass murder in the name of protecting civil liberties while the government is possibly well-aware of the dangers which may occur. For example, quarantining citizens in lower income countries or areas may result into other threats like starvation, diseases, and even deaths.

5. 3. Area for further Research

Future research should be conducted on the impact of tough measures on citizens' security. While this study will enable researchers, political and religious leaders, and policy makers to understand the degree to which tough measures by the fifth Tanzanian regime contributed to a successful control of COVID-19 pandemic by reducing stress and panic from within the hearts and minds of many citizens in Dar es Salaam, the study on the existing correlation between tough measures and citizens' security and well-being during crises will help in confirming the extent to which the adoption of tough measures in the effort to control crises can help to ensure citizens' safety and security; hence reducing the possible mass murders which democratic approaches can cause as it is conceived by the pro-authoritarianism.

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APPENDICES

Appendix I: Questionnaire

Dear,………………………….I am Lubunga Kakozi, pursuing Master Degree in Governance and Leadership at the Open University of Tanzania. As a requirement for the award of the degree, a Master student must conduct research. I am thus conducting research titled **"Regime Change and Crisis Management in Tanzania: A Comparative Study on Managing COVID-19 Pandemic in Dar es Salaam."** Please, in your own words, help me to respond to the following questions. Note that, provided information is for the purpose of this study only and will be treated by the researcher as confidential.

Part A: Respondent's Character (Tick √ where appropriate)

Age group: 18-30 [ ]; 31- 40 [ ]; 41-55 [ ]; 56 and above [ ]

Occupation: Health specialist [ ]; Political leader [ ]; Religious leader [ ]; Ordinary Citizen [ ]; Scholar [ ]

Part B: Conceptual Knowledge

1. List down any five (5) major mechanisms used by Tanzania government in the fight against SARS-CoV-2 infections in Dar es Salaam from COVID-19 outbreak to March 2021

    i. …………………………………………………………………………..

    ii. ………………………………………………………………………….

    iii. …………………………………………………………………………

    iv. …………………………………………………………………………

    v. …………………………………………………………………………

2. List down any five (5) major mechanisms applied by Tanzania government in the

fight against SARS-CoV-2 infections in Dar es Salaam from April 2021 to date

i. …………………………………………………………………………………..

ii. ………………………………………………………………………………….

iii. ………………………………………………………………………………….

iv. ………………………………………………………………………………….

v. ………………………………………………………………………………….

3. List any three (3) mechanisms applied by Tanzania government from SARS-CoV-2

outbreak to date, and say why you think they are most effective in the effort to control

COVID-19 in Dar es Salaam.

i. …………………………………………………………………………………

…………………………………………………………………………………..

…………………………………………………………………………………..

ii. …………………………………………………………………………………..

…………………………………………………………………………………..

…………………………………………………………………………………..

iii. ………………………………………………………………………………….

…………………………………………………………………………………..

…………………………………………………………………………………..

4. For the statements below, please indicate the extent to which you are satisfied with

the listed measures taken

by Tanzania government to fight against COVID-19 pandemic in Dar es Salaam (put

√ in the box of the corresponding digit)

Measures	1 Strongly dissatisfied	2 Dissatisfied	3 Undecided/ Neutral	4 Satisfied	5 Greatly satisfied
Not quarantining the population	❑	❑	❑	❑	❑
Not importing masks	❑	❑	❑	❑	❑
Media campaign	❑	❑	❑	❑	❑
Testing SARS-CoV-2 infections	❑	❑	❑	❑	❑
Only the central government to provide information on the evolution of COVID-19 pandemic	❑	❑	❑	❑	❑
Only the central government to provide informed directives on adopted measures in the fight against COVID-19 pandemic	❑	❑	❑	❑	❑
The government to control data (of new infections, deaths,...)	❑	❑	❑	❑	❑
Vaccinating citizens against COVID-19	❑	❑	❑	❑	❑

5. For the following measures taken by Tanzania government; please, circle the

corresponding digit to show how effective the mechanism is in order to control

COVID-19 in Dar es Salaam

i. Not quarantining the population

1	2	3	4	5
Not effective	Poor	Reasonable	Effective	Very Effective

ii. Not importing masks

1	2	3	4	5
Not effective	Poor	Reasonable	Effective	Very Effective

iii. Media campaign

1	2	3	4	5
Not effective	Poor	Reasonable	Effective	Very Effective

iv. Testing SARS-CoV-2 Infections

1	2	3	4	5

Not effective

Poor   Reasonable   Effective   Very Effective

v. Only the central government to provide information on the evolution of COVID-19 pandemic

1	2	3	4	5
Not effective	Poor	Reasonable	Effective	Very Effective

vi. Only the central government to provide informed directives on adopted measures in the fight against COVID-19 pandemic

1	2	3	4	5
Not effective	Poor	Reasonable	Effective	Very Effective

vii. The government to control data (of new infections, deaths,…)

1	2	3	4	5
Not effective	Poor	Reasonable	Effective	Very Effective

viii. Vaccinating citizens against COVID-19

1	2	3	4	5
Not effective	Poor	Reasonable	Effective	Very Effective

*6. (For Health specialists/**Laboratory technicians only**) What type(s) of SARS-CoV-2 infection test(s) do you perform in your laboratory?*

…………………………………………………………………………………………

………………………………………………………………………………………….

*7. (For Health specialists/**Laboratory technicians only**) How accurate are SARS-CoV-2 infection test(s) results as diagnosed in your laboratory? Please, circle the corresponding digit.*

1	2	3	4	5
Not accurate	Less accurate	Not sure	Accurate	Very Accurate

*8. (For Health specialists/**Health-care attendants only**) Of ten (10) hospitalized COVID-19 patients, how many vaccinated people are admitted for medical care?*

0	1	2	3	4	5	6	7	8	9	10

*9. (For Health specialists/**Health-care attendants only**) Of ten (10) deaths related to COVID-19 infections, how many vaccinated people die at your hospital? Please, provide the average death rate.*

0	1	2	3	4	5	6	7	8	9	10

Appendix II: Dodoso

Ndugu,……………………………….Naitwa Lubunga Kakozi, ninasoma Shahada ya Uzamili katika masuala ya Uongozi na Utawala Bora katika Chuo Kikuu Huria cha Tanzania. Mwanafunzi wa shahada ya uzamili anatakiwa kufanya utafiti kama moja ya vigezo ili kutunukiwa shahada. Hivyo, ninafanya utafiti juu ya **"Mabadiliko ya Utawala na Udhibiti wa Majanga Tanzania: Utafiti wa Kulinganisha Udhibiti wa Ugonjwa wa UVIKO-19 Dar es Salaam."** Tafadhali, kwa maneno yako mwenyewe, nisaidie kujibu maswali yafuatayo. Tambua kwamba, taarifa zitakazotolewa ni kwa ajili ya utafiti huu pekee; na kwamba zitahifadhiwa na mtafiti.

Sehemu A: Taarifa za anayejibu (Weka tiki √ panapo stahili)

Umri: 18-30 [   ];   31- 40 [   ];   41-55 [   ];   56 au zaidi[   ]

Shughuli: Mtaalamu wa afya [   ];   Kiongozi wa kisiasa [   ], Kiongozi wa kidini [   ]; Mwananchi wa kawaida [   ];   Mwanadhuoni [   ]

Sehemu B: Ufahamu

1. Taja mbinu tano (5) kuu zilizotumiwa na serikali ya Tanzania katika mapambano dhidi ya virusi vya UVIKO-19 Dar es Salaam tangu mwanzo wa mlipuko hadi Machi 2021

i. …………………………………………………………………………..

ii. ………………………………………………………………………….

iii. …………………………………………………………………………

iv. …………………………………………………………………………

v. ………………………………………………………………………….

2. Taja mbinu tano (5) kuu zilizotumiwa na serikali ya Tanzania kupambana na virusi vya UVIKO-19 Dar es Salaam tangu Aprili 2021 hadi sasa

i. ………………………………………………………………………………….

ii. …………………………………………………………………………………

iii. …………………………………………………………………………………...

iv. …………………………………………………………………………………

v. ………………………………………………………………………………….

3. Taja mbinu tatu (3) kuu zilizotumiwa na serikali ya Tanzania kupambana na virusi vya UVIKO-19 tangu mwanzo wa mlipuko hadi sasa, na eleza ni kwa nini unazani zinatija zaidi katika jitihada za kudhibiti UVIKO-19 Dar es Salaam.

i. …………………………………………………………………………………

……………………………………………………………………………………

………………………………………………………………………………….

ii. ………………………………………………………………………………….

………………………………………………………………………………….

………………………………………………………………………………….

iii. …………………………………………………………………………………

………………………………………………………………………………….

………………………………………………………………………………….

4. Kwa mambo yafuatayo, tafadhali onesha ni kwa kiasi gani unaridhishwa na hatua zilizochukuliwa na serikali ya Tanzania kupambana dhidi ya ugonjwa wa UVIKO-19 Dar es Salaam (weka tiki √ ndani ya kiboksi chenye tarakimu husika)

Hatua	1 Sijaridhishwa kabisa	2 Sijaridhishwa	3 Sijaamua/ yote ni sawa	4 Nimeridhishwa	5 Nimeridhishwa kabisa
Kutowafungia wananchi	❏	❏	❏	❏	❏
Kutoagiza barakoa nje ya nchi	❏	❏	❏	❏	❏
Elimu/ hamasa kwenye mitandao/ vyombo vya habari	❏	❏	❏	❏	❏
Kupima maambukizi ya virusi vya UVIKO-19	❏	❏	❏	❏	❏
Serikali kuu pekee kutoa taarifa juu ya maendeleo ya hali ya mlipuko wa UVIKO-19	❏	❏	❏	❏	❏
Serikali kuu pekee kutoa maelekezo juu ya hatua za kuchukua katika mapambano dhidi ya mlipuko wa UVIKO-19	❏	❏	❏	❏	❏
Serikali kudhibiti taarifa/data (za wagonjwa wapya, vifo,…)	❏	❏	❏	❏	❏
Kuchanja wananchi zidi ya UVIKO-19	❏	❏	❏	❏	❏

5. Kwa hatua zifuatazo zilizochukuliwa na serikali ya Tanzania; tafadhali zungushia duara tarakimu husika ili kuonesha kiwango cha tija katika kudhibiti ugonjwa wa UVIKO-19 Dar es Salaam

i. Kutowafungia wananchi

1	2	3	4	5
Haina tija	Hafifu	Nafuu/Inasidia	Inatija	Inatija sana

ii. Kutoagiza barakoa nje ya nchi

1	2	3	4	5
Haina tija	Hafifu	Nafuu/Inasidia	Inatija	Inatija sana

iii. Elimu/Hamasa kwenye mitandao/vyombo vya habari

1	2	3	4	5
Haina tija	Hafifu	Nafuu/Inasidia	Inatija	Inatija sana

iv. Kupima maambukizi ya virusi vya UVIKO-19

1	2	3	4	5
Haina tija	Hafifu	Nafuu/Inasidia	Inatija	Inatija sana

v. Serikali kuu pekee kutoa taarifa juu ya maendeleo ya hali ya mlipuko wa UVIKO-19

1	2	3	4	5
Haina tija	Hafifu	Nafuu/Inasidia	Inatija	Inatija sana

vi. Serikali kuu pekee kutoa maelekezo juu ya hatua za kuchukua katika mapambano dhidi ya mlipuko wa UVIKO-19

1	2	3	4	5
Haina tija	Hafifu	Nafuu/Inasidia	Inatija	Inatija sana

vii. Serikali kudhibiti taarifa/data (za wagonjwa wapya, vifo,…)

1	2	3	4	5
Haina tija	Hafifu	Nafuu/Inasidia	Inatija	Inatija sana

viii. Kuchanja wananchi zidi ya UVIKO-19

1	2	3	4	5
Haina tija	Hafifu	Nafuu/Inasidia	Inatija	Inatija sana

*6. (Kwa Wataalamu wa afya/**Fundi sanifu maabara pekee**) Ni aina gani ya vipimo vya maambukizi ya virusi vya UVIKO-19 inafanyika katika maabara yako?*

………………………………………………………………………………………………

………………………………………………………………………………………………

*7. (Kwa Wataalamu wa afya/**Fundi sanifu maabara pekee**) Ni kwa kiasi gani vipimo vya maambukizi ya virusi vya UVIKO-19 ni sahihi kama vilivyochukuliwa katika maabara yako? Tafadhali, zungushia duara tarakimu husika*

1	2	3	4	5
Sio sahihi	Vinamapungufu	Sina hakika	Ni sahihi	Ni sahihi sana

*8. (Kwa wataalamu wa afya/**Wauguzi pekee**) Kati ya wagonjwa kumi (10) wenye maambukizi ya virusi vya UVIKO-19 waliolazwa, ni wangapi wamepata chanjo?*

0	1	2	3	4	5	6	7	8	9	10

*9. (Kwa wataalam wa afya/**Wauguzi pekee**) Kati ya vifo kumi (10) vitokanavyo na maambukizi ya UVIKO-19, ni wangapi waliopata chanjo wanafariki? Tafadhali, toa wastani wa vifo.*

0	1	2	3	4	5	6	7	8	9	10

Appendix III: Level of Satisfaction to Data control Strategy

The Government to contol data (of new infections, deaths), in Percentages

Strongly Dissatisfied	Dissatisfied	Undecided /neutral	Satisfied	Greatly satisfied
18.5	18.5		38.4	21.9
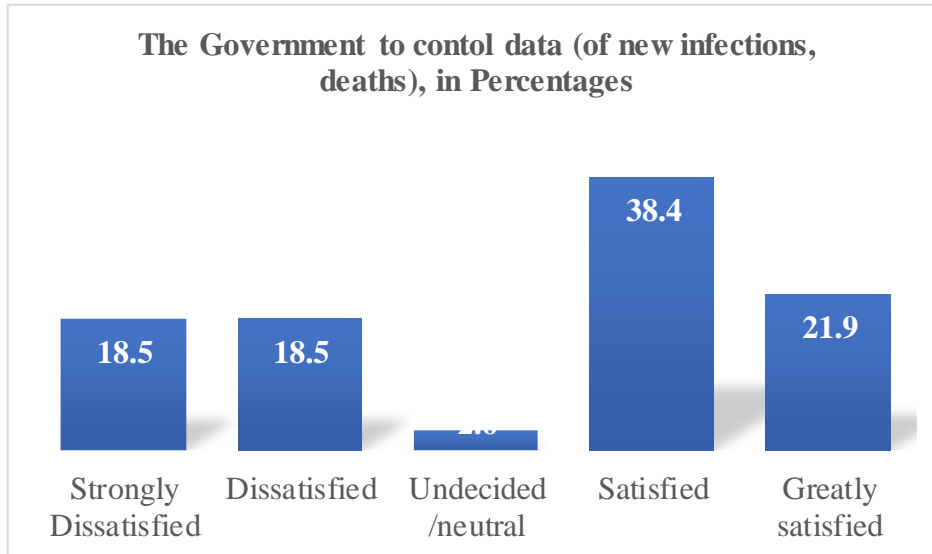
Appendix IV: Degree of Effectiveness of Data control Strategy

The Govovernment to contol data (of new infections, deaths, in Percentages

Not effective	Poor	Reasonable	Effective	Very effective
18.5	9.9	16.6	29.1	25.8
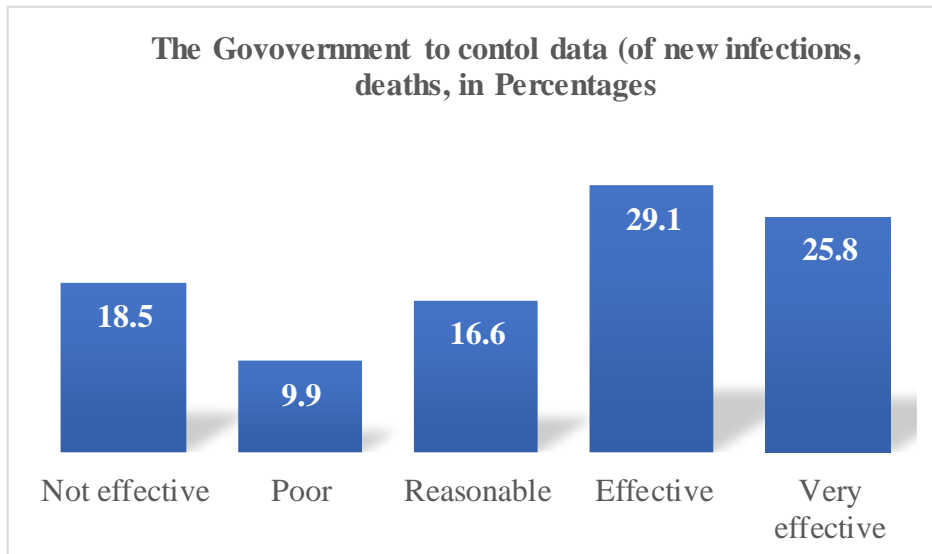
Appendix V:

Research Clearance Letter from the Open University of Tanzania

THE OPEN UNIVERSITY OF TANZANIA

DIRECTORATE OF POSTGRADUATE STUDIES

P.O. Box 23409
Dar es Salaam, Tanzania
http://www.openuniversity.ac.tz

Tel: 255-22-2668992/2668445
ext.2101
Fax: 255-22-2668759
E-mail: dpgs@out.ac.tz

Our Ref: PG201902142

7th September 2021

Region Administrative Secretary (RAS),

Dar es salaam Region,

P.O.Box.5429,

DAR ES SALAAM.

RE: RESEARCH CLEARANCE
The Open University of Tanzania was established by an Act of Parliament No. 17 of 1992, which became operational on the 1st March 1993 by public notice No.55 in the official Gazette. The Act was however replaced by the Open University of Tanzania Charter of 2005, which became operational on 1st January 2007.In line with the Charter, the Open University of Tanzania mission is to generate and apply knowledge through research.
To facilitate and to simplify research process therefore, the act empowers the Vice Chancellor of the Open University of Tanzania to issue research clearance, on behalf of the Government of Tanzania and Tanzania Commission for Science and Technology, to both its staff and students who are doing research in Tanzania. With this brief background, the purpose of this letter is to introduce to you **Mr.LUBUNGA Kakozi, Reg No: PG201902142** pursuing **Master of Arts in Governance and Leadership (MAGL)**.We here by grant this clearance to conduct a research titled **"Regime Change and Crisis Management in Tanzania: A Comparative Study on Managing Covid-19 Pandemic in Dar es salaam "**. He will collect His data at your area from 8th September to 8th October 2021.

In case you need any further information, kindly do not hesitate to contact the Deputy Vice Chancellor (Academic) of the Open University of Tanzania, P.O.Box 23409, Dar es Salaam.Tel: 022-2-2668820.We lastly thank you in advance for your assumed cooperation and facilitation of this research academic activity.

Yours,
THE OPEN UNIVERSITY OF TANZANIA

Prof. Magreth S.Bushesha
DIRECTOR OF POSTGRADUATE STUDIES.

Appendix VI:

Research Permit from Dar es Salaam Regional Administrative Secretary

THE UNITED REPUBLIC OF TANZANIA
President's Office
REGIONAL ADMINISTRATION AND LOCAL GOVERNMENT

DAR ES SALAAM REGION
Phone Number: 2203158
Fax number: 2203158
email: ras@dsm.go.tz
website: www.dsm.go.tz

In reply please quote:
Ref. No. ....

REGIONAL COMMISSIONER'S OFFICE,
3 RASHID KAWAWA ROAD,
P.O. BOX 5429,
12880 DAR ES SALAAM

.... 10/09 2021

District Administrative Secretary,

Ilala ....,

P. O. Box ....,

DAR ES SALAAM.

RE: RESEARCH PERMIT

Prof/Dr/Mrs./Ms/Miss ..... _LUBUNGA   KAROZI_ .... is

student/**Research** from _THE   OPEN   UNIVERSITY   OF   TANZAM_ has been

permitted to undertake research on _REGIME   CHANGE   AND   CRISIS_

MANAGEMENT   IN   TANZANIA :   A   COMPARATIVE   STUDY   ON

MANAGING   COVID – 19   PANDEMIC   IN   DAR ES   SALAAM

....

From..... _SEPTEMBER   08.,_ .... 2021 to ..... _OCTOBER   08.,_ ....2021.

I Kindly request your good assistance to enable her/his research.

....
For; REGIONAL ADMINISTRATION SECRETARY
DAR ES SALAAM

Copy: Municipal Director,
            Ilala ....

            DAR ES SALAAM.

"   Principal/Vice Chancellor
            THE   OPEN   UNIVERSITY   OF   TANZANIA

Appendix VII: Research Permit from Ubungo District Administrative Secretary

Received
15/09/2021

THE UNITED REPUBLIC OF TANZANIA
PRESIDENT'S OFFICE
REGIONAL ADMINISTRATION AND LOCAL GOVERNMENT

UBUNGO DISTRICT
Telephone No.

022 – 2926340/5
Please reply quote

Ref. No: AB.66/213/01"D"/169

DISTRICT COMMISSIONER'S OFFICE
2 MOROGORO ROAD,
P.O. Box 55064,
UBUNGO,
14882 - DAR ES SALAAM.

14th September, 2021

Municipal Director,
UBUNGO.

RE: RESEARCH PERMIT

Mr. Lubunga Kakozi is student/researcher from **The Open University of Tanzania**. He has been permitted to undertake field work research on **"REGIME CHANGE AND CRISIS MANAGEMENT IN TANZANIA: A COMPARATIVE STUDY ON MANAGING COVID-19 PANDEMIC IN DAR ES SALAAM"** from 08th September, 2021 to 08th October, 2021.

2.   I kindly request your good assistance to enable him to complete his research.

James Mkumbo
DISTRICT ADMINISTRATIVE SECRETARY
UBUNGO

Copy to: Researcher.

Appendix VIII: Research Permit from Ilala District Administrative Secretary

THE UNITED REPUBLIC OF TANZANIA

President's Office

REGIONAL ADMINISTRATION AND LOCAL GOVERNMENT

ILALA DISTRICT	DISTRICT COMMISSIONER'S OFFICE
Phone Address:	ILALA DISTRICT
Phone No: 2203185/2203182	P. O. Box 15486,
	DAR ES SALAAM
In reply quote: Ref. No: AB.60/87/01/	Date: 10/09/2021

Municipal Director,
P. O. Box 20950,
Ilala,
DAR ES SALAAM.

RE: RESEARCH PERMIT

Prof./Dr./Mr./Mrs./MS./Miss: *LUBUNGA KAKOZI*
from The *OPEN UNIVERSITY OF TANZANIA*, she/he has been permitted to undertake a field work research on "*REGIME CHANGE AND CRISIS MANAGEMENT IN TANZANIA : A COMPARATIVE STUDY ON MANAGING COVID-19 PANDEMIC IN DAR ES SALAAM:*" The case study at Ilala District from *08/09/2021* to *08/10/2021*.

Therefore, you are asked to give the said researchers necessary assistance and Cooperation.

For: District Administrative Secretary

ILALA

Copy: *LUBUNGA KAKOZI*

....

Principal/Vice Chancellor,

THE OPEN UNIVERSITY OF TANZANIA

....

Appendix IX:

Research Permit from Kinondoni District Administrative Secretary

THE UNITED REPUBLIC OF TANZANIA
PRESIDENT OFFICE
MINISTRY OF REGIONAL ADMINISTRATION AND LOCAL GOVERNMENT

KINONDONI DISTRIC:

THE DISTRICT COMMISSIONER
P.O BOX 9583,
KINONDONI,
DAR ES SALAAM,
TANZANIA,

Telephone No. 2170169 / 2170183

To reply please quote:

Ref. No. AB.320/378/01B

10|09|2021

DIRECTOR
KINONDONI MUNICIPAL

RE: RESEARCH PERMIT

LUBUNGA KAKOZI .... is a Student/researcher
from: THE OPEN UNIVERSITY OF TANZANIA .... He/She has
been permitted to undertake field work research on
" REGIME CHANGE AND CRISIS MANAGEMENT IN TANZANIA :
A COMPARATIVE STUDY ON MANAGING COVID-19." From
08|09|2021 — 08|10|2021

I kindly request your good assistance to enable him/her to complete
his/her research.

Kny: KATIBU TAWALA"
WILAYA YA KINONDONI

For: - District Administrative Secretary
KINONDONI

Appendix X: Research Permit from the National Laboratory

JAMHURI YA MUUNGANO WA TANZANIA
WIZARA YA AFYA, MAENDELEO YA JAMII, JINSIA, WAZEE NA WATOTO

Telegram "AFYA", DODOMA
Namabari ya Simu: +255 026 – 2323267
E – Mail Na. PS@afya.go.tz
(Barua zote ziandikwe kwa (Katibu Mkuu)

Mji wa Serikali Mtumba
Barabara ya Afya
S.L.P. 743,
40478 DODOMA.

Unapojibu tafadhali taja:

Kumb. Na. CA.158/239/01/15

23 Septemba, 2021

Chuo kikuu huria cha Tanzania
S.L.P 23409
KINONDONI
DAR ES SALAAM

YAH: OMBI LA UTAFITI WA UGONJWA WA UVIKO-19

Tafadhali rejea kichwa cha habari hapo juu.

Maabara ya Taifa imepokea barua yako ya ombi la kukusanya maoni ya wataalamu wa afya kwaajili ya utafiti wa ugonjwa wa uviko-19 tarehe 13 septemba 2021.

Tunafuraha kukutaarifu ndugu Lubanga Kakozi, mwanafunzi wa shahada ya uzamili katika chuo kikuu huria cha Tanzania, ombi lako limekubaliwa. Kabla ya kuanza utafiti wako tafaghali fika na dodoso lako.

Asante kwa ushirikiano wako.

Selina A.Utouh
KATIBU AFYA – MAABARA YA TAIFA

Appendix XI:

Research Permit from Education Administrative Secretary (The Archdiocese of Dar es Salaam)

ARCHDIOCESE OF DAR ES SALAAM

Sokoine Drive
P.O. Box 167
Dar es Salaam, TANZANIA

Tel: +255 22 2113223
+255 22 2121622
E-mail:nyumba@cats-net.com

16 Sept. 2021

Waheshimiwa Mapadri;

YAH: OMBI LA KUTOA MAONI ILI KUKAMILISHA UTAFITI

Tumsifu Yesu Kristo!
Mpendwa Padri, naomba umsaidie
ndugu Lubunga Kakozi, ambaye ni mwanafunzi
wa shahada ya uzamili katika Chuo Kikuu
huria Tanzania, ili akamilishe utafiti ambao
ni sehemu ya masomo yake. Anayo maswali
yaliyoandaliwa (Questionnaire) kwa ajili ya
kazi hiyo.

Natumaini atapata msaada kwako, kwani
Idara ya elimu – Jimbo haina kipingamizi.

Mark

Pd. Frank Mtavangu

Katibu – Idara ya Elimu Jimbo

DIOCESAN EDUCATION SECRETARY
ARCHDIOCESE OF DAR-ES-SALAAM
P.O. Box 167
DAR-ES-SALAAM

Appendix XII:

Research Permit from the Executive Secretary (The National Muslin Council of Tanzania)

بسم الله الرحمن الرحيم

المجلس الأعلى للشئون الإسلامية بتنزانيا

THE NATIONAL MUSLIM
COUNCIL OF TANZANIA

BARAZA KUU LA
WAISLAM TANZANIA

Our Ref: **MK/RL.12/021/168**   Date: **16/09/2021**

KATIBU WA MKOA,
BAKWATA,
DAR ES SALAAM. ✓

MAKATIBU WA WILAYA,
BAKWATA,
KINONDONI, UBUNGO NA ILALA.

Assalaam alaykum,

YAH: **UTAMBULISHO WA MWANAFUNZI MTAFITI BW. LUBUNGA KAKOZI**

Tafadhali husikeni na kichwa cha habari hapo juu.

Bw. Lubunga Kakozi ni mwanafunzi wa Shahada ya Uzamili katika Chuo Kikuu huria cha Tanzania. Katika moja ya sehemu ya masomo yake anahitajika kufanya utafiti na andiko lake linahusu "Mabadiliko ya Utawala na Udhibiti wa Majanga Tanzania: Utafiti wa kufinganisha udhitibiti wa ugonjwa wa UVIKO-19 Dar es Salaam".

Ili kuweza kutekeleza jambo hilo Bw. Lubunga anahitaji kukutana na Masheikh wa Kata na Maimamu wa Misikiti wasiopungua 9 kwa kila Wilaya.

Kwa barua hii nawaagiza mumpokee mwanafunzi huyu na mumuandalie hao viongozi anaowahitaji ili aweze kufanya mahojiano nao juu ya anuani hiyo ya utafiti wake.

Utafiti huo ataufanya kuanzia tarehe 08/09/2021 – 08/10/2021. Ni matarajio yangu kwamba mtampatia ushirikiano mwema.

Natanguliza shukrani za awali.

Wabillah Tawfiq.

Mohamed Khamis Said
Kny **KATIBU MKUU**

P.O.Box 21422 | Tel +255 717 082 543, +255 717 011 207 | Fax, 2688060, DAR ES SALAAM - TANZANIA
website: www.bakwata.co.tz | email: bakwatahq68@gmail.com