

DEPARTMENT OF DIPLOMACY AND INTERNATIONAL STUDIES

NATIONAL RESPONSE MECHANISMS IN THE MITIGATION OF THE CORONA VIRUS PANDEMIC IN THE EAST AFRICAN REGION: A COMPARATIVE ANALYSIS OF KENYA AND TANZANIA.

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November 2022

STUDENT'S DECLARATION

I certify that the thesis I am submitting is entirely original and has not previously been considered for any other academic honors at any other university. Any ideas from other people or literal quotes are explicitly acknowledged.

Signed.....

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With my permission as the designated supervisor, this thesis has been submitted for review.

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DEDICATION

This work is dedicated to my mother, Ms. Keziah Wambui, who has consistently provided me with encouragement as I pursued my academic goals. My resolve to accomplish my goals has grown stronger thanks to her constant encouragement.

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I am grateful for God's mercy. I appreciate my supervisor, Dr. Martin Ouma, for always providing me with advice and encouragement. My gratitude goes to Audrey Adhiambo and Jennifer Amolo, who sacrificed their time to work with me and encourage me as I was studying.

LIST OF ABBREVIATIONS AND ACRONYMS

AU	African Union
AFR	African Region
AFRO	Action for Reach Out
COMESA	Common Market for Eastern and Southern Africa
EAC	East African Community
ECCAS	Economic Community of Central African States
JICA	Japan International Cooperation Agency
MSME	Micro, Small, and Medium Enterprises
OSBPs	One-Stop Border Points
SADC	Southern African Development Community
SPRP	Strategic Preparedness and Response Plan
SARS- CoV2	Severe Acute Respiratory Syndrome
SOPs	Standard Operating Procedures
TMEA	Trademark East Africa
USAID KEA	United States Agency for International Development
WHO	World Health Organization

LIST OF TABLES

Table 1.1.	Target population,	sample & sampling	technique	36

LIST OF FIGURES

Figure 2.1	40
Figure 2.2	
Figure 2.3	41

ABSTRACT

The Coronavirus Disease 2019 outbreak has revealed both systemic fractures in East Africa and the potential to solve them through better regional coordination. By contrasting Kenya and Tanzania, the study evaluated the effectiveness of national response systems in slowing the spread of COVID 19 in the East African region. Researchers are now able to assess the effectiveness of Kenya's and Tanzania's efforts to contain the pandemic. The three main objectives of the study were to identify and evaluate regional response and containment strategies for the COVID 19 pandemic in the East African Community (EAC), and identify and evaluate national response mechanisms used by Tanzania and Kenya to control and mitigate the pandemic. The study examined how the state responded to a pandemic using the Theory of Constructivism as a guide in order to achieve these objectives. The researcher employed qualitative research for the study and adopted a pragmatic approach. She used both primary and secondary data, and wrote conclusions are written up in narrative text. The research established that, nationalistic responses impacted the region by dragging the recovery period. The measures Tanzania implemented caused mistrust and in turn destabilized integration within the region. The response from the EAC member states showed that old woes still play a significant role in interactions.

TABLE OF CONTENTS

STUDENT'S DECLARATION	i
DEDICATION	ii
ACKNOWLEDGEMENT	iii
LIST OF ABBREVIATIONS AND ACRONYMS	iv
LIST OF TABLES	v
LIST OF FIGURES	vi
ABSTRACT	vii
CHAPTER ONE	11
INTRODUCTION AND BACKGROUND TO THE STUDY	11
1.1 Introduction	11
1.2 Background of the study	11
1.3 Statement of the problem	15
1.4. Study Objectives	16
1.4.1 Research Questions	
1.4.2. Main Objective	
1.4.3. Specific Objectives	
1.5. Literature Review	16
1.5.1. Theoretical Literature Review	17
1.5.2. Empirical Literature Review	22
1.5.3 Gaps in the Literature	
1.5.4. Research Hypotheses	
1.5.5. Justification of the study	
1.5.6 Theoretical Framework	
1.6 Research Design and Methodology	
1.6.1 Target Population	
1.6.2 Sample and Sampling Design	
1.6.3 Data Collection Techniques and procedure	
1.7 Data Analysis	
1.7.1 Validity	
1.7.2 Reliability	
1.7.3 Scope and limitation of the research	
1.7.4. Ethical considerations	

1.8. Chapter Outline	38
CHAPTER TWO	39
THE EAST AFRICAN COMMUNITY REGIONAL RESPONSE AND CONTAINMENT MEASURES TO COVID 19 PANDEMIC	39
2.0. Introduction	39
2.1. The study Demographics Characteristics	39
2.2. East African Community Covid-19 Response Plan	41
2.3. Implementation of East African Community Covid-19 Response Plan	45
2.5. Coherence of the East African Community	51
2.6. Summary of the chapter key findings	53
CHAPTER THREE	55
THE NATIONAL RESPONSE MECHANISMS BY THE TANZANIAN GOVERNMENT IN	
CONTROL AND MITIGATION OF THE SPREAD OF COVID 19 PANDEMIC.	
3.0. Introduction	55
3.1. The implications of Tanzania's response to mitigate the spread of Covid 19.	55
3.2. How did Tanzania's Government manage Covid-19?	57
3.3. How did the political opposition and civil society respond?	58
3.4. What were the potential implications of Magufuli's mismanagement?	60
3.5. What are the opportunities for regional and international responses?	62
CHAPTER FOUR	65
THE NATIONAL RESPONSE MECHANISMS BY THE KENYAN GOVERNMENT IN TH CONTROL AND MITIGATION OF THE SPREAD OF COVID 19 PANDEMIC.	
4.0. Introduction	65
4.1. The implications of Kenya's response to mitigate the spread of Covid 19.	65
4.2. How the Kenyan government through the Ministry of Health managed COVID-19	66
4.3 Was their mismanagement on the part of the government?	70
4.4 The implications of mismanagement of COVID-19resources	72
4.5 What are the opportunities for regional and international responses?	73
4.6. Summary of the chapter key findings	75
CHAPTER FIVE	76
SUMMARY OF THE STUDY FINDINGS, CONCLUSION AND RECOMMENDATIONS	76
5.0. Introduction	76
5.1. Summary of the findings	76
5.2. Conclusion	78

5.4. Areas for further Research	80
BIBLIOGRAPHY	81
APPENDICES	84
APPENDIX 1: Letter to Respondents	84
APPENDIX 2: Interview Schedule	85
APPENDIX 3: Questionnaire	86
APPENDIX 4: NARCOSTI	93

CHAPTER ONE

INTRODUCTION AND BACKGROUND TO THE STUDY

1.1 Introduction

A viral infection known as the Corona Virus is brought on by the SARS-CoV-2 virus. As states opted to first secure their national territories before anything else, COVID 19 shaped interactions and upended regional and international ties. This study examines the results of national response mechanisms to aid East Africa in battling the corona virus pandemic. In the study, the pandemic responses in Kenya and Tanzania are contrasted and compared. The study unequivocally shows how the effects of the virus on the East African population were prolonged by nationalistic responses. The study also looked at how other epidemics with comparable meanings and effects to Covid were impacted by and prolonged by internally focused responses. At the conclusion of the study, the research made specific recommendations for future generations and drew attention to the importance of collaboration in addressing threats. The theoretical and empirical literature reviews, research gaps, justifications, designs of the study, and methodology are all covered in this chapter. A problem statement, study objectives, research questions, as well as information about the study's significance, area of inquiry, constraints, and delimitations will all be included.

1.2 Background of the study

The entire world has had its share of health pandemics that have brought out the power of regionalism in dealing with a threat that nobody sees coming. The emergence of pandemics similar to COVID 19 has occurred throughout history for as far back as 5000 years ago. The Spanish flu of 1918 hit the global scene with no clear indication of its origins; Like COVID 19 the Spanish flu of 1918 that hit the global scene with no clear indication where it came

from, the flu was the deadliest pandemic of the 20th century.¹ There is little information on the effects of the Spanish flu in Francophone and Lusophone Africa, where it killed nearly 2% of the continent's population in just six months.²

With the highest average mortality rate during the pandemic, Africa, particularly Sub-Saharan Africa, was the most severely affected of the six continents. From March to July 1918, there were three waves of the Spanish flu, the second which was particularly deadly occurred from August to December of that year, while the third occurred in 1919. It was the devastating second wave that first launched the assault on Africa. The second wave spared these regions because they had already developed some immunity to the virus, while the first wave only affected Southeast Africa and North Africa (the Maghrib and Egypt) (the Natal Province of South Africa and its neighboring territories). The second wave's effects on those continents were less catastrophic than they were for the rest of the world.³

As a result of the ongoing World War I, the second wave entered Sub-Saharan Africa via the seaports of Freetown, Cape Town, and Mombasa. In Freetown it was believed the virus came from England, when the war ship arrived in Freetown on 14th August 1918, 124 members of the crew had died, but the ship and its passengers were not quarantined because civilian authorities were hesitant to interfere with naval operations.⁴ As a result, colliers, dock laborers and sailors were infected and from there the flu quickly spread to the general

¹ Sib, Bhekimpilo, and a. 2020. "Africa: Tracing the History of Pandemics." AllAfrica.com. June 15, 2020. https://allafrica.com/stories/202006150640.html.

² "Influenza Pandemic (Africa) | International Encyclopedia of the First World War (WW1)." n.d. Encyclopedia.1914-1918-Online.net. https://encyclopedia.1914-1918-online.net/article/influenza_pandemic_africa.

³ Mueller, Juergen: What's in a Name? Spanish Influenza in Africa and What Local Names Say about the Perception of this Pandemic, unpublished paper for "The Spanish Flu after 80 Years" conference, Cape Town, 1998, p.

⁴ In an article by K. David Patterson and Gerald F. Pyle that appeared in the journal Social Science and Medicine, they discuss how the influenza pandemic spread throughout sub-Saharan Africa between 1918 and 1919.vol. 17, no. 17, 1983, p. 1302.

population. Within two weeks 70 percent of the population was stricken, the governor reported that the virus was disorganizing everything, and everyone was attached at once.⁵

Members of the South African Native Labour Corps (SANLC) were aboard ships leaving Europe, and they made two stops at Freetown. Hence Freetown served as the starting point for the infections that were reported in Cape Town and the surrounding areas. After the soldiers had left, cases of the Spanish flu started to appear on board, seclusion camps were established to house the soldiers who had not yet displayed infection symptoms before being sent home. This prompted health officials to investigate the situation. However, in no time cases of the flu began to appear among the staff of the military camp, hospital staff, stevedores, fishermen and the transport unit.⁶

In late September 1918, Kenya reported cases of the flu which was suspected to have had entry from an Indian ship through the Mombasa port. The disease was widespread among Kenyan Carrier Corps personnel, when they travelled up country so the flu spread rapidly through the countryside. The same pattern was experienced in Tanganyika formally known as Tanzania and from there Nyasaland now Malawi.⁷ The pandemic spread from the coast to the interior, engulfing the indigenous communities. Due to the migratory character of the infected, the H1N1 influenza virus has already spread to the interior of west, central, southern, and eastern Africa within three months. The colonial transit network, which connected Dakar to Mombasa and the Cape to Congo, helped the virus spread more quickly throughout the continent. Despite the fact that the fatality data in Africa are not totally reliable, the states with a sea and land transit network were the most badly affected. According to estimates, the epidemic claimed the lives of 2.4 million Africans, or 1.8% of the

⁵ Ibid

⁶ Ibid

⁷ Melvin E. The First World War and Malawians, Boulder discusses The Chiwaya War. 2000, p. 166.

continent's total population at the time, with 2.2 million of those deaths taking place in Sub-Saharan Africa.⁸

The continent suffered a demographic catastrophe where young adults between eighteen and forty years were the bulk of those who died. This led to a social and economic catastrophe. The Spanish Flu came at a time when there was constant mistrust between the colonial powers, civilian leaders, and the civilians. The World War 1 and the lack there of collective initiatives gave the Spanish flu leeway to cripple economies and claimed lives.⁹

The East African region has been a key player in international trade due to its ports and plays a role as an access point to Africa. The Corona Virus just as the Spanish flu came through transport lines but unlike the Spanish flu this decade saw the virus ferried on airplanes and in plain sight. The East African region is characterised by weak health systems, and this attributed to the influx of causalities who could not access medical assistance in time. Kenya and Tanzania initiated responses towards protecting their national territories against the pandemic. Initiating nationwide curfews and Border controls to be able to monitor the spread of the pandemic.

The Spanish flu rocked the East African region when states were still colonised and hence Africans died without knowing what was killing them and how to protect themselves against it. The Corona Virus came to the region when there were already set measures in place to safeguard the region and act promptly. By ignoring the virus' presence and declining to take the necessary precautions to protect its citizens, Tanzania eventually severed ties with the surrounding area and the rest of the world. Kenya complied with the established regional and global standards.

 ⁸ NP Johnson and J Mueller Updating the accounts: global mortality of the "Spanish" influenza pandemic that occurred in 1918–1920. Bull Hist Med, Spring 2002;76(1):105-15. doi: 10.1353/bhm.2002.0022. PMID: 11875246.
 ⁹ Ibid

1.3 Statement of the problem

The Corona Virus pandemic is a global challenge that called for cooperation among state parties. The actual response from states while showcasing considerable international cooperation, lacked more so due to the nationalistic responses that derailed regional measures in place. Nationalistic protective tactics took precedence making it difficult to shorten the burden of the global pandemic in the East African region.

The Kenyan government alongside some of the EAC member states showcased cooperation by ensuring that the recommendations given by the WHO were implemented, and this compliance encouraged integration and trust in the region. Tanzania on the other hand, ignored the recommendations given and calls for compliance, creating mistrust among members and isolation for Tanzanians from neighboring states. This study therefore investigates the implications brought about by the differences in the national response mechanisms adopted by these two nations in the EAC regional block.

By examining the role those state-centric decisions play in addressing pandemics around the world, this study aims to advance our understanding of health integration. Any deviation from the collective guarantees' failure of the entire team. The effects of non- compliance led to a setback in returning to normalcy in the EAC region and Tanzania faced a significant humanitarian crisis which was characterized by withholding of information detrimental to the fight of COVID 19. This therefore raises the fundamental question "to what extent does National interest come before the safety of the public good?"

Global health security issues do have a niche of bringing out the systemic challenges that are within states and the susceptibility of already built relationships. With the actions taken up by Tanzania there was no mighty push from the East African community to facilitate a shift and safeguard the citizens of Tanzania. Hence, are there health structures in place in the East African community to ensure that states cooperate to the greater good of the collective? The study examines the adverse effects of nationalistic decisions by Kenya and Tanzania and the impacts they had in curbing the spread of COVID 19.

1.4. Study Objectives

1.4.1 Research Questions

- i. What are the regional responses to the COVID 19 pandemic from the EAC?
- **ii.** What impact do the national response strategies the Tanzanian government has adopted have on the management and prevention of the COVID 19 pandemic's spread?
- iii. What impact do the national response strategies the Kenyan government has adopted have on the management and prevention of the COVID 19 pandemic's spread?

1.4.2. Main Objective

The main objective is to compare Kenya's and Tanzania's responses to COVID 19 in order to identify which nation has advanced the most.

1.4.3. Specific Objectives

- To determine and evaluate the regional containment efforts and responses to the COVID 19 pandemic in the EAC.
- ii. To identify and assess the national response mechanisms used by the Tanzanian government in the prevention and control of the COVID 19 pandemic.
- iii. To identify and examine the national response mechanisms by the Kenyan government in the control and mitigation of the spread of COVID 19 pandemic.

1.5. Literature Review

An overview of pertinent literature on the topic of the study will be given in this section. Both empirical and theoretical reviews will be included in the review.

1.5.1. Theoretical Literature Review

The Corona Virus Pandemic aroused questions about the utility of international relations theories for understanding the response and containment measures to pandemics. As such there are various theoretical debates underpinning this.

1.5.1.1. Realism

Realists view the world as it is, rather than how we wish it to be. Realist analysis is based on genuine science of IR, which is quantifiable, and evidence based. The theory is linked to scholars such as Hans Morgenthau and Kenneth Walts and has the basic assumptions that people are selfish in nature with an instinctual thirst for power and desire to dominate others. The promotion of a state's national interest is shown to be every state's main goal by realism.

According to realism, each state's main goal is to advance its own national interests. The state is the main actor, and in order for states to survive, self-help techniques are used. Realists claim that the global system is anarchic. This anarchic nature forces states to behave in a nationalistic manner.¹⁰ Realists are pessimistic about cooperation and ascertain that the response to COVID 19 has been characterized by inward-looking, self-help activities. Implementation of Travel bans and border controls, international blame games, competition and pharmaceutical protectionism are examples of nationalistic agendas.¹¹

Realist scholars claimed that the speed with which the EU's ideals were abandoned in favor of national self-help after the pandemic struck was not surprising. The COVID 19 response plans in Europe were characterized by violations of current EU laws, competitive state motivations, and restrictions on free movement. Countries restricted cross-border travel, and

¹⁰ International politics according to neoclassical realist theory, Taliaferro, Ripsman, and Lobell (2016). Oxford University Press, New York

¹¹ Basrur, R., Kliem, F. Covid-19 and international cooperation: IR paradigms at odds. *SN Soc Sci* **1**, 7 (2021). https://doi.org/10.1007/s43545-020-00006-4

EU capitals adopted a nationalistic persona.¹² Export restrictions were put in place by several EU nations. Italy, one of the worst-hit nations at the time, appealed to a fellow EU member for emergency assistance, but in typical realist fashion, the call was ignored because other EU members had broken the rules of the single market by prohibiting the export of pharmaceutical equipment.¹³

Similar nationalistic self-help behavior was also practiced by the US at the expense of other nations. In an effort to gain exclusive access to CureVac's product, the US made an effort to compel the German company to relocate there. CureVac was developing a promising pandemic vaccine. The sale of masks to Canada was eventually blocked by the former President Trump after some competitive antics. By reorganizing the global supply chain, the US and Japan, like other nations, sought to lessen their reliance on China.¹⁴ Had it succeeded it would have affected interactions today.

Realists believe that international institutions do not have long term gains for all. According to realism, international organizations are an arena for zero sum competition due to the anarchic nature of the system. Taiwan has not been recognized by the international system because of the PRC's refusal. Realists contend that the WHO is highly politicized; hence the reason Taiwan's Covid response and lessons have been ignored in published research and observation.¹⁵ Taiwan had a successful pandemic response and management efforts published in the Financial Times.

¹² "The Guardian" (2020a) The EU failed Italy—and is still failing it—at a time when it really needed unity. 19 April. https://www.theguardian.com/world/2020/apr/19/european-union-italy-unity-failure-debt-germany-netherlands. 19 April 2022, accessed

 $^{^{\}rm 13}$ Braw E (2020) Italy is being abandoned by the EU at a critical time. 14 March for foreign

policy. <u>https://foreignpolicy.com/2020/03/14/coronavirus-eu-abandoning-italy-china-aid/</u>. Accessed 19 April 2022 ¹⁴ According to Pamuk and Shalal, officials in the Trump administration are trying to cut China out of global supply chains (2020). Chinese officials are being distanced from global supply chains by the Trump administration, according to Reuters.4 May, https://www.reuters.com/article/us-health-coronavirus-usa-china/idUSKBN22G0BZ retrieved on April 19, 2022 ¹⁵ Basrur R, Kliem F. Covid-19 and international cooperation: IR paradigms at odds. SN Soc Sci. 2021;1(1):7. doi: 10.1007/s43545-020-00006-4. Epub 2020 Nov 9. PMID: 34693301; PMCID: PMC7649056.

As Belgium's pressures affected the WHO's decision, this acknowledged the claims made by neoclassical realists that domestic factors influence foreign policy decisions and obstruct international cooperation.¹⁶ Realism posits that because there is no trust systematically inherent in the system and the anarchic nature, states resolve to inward looking responses and zero-sum games especially when faced with a common global challenge.¹⁷

Using a realist approach, other paradigms seem to have low standing in explaining state behavior during the COVID 19 pandemic. The state is the main player, and they are by nature self-centered. States will always prioritize their own national interests over those of the entire country, especially in the absence of a strong regional or international authority. The fact that Burundi went ahead and held national elections after contracting the virus is evidence of this in the East African Community.

The EAC did not implement any repercussions even though there were ratified SOPs for the region and Burundi was advised against that action.

Lack of trust in the collective especially during crisis is seen in the system. States will not cooperate if they will not have something to gain from it. Cooperation only occurs when it does not clash with state's interest. Inward looking behavior has been evident throughout the global management of the COVID 19 Pandemic.¹⁸

1.5.1.2. The Liberal Approach

Liberalism has its roots in idealism, Liberalist core ideology is democracy and individual freedom. The liberal school of thought believes in progress and even in situations where states do not act in unison but as a set of bureaucracies, each with its own interests and hence

¹⁶ Ibid

¹⁷ Covid-19 and international cooperation: IR paradigms at odds. Basrur, R.; Kliem, F. Soc. Sci. SN **1**, 7 (2021). https://doi.org/10.1007/s43545-020-00006-4

¹⁸ International cooperation and Covid-19: conflicting IR paradigms. At odds IR paradigms, Basrur, R. Soc. Sci. SN **1**, 7 (2021). https://doi.org/10.1007/s43545-020-00006-4

states cannot act based on national interest. The four pillars of liberal theory are democracy, cooperation, interdependence, Tran's nationalization, and the development of national institutions.¹⁹

Liberals believe that states that depend on one another must work together or pay a heavy price. Collaboration is essential to the connections that make up the global village. According to liberalism, states must work together to counter threats that cross international borders and place high vulnerabilities on all societies. Liberalists contend that states must share resources either in terms of knowledge and material to counter an issue that affects all nations.²⁰

In spite of her inconsistent cooperation, the US led efforts during the onset of the pandemic to ensure that reliable equipment was available so that the virus could be contained. The United States also held medical supplies. European states, regardless of being in a strong regime failed to effectively coordinate policy. This shows the competitive nature of interdependent states. Liberalists contend that only when the collective is disconnected, and this raises a common problem then with states cooperate.

Governments only cooperate when a major catastrophe is more likely to occur if interdependence breaks down; dependence itself does not naturally promote cooperation. In the Cold War, for example, nuclear states exercised extreme caution when at risk of war and tried to resolve issues through talks, as a tacit form of cooperation.²¹

When the Corona Virus Pandemic started, epistemic communities collaborated like never before. In order to combat the possibility of a SARS virus outbreak in 2002, scientists from

¹⁹ International political science encyclopedia, Liberalism in International Relations, Doyle M., Recchia S. edited by Badie B, Berg-Schlosser D, and Morlino L.Sage, 2011; Newbury Park, CA; pp. 1434–1439.

²⁰ Bradley, J. (2020) Rich countries rush to get supplies while ignoring developing nations. MSN.com, April

^{20.} https://www.msn.com/en-us/news/us/in-scramble-for-supplies-rich-countries-push-poor-aside/ar-BB12pfLy. Accessed 20 April 2022

²¹ Covid-19 and global collaboration, Incompatible IR paradigms, Basrur R and Kliem F. SN Soc Sci. 2021;1(1):7. doi: 10.1007/s43545-020-00006-4. Epub 2020 Nov 9. PMID: 34693301; PMCID: PMC7649056.

numerous nations worked together. The COVID 19 epidemic, according to the New York Times, has spurred previously unheard-of collaborative research in which experts have forgone conventional procedures and competitive secrecy to take part in cooperative initiatives.²² Politics however, trumped cooperation.²³

A crucial corona virus training program for Chinese and international experts was stopped in its tracks by the United States. Realistically, it can be assumed that national priorities have prevailed over cooperative action.²⁴ Even though they disagreed on whether China was to blame, the G7 foreign ministers released a three-word statement urging research collaboration and emphasizing that everything needed to be done to mitigate the economic shock brought on by the crisis. The G7 was unable to schedule a summit meeting for March 2020 as a result.²⁵

Disagreements over the distribution of preventative resources, like as protective gear and ventilators, have regularly occurred between industrialized nations in Europe and North America, and these nations haven't done much to act together. In East Africa this was seen when Burundi and Tanzania in the midst of a pandemic went ahead to conduct national elections regardless of the numerous warnings to do so.²⁶ The EAC and AU gave recommendations on collective action but states limited the efforts through inward looking efforts. Overall the liberal theory does not explain the manner in which states cooperate during the COVID 19 crisis.

 ²² Apuzzo M, Kirkpatrick D (2020) Covid-19 changed how the world does science together. New York Times 1 April.
 ²³ Basrur R, Kliem F. Covid-19 and international cooperation: IR paradigms at odds. SN Soc Sci. 2021;1(1):7. doi:

^{10.1007/}s43545-020-00006-4. Epub 2020 Nov 9. PMID: 34693301; PMCID: PMC7649056.

 ²⁴ Baumgaertner E, Rainey J (2020) Trump administration ended pandemic early-warning program to detect coronaviruses.
 ²⁵ Schult C (2020) Streit über 'Wuhan-Virus.' Der Spiegel 24 March. <u>https://www.spiegel.de/politik/ausland/streit-um-wuhan-virus-a-6bb570bb-9f2b-4cd1-a895-fdeabf53f6b4</u>. Accessed 3 May 2022

²⁶ Cohen E, Musmar F (2020) Coronavirus reveals the lack of unity at the EU and the UN. BESA Center Perspectives Paper 531, 15 April. <u>https://besacenter.org/perspectives-papers/coronavirus-reveals-the-lack-of-unity-at-the-eu-and-the-un/</u>. Accessed 3 May 2022

1.5.2. Empirical Literature Review

This section reviews the research on COVID 19 pandemic counter measures is reviewed. The section will receive responses from the African Union, the East African Community, and the European Union (EU) (EAC).

1.5.2.1. Response and containment measures to COVID 19 pandemic

The corona virus first appeared in the Wuhan region of China in December 2019. Because the virus was new, it spread quickly among people, and no one had immunity to Covid 19. The virus, which was initially believed to be a Chinese epidemic, quickly spread across the globe. By the end of the month, more than 500,000 people had been affected by COVID 19 and more than 30,000 had died, according to the WHO's pandemic declaration of March 2020. As people learned how to prevent the virus from spreading, governments around the world passed laws requiring residents to stay at home and shut down public facilities like schools and businesses. The world's top priority changed to the race to survive the pandemic.

To find ways to stop the virus from spreading around the world, international institutions banded together. For information sharing within the region, the European Union activated the integrated political crisis response mechanism. Following consultative high-level meetings, the European Union adopted travel and pandemic preparedness guidelines.

Stopping the virus's spread, ensuring the availability of medical supplies, fostering research for treatments and vaccines, and bolstering employment, businesses, and the economy were the four main objectives of the EU's response to COVID 19.

The European Union has kept up its coordination efforts, concentrating on testing tactics, mutual test recognition, tracing cross-border contacts, and quarantine laws. Development, production, and distribution of vaccines as well as digital vaccination certificates that is interoperable. To combat the COVID 19 Pandemic, some EU members implemented a

variety of restrictive measures, ranging from case quarantine and contact isolation to total population lockdown. Government initiatives were noted to play a critical impact in delaying the COVID 19 infection's early dissemination and case fatality rates.

The African Union in February 2020 came together to discuss and map out a joint direction in Addis Ababa. At that time Africa had only reported one case, the continent was feeling the impact economically and socially. The African Union started interventions in partnership with the Africa Center for Disease Control and Prevention to help African governments get ready for potential virus transmission inside the continent (ACDCP). The two main challenges encountered when attempting to contain the Corona Virus pandemic were identified by the WHO AFR Plan as political willlessness in some countries and a lack of adherence to some WHO directives.

The collaboration between the AU, WHO, Africa CDC, and West African Health Organization made a substantial effort to build more testing laboratories across Africa. Between February and the middle of March 2020, the number of testing laboratories increased from two to 43. The international community supported Africa in a number of ways to uphold African governments' pandemic response efforts. In order to identify, prevent, and respond to the COVID 19 pandemic, the World Bank, IMF, USAID, UN, China, and other organizations provided material and financial support to Africa over the short, medium, and long term. Even though the majority of African nations displayed excellent response capabilities and general resilience, there were pronounced differences in all of the affected African states' levels of readiness, capacity for innovation, timeliness, and efficacy of policy implementation.

The AU took the lead in resource mobilization. These acts communicated a unified message to other international institutions and individual donors, pleading with them to release additional cash, suspend interest payments, and facilitate the acquisition of desperately needed medical supplies. The African Union nominated four special envoys to organize worldwide support for Africa's struggle, who were responsible with requesting and following up on the G20, European Union, and other international financial organizations' pledges of assistance.

On March 31, 2020, the Intergovernmental Authority on Development (IGAD) called a special summit on the Corona Virus disease, at which participants decided to create an emergency fund for pandemic disease control and prevention as well as a regional response strategy. As a show of solidarity in the Covid 19 conflict, IGAD donated \$100,000 to each of its member countries. Although not familiar with pandemic strategies, IGAD looked beyond its purview and merged it with its mandate by connecting the challenges to peace and security that the pandemic was likely to bring about, its effects on the dynamics of ongoing conflict in the region, and the degree to which the pandemic was impeding ongoing peace processes.

1.5.2.2. National response and containment measures to COVID 19 pandemic

States immediately adopted policies that were inward-looking in the wake of the pandemic. In light of the policy responses and directions taken by global actors in their various survival struggles, the COVID 19 epidemic presented a scenario that had never been seen before and demonstrated the viability of collective security.²⁷ States have implemented sectorial and national lockdowns as well as border closures in an effort to stop the pandemic from spreading. Politics that used blame-counterbalancing were popular at the time the virus first appeared. The development of vaccines is just one of many examples. These efforts are

²⁷ Will, M., Vos, R., and Laborde, D. (2020). The spread of COVID-19 is currently not a significant threat to world food security. Blog for the International Food Policy Research Institute. https://www.africaportal.org/features/covid-19-spreads-no-major-concern-global-food-security-yet/

motivated by power politics and a desire to gain an edge over competitors in the global economy.²⁸

The realist view holds that since it appears that nations are aware that they will employ any means necessary to further their national interests, all other actors must choose between pursuing unity of purpose and uniqueness of interest. If not carefully managed, the pursuit of these dissimilar interests by a large number of states will inevitably lead to systemic instability. As a result, it is fascinating to observe the issue facing international actors in the wake of the pandemic.²⁹

Politics has been a defining feature of the international cooperation required to combat security threats like climate change. COVID 19 poses a security risk because of the harm it causes to global public health as well as the effects it has on the sociopolitical and economic viability of states. The reality that distrust among governments drives them to take activities that provide them a comparative advantage complicates the rhetoric of mutual and communal security in the face of the coronavirus. This rivalry has hampered cooperation and security in the face of concerted international efforts to stop the pandemic.³⁰

The fact that each participant would rather act in his or her own self-interest than the interests of the group continues to be a problem in the international system. This could explain why international travel was prohibited and borders were closed when Covid was dominant, despite economic and sociopolitical concerns.³¹

²⁸ Wong, C., Wong, J., Tang, E. H., Au, C. H., Lau, K. T., & Wai, A. K. (2020). Impact of National Containment Measures on Decelerating the Increase in Daily New Cases of COVID-19 in 54 Countries and 4 Epicenters of the Pandemic: Comparative Observational Study. Journal of Medical Internet Research, 22(7), e19904. https://doi.org/10.2196/19904

²⁹ Patrick, Hosea & Khalema, Ernest & Abiolu, Rhoda & Mbara, George. (2021). National Interest And Collective Security: Assessing The 'Collectivity' Of Global Security In The Covid-19 Era. Humanities & Social Sciences Reviews. 9. 499-507. 10.18510/hssr.2021.9248.

³⁰ Patrick, Hosea & Khalema, Ernest & Abiolu, Rhoda & Mbara, George. (2021). National Interest And Collective Security: Assessing The 'Collectivity' Of Global Security In The Covid-19 Era. Humanities & Social Sciences Reviews. 9. 499-507.. 10.18510/hssr.2021.9248.

³¹ Ibid

At a critical juncture in the global fight against cholera, the then-US President Donald Trump made the decision to stop funding the World Health Organization in accordance with US national interests. Many contend that the decision to donate any money is entirely up to the donor. However, the implications of this choice during the world's most serious health crisis had a huge detrimental influence on global health collaboration, particularly in the global South.³²

The struggle for global hegemony between China and the United States is also inextricably linked to this strategic choice. For instance, the US and its allies strategically oppose China's attempts to establish itself as the dominant force in the fight against the COVID 19 Pandemic, known as the "Global Mask Diplomacy." This could be the reason Donald Trump and his allies accuse China of being opaque in its response to the pandemic and blame China for the disease's origins. Trump even speculated that the pandemic was a Chinese ploy to assure his defeat in the 2020 US election.³³

The desire for hegemonic dominance and international prominence is believed to have driven China's and the United States' COVID 19 Pandemic responses. These hegemonic powerhouses' actions and policy responses to the global fight against the COVID 19 pandemic are influenced by their shared mistrust of one another, according to the theories employed in this study. The fear that each state would act in its own interests undermines the coordinated international efforts needed to combat the pandemic, even though each player's initial concern is survival.

³² Patrick, Hosea & Khalema, Ernest & Abiolu, Rhoda & Mbara, George. (2021Examining the 'Collectivity' Of Global Security in the COVID-19 Era: National Interest And Collective Security Reviews in the humanities and social sciences. 9. 499-507.. 10.18510/hssr.2021.9248.

³³ Hans, G. (2020, April 25). Coronavirus: EU may "collapse," according to Macron: "The whole of Europe will fall." Express.https://www.express.co.uk/news/world/1273663/EU-coronavirus-latest-updates-Emmanuel-Mac ron-France-Germany-Italy-bailout

China, like the US, has not made any decisions regarding her foreign policy that conflict with her strategic national interests. Because of China's gradual rise to power, the relationship between the two countries is becoming more unstable.³⁴ The laws passed during this time have a big impact on how world affairs will develop in the post-COVID 19 eras. In a related vein, it's critical to research the WHO, which the US Government used as justification for its decision to scale back funding commitments. It is unclear why the WHO is reluctant to hold China accountable for her role in the disease's spread given the difficulty of punishing China and the organization's reluctance to declare the illness a global pandemic.³⁵

The European Union's collective security framework is concerned about the Covid19 pandemic, the hegemony conflict, and the need for a well-coordinated global strategy. The problem that the European Union (EU) is currently facing serves as a reminder of how crucial national interest alignment is to sustaining collective security. Despite the fact that EU policymakers concur that the epidemic is a threat to social and economic security that requires a coordinated response, their strategies vary based on their interests and strategic positioning.³⁶

The German response to the same pandemic illustrates the significance of national interests in determining policy action in the international sphere, in contrast to the rest of Europe's tardy and careless response to it. France and Italy, two countries in Southern Europe, advocated a Covid-19 military plan-style reaction that involved "joint aids" and "budgetary transfers" for the regions that were most seriously damaged, while other countries in the North opposed it.

 ³⁴ Huang, C. -c., Shih, C.-y., and (2015). China is looking for a grand strategy. Should it be based on power, relationship security, or national interest? Journal of International Politics in China, 8(1), 1–26. https://doi.org/10.1093/cjip/pou047
 ³⁵ Green, M. S. (2020). Did the hesitancy in declaring COVID-19 a pandemic reflect a need to redefine the term? *The Lancet*, *395*(10229), 1034–1035. https://doi.org/10.1016/S0140-6736(20)30630-9
 ³⁶ Ibid

An aid program based on loans was preferred by nations like Germany and the Netherlands.³⁷

French President Emmanuel Macron once remarked, "If a part of Europe falls, Europe will fall as a whole." The need for Northern European states to put aside their own interests in order to support their Southern counterparts and ensure cooperation in resolving the Covid-19 crisis may have served as the driving force behind this statement. Given that the severity of the epidemic's vulnerability varies across Europe, it is important to note that these governments' perspectives are once again in line with their distinctive national interests.³⁸

The Covid-19 outbreak prompts fresh worries about US-European relations, both in terms of individual and societal security. Concerns about the concept of solidarity were raised in the wake of the pandemic when the Trump administration issued an executive order prohibiting anyone from traveling from Europe to the United States. Even though a ban on Europe might be justified in terms of national health care, the decision to enact a ban also undermines the concept of a collective and promotes the desire for "self-survival."³⁹

The French government's argument that it is unacceptable for a multinational pharmaceutical company to reserve the initial supplies of its Covid-19 vaccine for the US market because the company is based in France serves as a superb illustration of how an actor's perception of self-survival influences their policy actions and decisions.⁴⁰

³⁷Hans, G. (2020, April 25). Macron warns EU could 'collapse' over coronavirus – 'The whole of Europe will fall. Express. https://www.express.co.uk/news/world/1273663/EU-coronavirus-latest-updates-Emmanuel-Mac ron-France-Germany-Italybailout

³⁸ Patrick, Hosea & Khalema, Ernest & Abiolu, Rhoda & Mbara, George. (2021). National Interest And Collective Security: Assessing The 'Collectivity' Of Global Security In The Covid-19 ErA. Humanities & Social Sciences Reviews. 9. 499-507. 10.18510/hssr.2021.9248.

³⁹ Patrick, Hosea & Khalema, Ernest & Abiolu, Rhoda & Mbara, George. (2021). National Interest And Collective Security: Assessing The 'Collectivity' Of Global Security In The Covid-19 Era. Humanities & Social Sciences Reviews. 9. 499-507. 10.18510/hssr.2021.9248.

⁴⁰ P. Bairin and S. Cullen (2020, May 15). France advises the pharmaceutical giant against giving the Covid-19 vaccine's initial doses to Americans. Cable Network https://edition.cnn.com/world/live-news/coronavirus-pandemic-05-14-20-intl/h_0e27ae01a67ed737e5c26c5465feccc7?utm_content=2020-05-14T17%3A30%3A06&utm_source=fb

CNNi&utm_term=link&utm_medium=social&fbclid=IwAR2kjw-6UECk-D2kszIIcMJYgLDBa1O8cWNVhrX 5_Qmc1MxdB_

The hierarchy of France's requirements places her survival above her "desire for belonging" to the global community in this situation because it is more important. The global effort to contain the Covid-19 outbreak confirms Morgenthau's theory that national interest in international affairs is a "power play." One could contend that participants on the international stage were vying to be the first to discover a vaccination for the virus on the grounds that owning the vaccine would define the new hegemon in the new global order established by the Covid-19 pandemic.⁴¹

This may shed light on why China, the US, Russia, and other hegemons are working to create the first vaccination in human history. Additionally, the suspicion that each actor has for the other could lower the cost for everyone. The lack of progress in the Covid-19 epidemic response could be predicted by the ongoing singularity of actions in this situation, which are driven by the desire for comparative and strategic advantage. Various human collective security challenges, such as terrorism, human migration and displacement, starvation, global warming and climate change, among others, are illustrated by these "politics of self" scenarios. Due to barriers provided by national interests that inhibit cooperation, some international disputes have narrowly avoided escalating.⁴²

The US, China, and other international leaders' previous responses to the pandemic show that the fight against the virus is hidden in the politics of self-survival and the desire for comparative advantage rather than a "collective." Blame-games and power struggles between global leaders in an effort to acquire a competitive edge result in new crises inside a

⁴¹ Patrick, Hosea & Khalema, Ernest & Abiolu, Rhoda & Mbara, George. (2021). National Interest and Collective Security Reviews in the Humanities and Social Sciences: Examining the 'Collectivist' Of Global Security in the COVID-19 Era.9. 499-507. 10.18510/hssr.2021.9248.

⁴² Patrick, Hosea & Khalema, Ernest & Abiolu, Rhoda & Mbara, George. (2021). National Interest and Collective Security Reviews in the Humanities and Social Sciences: Examining the 'collectivist' of Global Security in the COVID-19 Era.9. 499-507. 10.18510/hssr.2021.9248.

pandemic because individuals fighting the disease on their own will have little impact in a globalized setting.⁴³

1.5.3 Gaps in the Literature

Despite on-going political efforts to address international health-related problems. International relations and public health are two separate disciplines. Global health is managed primarily within national borders by government employees and non-governmental organizations, so researchers in this field have a different level of analysis. The ability of states to conduct their internal and external affairs without outside interference is characterized as the state, which is recognised by IR theories and academics as the primary analytical unit. It differs from all other global actors in this way. The theory's analysis is constrained.⁴⁴

1.5.4. Research Hypotheses

The study will test the following hypotheses.

- Nationalistic response mechanisms led to prolonged effects of the COVID 19 pandemic in the East African Community.
- Nationalistic response mechanisms do not contribute to the prolonged effects of the COVID 19 pandemic.

1.5.5. Justification of the study

1.5.5.1. Policy Justification

The study is useful to the various governments of Kenya, Tanzania, and the collective East African Community in developing sustainable and practical health security structures. The study assists the government of Tanzania and Kenya in their attempts to recover and prepare

⁴³ Ibid

⁴⁴ Patrick, Hosea & Khalema, Ernest & Abiolu, Rhoda & Mbara, George. (2021). National Interest and Collective Security Reviews in the Humanities and Social Sciences: Examining the "Collectivity" of Global Security in the COVID-19 Era.9. 499-507. 10.18510/hssr.2021.9248

for future similar threats. The study gives policy recommendations aimed at ensuring that governments have comprehensive improvement in the security structures that have evolve with the changing form of threat. The study offers policy makers and regional security institutions a comprehensive overview of the significance of the changing form of threat which broadly also involve climate and environmental threats.

1.5.5.2. Academic Justification

This research broadens the body of knowledge in the academic community and will serve as a resource for subsequent studies on related subjects. The study further assists other academicians to build on the study as its gradually progressing. The study helps highlight important aspects such as the end of the pandemic that require further investigations. Global Health pandemics and how politics come into play is a study that evolves with time. This research educates scholars and academicians on collective action against a threat that doesn't use force.

1.5.6 Theoretical Framework

The theory that underlies the research is applied in this section, which connects the author to the body of existing knowledge and serves as the foundation for the hypothesis and choice of research methodology. In order to understand the effects of nationalistic responses to the COVID 19 pandemic and how various responses affected the struggle to halt the virus' spread in the East African region, the researcher identified theoretical presuppositions in the body of existing literature. The theory is then employed as the primary alternate framework for understanding these consequences.

After the Cold War ended, the discourse on international relations made a wider range of perspectives for understanding and evaluating world politics available. The constructivist school of thought holds that the interests and identities of states are remarkably malleable

byproducts of specific historical processes. The value of identities, roles, and belief systems is heavily emphasized in constructivism, a subset of ideational theory. The agreement on reality and the appropriate responses to it govern how actors interact in international politics.⁴⁵

Strongly held beliefs about the priority states that ought to be followed in such situations have an impact on how the COVID 19 epidemic is being handled. As opposed to realists' assumption that states coexist in an anarchic environment, constructivists contend that assumptions about what is and is not feasible in such a situation limit the likelihood of cooperation. Constructivism's central tenet is that anarchy is what states make it.⁴⁶

Therefore, the lack of collective action in the face of the epidemic is a product of a realist cognitive framework rather than being an unavoidable outcome of the material reality of the world. States find it challenging to work together despite the seriousness of the Covid-19 crisis because of the presumed idea that, in the midst of a pandemic, self-help must come first and that power must determine action. According to the constructivist, this ideational construct needs to be transcended in order to attain partnership.

In contrast to the materialist perspective of international politics, the idea focuses on moral judgment about what should be. Constructivists can be categorized into the critical and conventional epistemological groups. Conventional constructivism has been used in studies of global health politics; this constructivism is largely state-centric, prefers posivist epistemology, and does not stray too far from mainstream IR.⁴⁷

⁴⁵ Onuf N (1989) International relations and social theory have rules and regulations that we have created... University of South Carolina Press, Columbia

 ⁴⁶ Wendt A (1992) through the social construction of power politics, states foster anarchy. Inside Organ 46:391–425
 ⁴⁷ T. International Security, Hopf's "The Promise of Constructivism in International Relations Theory,"23 (1998): 171-200.

³²

Constructivism questions institutions and social power structures by concentrating on their origins and whether or not they are evolving. It does not take these things for granted. Critical theories give many implications of global power differentials on identities, interests, and norms.⁴⁸ They question political authority's legitimacy, power's pathologies, and the link between authority and knowledge. However, global health challenges continue to be implicitly state-centric in global politics, based on identities, interests, and conventions.⁴⁹

In this study, the constructivism theory was employed, a learning theory that views students as active actors in the building of knowledge from meaningful interpretations of actual experiences. Constructivist concepts can be applied to the creation of curriculum materials for use in emergency distance learning thanks to the COVID-19 pandemic. The rise in information and erroneous information has coincided with the rise in COVID-19 cases worldwide. The right public health messaging and communication is vital to counter the misinformation but also education might have a notable role to play. The impact of mitigating risks associated with COVID-19 in Kenya and Tanzania can be attributed to the approach that is grounded in social constructivism, sharing uncertainties, supporting participation, and encouraging discussion.

The study emphasizes strongly how crucial identities, roles, and belief systems are to world politics. It demonstrates how the acceptance of reality and the appropriate responses to it shape the behavior of participants in international politics. Deeply established attitudes about the goals that states should adhere to in such instances shape responses to the COVID 19 dilemma. According to constructivists, the options for cooperation are limited by assumptions about what is and is not possible in such a situation.

 ⁴⁸ Dean Shepherd and Suddaby, Roy Journal of Management, "Developing Theories: A Review and Integration." 43 (2017):
 59-86

⁴⁹. Moving Beyond International Relations Theory, Social Forces, States, and World Orders "Millennium - R. Cox International Studies Journal, 10 (1981)– p.129.

It is not a necessary outcome of the larger world that the East African community has not united in response to the epidemic. Despite the seriousness of the COVID 19 issue, East African states were unable to effectively cooperate because of the presumptive belief that one must first help oneself before considering what one's power should do.⁵⁰ This study demonstrates the necessity to overcome the realism behavior of East African states and demonstrate how collaboration, if achieved, will aid increase synergy in the East African community.

1.6 Research Design and Methodology

The plan and framework of an investigation used to gather and analyze data are referred to as the research design, in Kerlinger's view.⁵¹ This study employed a pragmatic approach. In order to suit the goals of the study, proven qualitative methodologies are strategically combined and borrowed from. This study used qualitative and quantitative methods. The specific qualitative approach is explorative. The explorative method was appropriate because it ascertained the different ways Kenya and Tanzania have dealt with the plight of the pandemic.

1.6.1 Target Population

This study concentrated on Kenya and Tanzania, two members of the East African Community. The researcher engaged in interactions with medical professionals, governmental and non-governmental organizations, and academicians in the fields of global politics and health.

Non-probability sampling was utilized by the researcher, in which individuals were chosen based on non-random factors, and not every individual had a chance of being included. The

⁵⁰ World of our making: social theory and international politics norms, N. Onuf Columbia:University of South Carolina Press; 1989.

⁵¹ Foundations of Behavioural Research, F.N. Kerlinger, 1973Holt, Rinehart and Winston Inc., New York.

researcher employed convenience sampling to reach out to academicians and health workers in Kenya. The researcher also incorporated Voluntary response sampling to access academicians in Tanzania. The type of purposive sampling used was heterogenous sampling. The researcher gathered different perspectives from the government and non-governmental organizations in Kenya and Tanzania.

1.6.2 Sample and Sampling Design

The study employed convenience sampling method as it is the most applicable and extensively used method in clinical studies. In this approach, the researcher enrolled participants based on their accessibility and availability. Therefore, this approach was inexpensive, quick, and convenient as the researcher selected the respondents according to their proximity and accessibility. There were cohort studies on Kenyan and Tanzanian COVID-19 patients. The convenience sample in this case was restricted to the available population for the researcher.

Sir Galton formulated the law of deviation, which is now known as the standard deviation, The researcher applied SD.

$N = \underline{Z^2 Pq}$

D²

Where Z = is the proportion of the standard deviation.

P = proportion of the population that possesses or is thought to possess the characteristics expressed in %. Since the author is unsure, p is assumed to be 50%, or 0.5.

Q = 1-p which is the remaining proportion without measure.

D = percentage-based level of statistical significance or confidence.

Z is 1.96

 $N = (1.96)^2 (0.5)^2$

0.05²

=<u>3.8416 * 0.25</u>

0.0025

= <u>0.96129</u>

0.0025

= 384.516

= <u>384</u>

Table 1.1. Target population, sample & sampling Technique

Target Groups	Sample	Sample Technique
East African community	14	Convenient
officials		
Government officials Kenya	20	Purposive
Government officials TZ	20	Purposive
Non-government officials	20	Purposive
Kenya		
Non-government officials	20	Purposive
TZ		
Health Officers Kenya	100	Convenient
Health Officers TZ	100	Voluntary response
Academicians Kenya & TZ	90	Convenient
Total	384	

Source: Researcher 2022

1.6.3 Data Collection Techniques and procedure.

For the investigation, both primary and secondary data were acquired. To gather primary data, questionnaires and focus group discussions/interviews were used. Academic journals,

books by reputable organizations and authors, and any other information relevant to the study were all secondary data sources.

1.7 Data Analysis

The study applied the Qualitative Data Analysis (QDA) method as the information that is collected could not be expressed using numbers. The study used data that was collected through text (questionnaire), audio, and images as well as any information that was shared through infographics. In order to find patterns in the responses given by the study's respondents, thematic analysis was used to examine the qualitative information obtained from various interviews. To make it simple to understand, the information was given in the form of a narrative and was taken directly from primary sources.

1.7.1 Validity

To ensure the research meets validity requirements test- retest reliability measures was used. The test-retest measures were focused on measuring the construct for example through administering interview questions on how Tanzania has protected its civilians through instituting the COVID 19 Global recommendations. This involved interviewing the same group of people at one time and later to determine consistency in responses.

1.7.2 Reliability

The degree to which a measurement procedure—such as a survey, test, observation, or other procedure—produces the same results when applied repeatedly is referred to as reliability. Following the completion of the investigation, the author employed parallel types of reliability. A measure of reliability known as "parallel forms reliability" is obtained by using two different iterations of a questionnaire that contain items investigating the same concept and body of information. The researcher compared the questionnaire findings, and they were nearly identical, demonstrating strong parallel form reliability.

1.7.3 Scope and limitation of the research

Examining how nationalistic policies impact the effort to stop COVID 19's spread in the nations of East Africa is the goal of this academic study. Kenya and Tanzania are the subjects of a comparative study. In order to produce a full research, the study took into account difficulties of accessibility with COVID 19 still crippling the region and time.

1.7.4. Ethical considerations

The processes of planning and carrying out the research require careful consideration of research ethics. The researcher requested authorization from the National Commission for Science, Technology, and Innovation to carry out the study because they wanted to use data that was widely available to the general public (NARCOSTI). As soon as the research project began, the researcher made sure that the subjects' data rights were upheld. The participants in the study were not coerced into participating; the principle of voluntary participation was used.

1.8. Chapter Outline

The overall introduction and assessment of the research problem are included in chapter one. It includes background data on the issue, a theoretical framework, and the study's goals.

In Chapter 2, determined and assessed how the COVID 19 Pandemic response and containment measures affected the EAC region.

The third chapter outlined and evaluated the Tanzanian government's national response strategies for containing and reducing the COVID 19 Pandemic's spread.

In Chapter 4, the Kenyan government's national response mechanisms for containing and reducing the COVID 19 Pandemic's spread were identified and evaluated.

Chapter 5 will provide a summary of the study's findings, recommendations, and ideas for additional research topics.

CHAPTER TWO

THE EAST AFRICAN COMMUNITY REGIONAL RESPONSE AND CONTAINMENT MEASURES TO COVID 19 PANDEMIC

2.0. Introduction

This chapter discusses the East African community's COVID 19 plan and its implementation. The chapter also investigates the efficacy of the EAC Covid plan and the impact of national responses and containment measures.

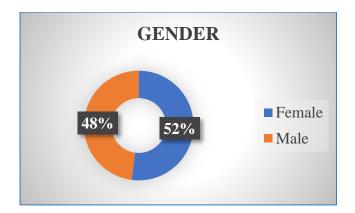
2.1. The study Demographics Characteristics

Vogt and Johnson define the study of demography as the quantitative analysis of statistics pertaining to a particular population in Connelly et al. The targeted population's age, gender, and occupations, as well as the social and economic activities they partake in, are described in this information, making it significant.⁵²

In order for the researcher to comprehend how the various gender groups relate to the COVID 19 pandemic and how each group has been impacted socially and economically, the study included participation from both the male and female gender from the targeted population.

Figure 2.1. Gender

⁵² Connelly, Lynne. 'Demographic data in research studies.' MLA 8th edition. MedSurg nursing, 2013. Gale academic onefile.



Source: Field data 2022

The age bracket analysis was captured because the researcher wanted to capture the different opinions through professional expertise. Comparing respondents who have been employed for a long time to those who are younger, it was evident that the former have a wealth of research knowledge. Therefore, respondents who were 46 years of age or older made up the majority of the sample.

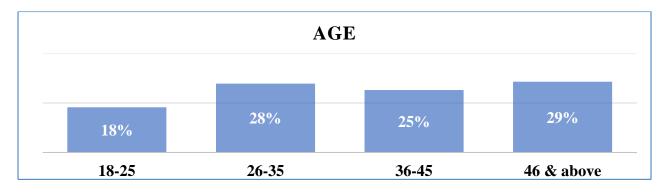
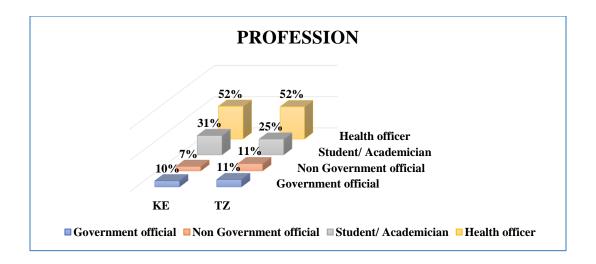


Figure 2.2 Age bracket

Source: field data 2022

In order for the researcher to gather authoritative and professional data on the research topic, this study specifically targeted educated respondents from university level and above. Being a comparative study, the researcher ensured that the manner in which the questions were framed and the discussions were not leaning towards one state.

Figure 2.3. Profession/ activities



Source: field data 2022

2.2. East African Community Covid-19 Response Plan

In accordance with Article 118 on Health of the EAC founding treaty, the East African Community took collective effort to prevent and manage communicable diseases, as well as pandemics and epidemics of infectious and vector-borne diseases that could impair the health and welfare of EAC people. Partner States have pledged to promote better planning procedures and management of the health delivery system in order to increase the effectiveness of medical services delivered within the Partner States.⁵³

In order to protect citizens' freedom of establishment and residency within the community and to promote the free movement of people, products, and services, the East African Community developed policies. However, problems brought on by free movement included the accelerated spread of disease, the emergence of serious epidemics, and ultimately the overloading of national health systems. As of March 30, 2020, 200 nations had reported

⁵³ East African Community Secretariat, 2020. "East African Community Covid 19 Response Plan." East African Community: https://www.tralac.org/documents/resources/covid-19/regional/3466-eac-covid-19-response-plan-april-2020/file.html.

verified Covid-19 infections worldwide. Cases were documented in Algeria, Nigeria, Senegal, South Africa, Togo, Cameroon, Uganda, Kenya, Tanzania, and Rwanda.⁵⁴

In the East African Community (EAC), there were 172 confirmed cases of Covid-19 as of March, while there were 51 unconfirmed cases. With the aims of ensuring a shared and well-coordinated mechanism to combat COVID-19, facilitating the movement of goods and services in the region, reducing the number of people who contract COVID 19, reducing morbidity and mortality from the COVID 19 pandemic in the region, and all of the aforementioned goals, the regional response was managed by the EAC Regional Health Sector.⁵⁵

The EAC Secretariat has been working with partner nations and development partners to mobilize a broad coalition of stakeholders to increase regional readiness against Covid 19. The EAC Secretariat in Arusha, Tanzania, hosted a training session on COVID 19 laboratory diagnostics. The training was carried out using test kits created and given by the Bernard Notch Institute of Tropical Medicine. This was made possible thanks to German government financing.⁵⁶

The response of the EA region is primarily at the partner State level, with just a few regional measures requiring a coordinated regional approach. The name of the EAC Adhoc Regional Coordination Committee (EARCC) was changed to Regional Task Force on Covid 19. The committee is linked to partner countries' national task teams. Similarly, the task team collaborated closely with GIZ, Trademark, JICA, and USAID KEA.⁵⁷

⁵⁴ Ibid

⁵⁵"East African Community Covid 19 Response Plan," East African Community Secretariat, 2020. East African Community: Arusha. https://www.tralac.org/documents/resources/covid-19/regional/3466-eac-covid-19-response-plan-april-2020/file.html.

⁵⁶ East African Community Secretariat, "East African Community Covid 19 Response Plan,"

^{2020.}Arusha.https://www.tralac.org/documents/resources/covid-19/regional/3466-eac-covid-19-response-plan-april-2020/file.html.

⁵⁷ Ibid

The EARCC is made up of staff from the secretariat organs and institutions' departments of finance and administration, customs, trade, agriculture, environment, tourism, peace and security, human resources, and ICT, as well as health officers from the EAC Health department and members of the East Africa Health Research Commission. Each partner state has one delegate in charge of communication coordination. The group convened on a daily basis in 2020 & 2021 to assess the risk in the region, monitor progress on recommended public health initiatives, and give regional leadership to inform the response.⁵⁸

The following immediate actions were taken to enhance and expand Covid-19 containment and mitigation: The EAC Administrative Guidelines were made available to the general public by all EAC Partner States to ensure the smooth and continuing flow of goods and services. These rules promote the production of necessities domestically, the handling of cargo at internal borders and ports of entry, cashless transactions, and local awareness.⁵⁹

Other pandemic mitigation measures, such as those focusing on Micro, Small, and Medium-Sized Enterprises (MSME), were focused on significant economic and social sectors (MSME). Increased regional capability for Covid-19 surveillance, resource mobilization, and research were among them (MSME). In order to evaluate multi-agency cargo clearance processes and cooperation while halting the spread of COVID 19, bilateral discussions between Partner States were taking place. These discussions aimed to identify problems border agencies dealing with crew and cargo clearance encounter and to reach an understanding on operational initiatives. All EAC Partner States were also upholding the rules set by the World Health Organization (WHO) and World Customs Organization (WCO) that allowed the carriage of Covid-19 goods.

⁵⁸ "East African Community Covid 19 Response Plan," East African Community Secretariat, 2020. East African Community: Arusha.https://www.tralac.org/documents/resources/covid-19/regional/3466-eac-covid-19-response-plan-april-2020/file.html.

⁵⁹ Ibid

A number of critical short- to medium-term actions were implemented with assistance from the Trademark East Africa (TMEA) Safe Trade Emergency Facility to ensure that trade in Eastern Africa continues and is secure, preventing process losses and defending livelihoods. One of the programs' beneficiaries is the EAC. The EAC intended to use this facility to deliver short-term emergency assistance geared toward securing ports, borders, and essential supply chains for exchange, ensuring food safety and access to critically needed medications, and assisting with actions that save jobs and increase the region's resilience to any upcoming crisis.

A few businesses, and in some cases entire value chains, are about to close due to the broad supply chain disruptions affecting commercial activity. The EAC partner nations have begun to take steps to support the recovery of the local economy over the medium term. The Secretariat created a thorough COVID-19 Recovery Plan in order to focus efforts on medium-term interventions (two to three years) that strive to reduce the critical effects of the pandemic at the various key financial and social sectors of the EAC on a continuous and progressive basis.

The EAC Covid-19 Recovery Plan was developed to aid in the area's return to its pre-Covid-19 economic and exchange conditions, as well as to facilitate the recovery and off take of boom trajectory and to support a coordinated and coherent implementation of precedent activities on the path to sell financial healing and guarantee the area's future prosperity. Improvement of the funding environment, support for trade and transportation, support for key service sectors for trade expansion and investment, and promotion of manufacturing and agriculture were the main goals of the Covid-19 financial healing plan.⁶⁰

⁶⁰ Osoro, Geoffrey. 2020. "The Regional Response of the EAC to the COVID-19 Pandemic." Tralac blogs.https://www.tralac.org/blog/article/14615-eac-regional-response-to-the-covid-19-pandemic.html.

The Secretariats of the EAC, COMESA, and SADC jointly released a statement endorsing Member/Partner States with regard to the Covid-19 pandemic as Tripartite Task Force members (TTF). In order to minimise interruptions to people's lives, businesses, and transit trade, the statement urged Member States to continue taking early actions and working together in the battle against Covid-19.The TTF stated that it wanted to improve information exchange, best practice sharing among Member States, and the coordination of pandemic response initiatives.⁶¹

2.3. Implementation of East African Community Covid-19 Response Plan

The Covid-19 pandemic has enlarged the fractures in the previously existing integration structure. This research discovered that when handling the Covid-19pandemic, there was no coordinated countermeasures other than what was signed on paper. Each state was more concerned with protecting its own territory. Collective actions and responsibilities to support and reduce the impact of the pandemic, as outlined in the EAC response plan, appeared to be sidelined. ⁶²

States implemented dispersed actions to defend their individual territories and economies. The EAC meeting discussed implementing a few measures to control diseases that spread across borders and providing member countries with cellular laboratory and testing kits. The study shows that different Covid-19 member states used different countermeasures; whereas Burundi, Tanzania, and South Sudan used "relaxed" measures, Kenya, Uganda, and Rwanda went above and beyond in enforcing "heavy" lockdowns and curfews.⁶³

⁶¹ Ibid

⁶² Kalolo, A., 2020. Solidarity in turbulent times: reflections on the East African Community countermeasures against the COVID-19 pandemic. [online] IHP. Available at: https://www.internationalhealthpolicies.org/featured-article/solidarity-inturbulent-times-reflections-on-the-east-african-community-countermeasures-against-the-covid-19-pandemic/> [Accessed 8 September 2022].

⁶³ Brigid Gesami, The Efficiency of the Community Response to COVID-19 in East Africa (April 18, 2022). Available at SSRN: <u>https://ssrn.com/abstract=4086667</u> or <u>http://dx.doi.org/10.2139/ssrn.4086667</u>

President Uhuru Kenyatta issued several directives, including the suspension of travel for all persons entering Kenya from countries with Covid-19 cases, the closure of all educational institutions, the use of the cashless system to reduce physical handling of money, and the requirement for government employees to work from home whenever possible. Kenyatta directed that security alerts be upgraded and tightened in all border areas.

However, it was not until Kenyatta's sixth national speech that he claimed that 43 coronavirus cases had entered the country from neighboring Tanzania and Somalia. As a result, he prohibited the entry and exit of persons and passengers through the Kenya-Tanzania and Kenya-Somalia borders, except for freight vehicles. He also ordered that all freight vehicle drivers take the Covid-19 test, and that only those who fail would be permitted to enter Kenya.⁶⁴

The Tanzanian government imposed a number of restrictions after the first coronavirus case was confirmed on March 16, 2020, including the closure of all educational facilities, the ban on all public gatherings, and the suspension of all sporting events. On March 22, the late President Magufuli highlighted the necessity of enhancing border post surveillance capacity. Instead of imposing a curfew, the President urged Tanzanians to continue working hard while adhering to Ministry of Health and WHO rules.

He also encouraged church services to continue, while urging religious leaders to pray for God's protection. This action ran counter to Kenya, Uganda, and Rwanda's decision to implement internal lockdowns.⁶⁵ In the late President's speech on April 22, President Magufuli questioned the use of fumigation as a technique of killing coronavirus. He argued

⁶⁴ Nasubo, Fred Ernest, Dorothy Nyakwaka and Moeketsi Kali. 2022. The Community's Response to Coronavirus in East Africa

Old Habits Die Hard.". Journal of Arts and Social Sciences in East Africa 5 (2), 17-29.

https://doi.org/10.37284/eajass.5.2.620

⁶⁵ Nasubo, Fred Ernest, Dorothy Nyakwaka and Moeketsi Kali. 2022. The Community's Response to Coronavirus in East Africa

Old Habits Die Hard.". East African Journal of Arts and Social Sciences 5 (2), 17-29. https://doi.org/10.37284/eajass.5.2.620

that, despite continual fumigation, mortality was so high in the developed countries. Magufuli declared Tanzania Covid free in June 2020. He addressed believers at Dodoma, emphasizing not just Tanzanians' faith in God, but also His role in eradicating the coronavirus from Tanzania.⁶⁶

On March 21, 2020, Uganda's minister of health, Dr. Jane Ruth Aceng, acknowledged Covid-19's presence in the country. This came after President Museveni's state of the nation speech on March 18, 2020. In his speech, the president made 13 suggestions for halting the epidemic's spread. He ordered the closure of all educational institutions, the ban on all religious gatherings, the suspension of all public gatherings, the cancellation of all nuptials, and the closing of borders for citizens of hard-hit nations like China, Italy, the UK, and the United Kingdom (UK). Other EAC members had confirmed the epidemic, but Museveni's statement made no mention of regional coordination or efforts to combat the virus.⁶⁷

Following the discovery of the first occurrence of Covid-19 on March 14, 2020, Rwanda was the first country in the EAC to enforce lockdown. All religious institutions in Rwanda were closed, and public gatherings were outlawed by the ministry of health. Furthermore, the government blocked the borders except for cargo, citizens, and legal residents returning to the nation. Rwanda's quick action followed the worldwide trend and other countries' experiences, and was not impacted in any way by East Africa's regional choice.

Burundi, which borders Rwanda to the south, declared the first Covid-19 cases on March 31, 2020. This came amid international pressure that the country was withholding Covid-19 information. While addressing the virus on March 25, 2020, a government official stated that Burundi is an exception because it is a God-centered country. He asked people to continue living normally while according to health ministry instructions. Burundi banned all flights in

⁶⁶ Ibid

⁶⁷ ibid

and out of the country following confirmation of the pandemic. It also closed its borders, preventing all goods vehicles from passing through Rwanda. The decision, which was later reversed, resulted in the accumulation of trucks on the Rwandan side at various crossing points with Rwanda.⁶⁸

South Sudan, on the other hand, began implementing Covid-19 prevention steps before any cases of the pandemic were reported. South Sudan closed all educational institutions, imposed a 30-day statewide curfew, canceled all international flights, and closed all borders with its neighbors by March 30. Cargo planes, food trucks, gasoline tankers, and emergency and relief flights were exempted. However, the first incidence of the pandemic was confirmed on April 5, 2020, with President Salva Kirr asking nationals to follow the laid-out protocols. Similarly, South Sudan's unilateral choice to restrict pandemic admission and spread mirrored global and regional trends and was unaffected by the EAC's position.⁶⁹

In the absence of collaboration in combating the pandemic caused increasing cross-border transmissions that affected all member states, infections of Rwandan and Ugandan truck drivers acquired from adjacent countries were reported. The study found that political environments also contributed to issues with cooperation and coordination within the EAC. For instance, despite regional advice to the contrary, Burundi and Tanzania held elections at the same time. Every member of the EAC is a part of the Southern African Development Community (SADC), the Common Market for Eastern and Southern Africa (COMESA), or the Economic Community of Central African States (ECCAS), with the exception of South Sudan (SADC). This dual membership interfered with the EAC's reaction strategies.

⁶⁸ Nasubo, Fred Ernest, Dorothy Nyakwaka and Moeketsi Kali. 2022. The Community's Response to Coronavirus in East Africa

^{&#}x27;Old habits die hard.' The arts and social sciences journal for East Africa 5 (2), 17-29. https://doi.org/10.37284/eajass.5.2.620 ⁶⁹ Ibid

2.4. The effects of National response mechanisms in mitigating the spread of COVID 19 in the East African Community

The EAC Secretariat trained mobile laboratory experts in February 2020 as the first step toward a coordinated pandemic response. The program aimed to train health professionals from member countries to detect and diagnose Covid-19. Mr Michael Katende, head of the EAC secretariat's health department, stated that the program would benefit the region by providing heightened preparedness and surveillance. The secretariat also asked EAC to follow Covid-19 precautions, even though by February no cases of the disease had been documented in any member country. Washing hands often, covering one's mouth and nose when coughing, and maintaining a one-meter social space were among the instructions.

A number of border controls were implemented after Covid-19 in an effort to halt the spread of the illness. Containment measures and restrictions have been implemented in the East and Horn of Africa Region in order to lessen cross-border transmission while maintaining the movement of essential goods and services. The first cases of Covid-19 identification among truck drivers sparked and strengthened cross-border cooperation in the detection and response to the pandemic. Truck drivers in the area were incredibly susceptible to infection. As of January 13th, 2021, there were 3,457 cumulative cases that had been officially documented among truck drivers in the EHoA region.⁷⁰

A standoff occurred between the Kenyan and Tanzanian borders, where truck drivers were obliged to take the necessary exam at leave and entry points. The increased tension caused by their attitude prompted bilateral discussions when Uhuru Kenyatta called President Magufuli. Despite agreeing to terminate the border dispute, the two countries blamed each other for breaching the Memorandum of Understanding. There were also tensions between Rwanda

⁷⁰ Geoffrey Osoro, "EAC Regional Response To The COVID-19 Pandemic," 2020. Blog. Tralac

Blog.https://www.tralac.org/blog/article/14615-eac-regional-response-to-the-covid-19-pandemic.html.

and Tanzania, with the former mandating tests at its borders and advising dependence on the system, which the latter rejected.⁷¹

The majority of EAC member nations did not implement these procedures until Covid-19 instances were disclosed. Those who implemented health guidelines prior to reporting Covid-19 occurrences did not ensure strict adherence by their citizens. Even after partner governments confirmed Covid-19 incidents, member countries issued guidelines without consulting the secretariat. There were no coordinated measures at the EAC border stations to guarantee strict adherence to the health criteria. Rather, each country adopted Covid-19 measures along its borders.⁷²

In his seventh address on Covid-19, President Kenyatta outlined an eight-point economic stimulus plan to revitalize the economy. However, it was unclear whether the President was reacting to the EAC's secretariat's call for a national recovery plan or if it was a response to save the virus-ravaged economy. The reaction only echoed the secretariat's plea for a national economic stimulus package, rather than a regional recovery approach. Other countries include Uganda, which developed the Covid-19 economic crisis and recovery development strategy plan, and Rwanda, which developed the Covid-19 cultural industry and artist recovery program. Tanzania, on the other hand, is seen to have taken an unusual strategy rather than innovative recovery methods. Because its economy did not completely shut down, Containment tactics were deemed to be more appropriate than recovery measures.

Although the Extraordinary Heads of State Summit's Communiqué stated that "Partner States adopt a unified framework for certification and distribution of Covid-19 test findings,7" Kenya and Tanzania have continued to disagree about the necessity of border testing.

⁷¹ Nasubo, Fred Ernest, Dorothy Nyakwaka and Moeketsi Kali. 2022. "East African Community's Response to Coronavirus: Old Habits Die Hard.". East African Journal of Arts and Social Sciences 5 (2), 17-29. https://doi.org/10.37284/eajass.5.2.620
⁷² Ibid

Unknown is whether the EAC had established a set process for exchanging COVID-19 results. The COVID-19 results of Tanzanian truck drivers were allegedly tampered with by Kenya, according to the Tanzanian government, as a result of the EAC's lack of coordination in handling the situation. It was asserted that drivers from Tanzania who underwent testing by Kenyan officials received favorable outcomes but underwent testing in Tanzania and received unfavorable outcomes. If the EAC had conducted its operations with political tenacity and cohesion, these accusations and complaints might have been avoided.⁷³

2.5. Coherence of the East African Community

According to the Daily Nation Editorial, the difficulty in containing Covid-19 pushed nations to restrict border crossing, affecting trade between Kenya and Tanzania, particularly following President Kenyatta's decree to close Kenya's borders with Tanzania and Somalia. Despite the fact that it exempted cargo transporters from paralyzing regional trade, He imposed the condition that all truck drivers be inspected and authorized to be coronavirusloose in order to proceed. Rwanda, Uganda, and South Sudan all followed suit, leaving Tanzania as the sole protestor.

Tanzania replied by ordering that Kenyan truck drivers be barred from entering its country, preventing regional trade. In addition to the region's lack of synergy, Tanzanian President Magufuli did not participate in a video-call meeting for the region's Heads of State, which was intended to discuss a shared approach to the pandemic. This obviously demonstrated the member state's lack of collaboration. Burundi, on the other hand, went forward with plans to hold national elections.⁷⁴

⁷³ Wekesa, Sylvanus. Alcovid 19 Research How The East African Community's Complicated Reaction Has Revealed The Slow Integration Process, COVID-19, Opinion Pieces, 5, no. 1 (August 2020): 1–6.

⁷⁴ The Modern Humanist (2020). The Cheat Sheet: A vote in Burundi, a battle over vaccine prices, and COVID-19 innovation in Africa. https://www.thenewhumanitarian.org/news/2020/05/15/Burundi-election-vaccine-pricewar-coronavirus-innovation-Africa-cheat-sheet. Accessed on May 21, 2022.

Former Tanzanian President John Magufuli stated in 2020 that the economy is more important than the harm posed by the Corona virus, adding that despite multiple warnings, he intended to reopen the country to tourism. A second wave of the virus was thought to be on the way. Considering the extensive EAC response strategy, Tanzania's involvement to the fight against COVID 19 as an EAC member indicates its uncooperative attitude.⁷⁵ Tanzania, led by President Magufuli, did not attend the EAC Consultative conference. The state was chastised for not sharing appropriate information on the scope of the pandemic's effects. This polar opposite nature has been observed in past cases where the Tanzanian government has chosen a different solution to a problem.

While the need to stop the virus's spread may have been the driving force behind the lack of regional cooperation, it was also impacted by simmering conflicts among EAC member nations. The main targets of hostilities before COVID-19 were Kenya, Burundi, Rwanda, Uganda, and Tanzania. It's no surprise that the region's responses to the pandemic exposed the simmering conflict within the community.⁷⁶ Despite the EAC secretariat giving administrative recommendations to member states on the movement of people and commodities, the call for regional collaboration did not materialize. Furthermore, deploying disparate procedures impeded the EAC's One-Stop Border Points (OSBPs). The OSBPs merge two bordering country stops into one, therefore expediting people mobility and increasing community business.⁷⁷

The absence of late President Magufuli and late President Nkurunziza of Burundi from the EAC Covid-19 consultative video conference raised concerns about the region's cohesion. The May 12 2020 meeting aimed to analyze and develop the coronavirus's regional approach.

⁷⁵ Brigid Gesami, The Efficiency of the Community Response to COVID-19 in East Africa (April 18, 2022). Available at SSRN: <u>https://ssrn.com/abstract=4086667</u> or <u>http://dx.doi.org/10.2139/ssrn.4086667</u>

 ⁷⁶ Dorothy Nyakwaka, Moeketsi Kali, and Fred Ernest Nasubo. "East African Community's Response to Coronavirus:
 'Old habits die hard.' The arts and social sciences journal for East Africa 5(2), 17-29. https://doi.org/10.37284/eajass.5.2.620.
 ⁷⁷ ibid

Only Kenyan President Kenyatta, Ugandan President Museveni, Rwandan President Kagame, and South Sudanese President Salva Kiir were present. The leaders directed their agencies in charge of health, transportation, and EAC affairs to begin border screening and testing, particularly for truck drivers, without interfering with cross-border trade.⁷⁸

The diplomatic spat between Kenya and Tanzania is not a new phenomenon. On the one hand, their effort to protect national interests while dominating the regional market stretches back to the 1970s. Some recurrences have been observed, such as when Tanzania prohibited Kenyan-registered tourist trucks from entering its National Parks in 2015. In a tit-for-tat move, Kenya prohibited Tanzanian tourist vehicles from picking up or dropping off passengers at its airports.⁷⁹

This study demonstrates that while the desire to limit the virus may have been a driving force behind the lack of coordinated action by member states, structural inequality among EAC member countries was the primary cause. For example, Burundi pushed back the Summit of the Heads of State in the lead-up to COVID-19 while calling for the ouster of the Speaker of the EAC Assembly. The Gatuma border was shut down as a result of Uganda's conflict with Rwanda. The conflict between Rwanda and Burundi resulted in border closures. Tanzania also barred several Ugandan commodities from entering the country. Kenya was hesitant to accept Ugandan manufactured goods. As a result, the subsequent responses in handling the epidemic were not unexpected; rather, they provided the groundwork.⁸⁰

2.6. Summary of the chapter key findings

An evaluation of the COVID 19 response and containment strategies in the East African community was offered in this chapter. From the research, the study captured ways in which

⁷⁸ Nasubo,Fred Ernest,Dorothy Nyakwaka andMoeketsi Kali.2022.A Community's Response to Coronavirus

^{&#}x27;Old habits die hard.' The arts and social sciences journal for East Africa 5(2), 17-29. https://doi.org/10.37284/eajass.5.2.620. ⁷⁹ Ibid

⁸⁰ ibid

national responses affected the effectiveness of the EAC response plans. From the study, the EAC had put in place measures and directive which would have been effective to combating the spread of the virus within the region. What lacked was collective action among members and mighty push to coordinate regional responses. The study also established that underlying differences between governments in the region affected the direction states took and reincarnated historical disagreements and coalition of the willing.

The study found that there was a synergy with the literature and the findings from the survey. The pandemic unraveled the weak integration within the EAC and how nations prioritized national interests over regional ones, exposing deepening community fissures. Simmering differences among EAC member countries influenced the direction states took. The EAC's lack of coordination led to allegations and complaints, which could have been avoided if the EAC had demonstrated political goodwill and solidarity by enacting regulations like the creation of a coordinated testing facility that was acceptable to both countries.

CHAPTER THREE

THE NATIONAL RESPONSE MECHANISMS BY THE TANZANIAN GOVERNMENT IN THE CONTROL AND MITIGATION OF THE SPREAD OF COVID 19 PANDEMIC.

3.0. Introduction

This chapter analyzed the Tanzanian government's national response mechanisms for containing and reducing the COVID 19 pandemic's spread using the primary and secondary data that had been gathered. The Tanzanian government's strategy was examined in this chapter along with the implications for Tanzanian citizens and the East African community. It also looks at the underlying problems that led to this approach.

3.1. The implications of Tanzania's response to mitigate the spread of Covid 19.

The number of people testing positive for COVID-19 has sharply decreased, according to Tanzanian officials, and a significant number of recoveries have been recorded.

Many Tanzanians, and for good reason, were dubious of the government's statements and intentions given the carelessness with which the government had handled the pandemic since its discovery and its desire for complete secrecy in dealing with this new virus.⁸¹

Tanzania's government made a number of unexpected decisions in response to the Covid-19 issue. Tanzania's approach stood out among African governments that were testing and enforcing lockdowns. The country was thought to be witnessing a surge in cases, but did not submit Covid-19 statistics until April 29, 2020. The EAC Emergency Strategy plan aimed to lessen the burden on the healthcare infrastructure. The research discovered that there was a

⁸¹ Said, Khalifa, James Wakibia, Carlos Mureithi and Kira Zalan, and Reginald M.J. Oduor. A Problem of Denial: Why Tanzania Might Fail in the Battle Against COVID-19 The Elephant, May 29, 2020.

https://www.theelephant.info/features/2020/05/29/a-problem-of-denial-why-tanzania-could-lose-the-war-against-covid-19/.

very high risk of contracting Covid in Dar es Salaam despite the scant public information available.

There were 21 fatalities, 509 confirmed Covid-19 cases, and 652 tests performed in Tanzania. Comparatively, as of May 26, 2020, Kenya and Uganda, two neighboring nations, had held 59,620 and 82,271 exams, respectively. However, it was believed that Tanzania's actual caseload was much higher because there was no formal lockdown, businesses were open, and people continued to attend religious events. According to a discussion with a Tanzanian health worker who was knowledgeable about hospital caseloads, the actual number was more than one million. The commercial capital of Tanzania, Dar es Salaam, was warned to be on the lookout for Covid-19 because "everything evidence pointed to exponential expansion" of the virus there and throughout the country, according to the United States Embassy in Tanzania.

The East African Community (EAC) and other international partners were closely involved in Tanzania's efforts, according to the US Embassy, which included increasing the number of tests it provided, tracking cases, producing and distributing data and analytical models, educating the public about evidence-based safety measures, sharing information, and increasing public awareness. The opposite didn't occur, and it didn't seem like it would any time soon. Due to its unregulated status and lack of transparency, Tanzania's neighbors lost faith in it. When Tanzania chose to open its borders, President Magufuli announced that universities would open on June 1st, 2020, noting that the state was heading towards normalization after COVID 19 cases declined.⁸²

⁸² African News, (2020). Tanzania coronavirus: June 1 School reopening guidelines issued.

https://www.africanews.com/2020/05/29/faulty-tests-of-truck-drivers-tanzania-accuseskenya-of-sabotage/. Accessed on September 15, 2022.

3.2. How did Tanzania's Government manage Covid-19?

In response to Covid-19, the Chama Cha Mapinduzi (CCM) party of President John Magufuli established stringent media censorship, ridiculed science, and fostered conspiracies. Videos of nighttime burials swiftly went popular online in late April 2020 after the administration declined to provide an explanation for the early deaths of three members of parliament (MPs) over the space of 11 days. Tanzania's capacity to fight the disease was hampered by these events.

At the start of May 2020, after testing non-human samples such papaya and goat, President Magufuli claimed that the nation's confirmed caseload was inflated because of "compromised" test kits that resulted in false positives and which he blamed to possible foreign "sabotage." His most perplexing reaction to the virus was this. Magufuli sought information about both the test kits and the lab staff as a result of the "positive" test results. The National Health Laboratory's director was then placed on administrative leave because it is the only place in the country that tests samples for Covid-19. Magufuli asserted that there were issues with the test kits, but the chief of the African Centers for Disease Control and Prevention denied this (CDC).

Magufuli, a Ph.D. in chemistry, ignored the evidence in favor of religious piety and allnatural remedies for the infection. He advised residents to go to mosques and churches, insisting that Covid-19 was "satanic" and that it couldn't "exist in the body of Christ, it will burn instantaneously." Beginning on April 16, 2020, he proclaimed three days of nationwide prayer and fasting in protest of COVID-19. Magufuli also used government funds to purchase medicinal plants from Madagascar and promoted steam inhalation as a "scientific therapy," claiming that a lemon-ginger tincture had successfully treated the virus in his own child. The response of the ruling party to COVID-19 was terrible, but it was expected. Since Magufuli's election as president in 2015, the CCM party in power has shown signs of imperialist paranoia and significantly reduced its openness and transparency. The government "in recent years worked to limit access to public information," says Freedom House's 2020 report on Tanzania. This includes enacting a number of laws that limit the sharing of information, like the Access to Information Act, which jails government employees who improperly reveal state data. Furthermore, authorities' administrative and extralegal actions continue to seriously impede independent data collection.

Another notable case of the exploitation of health-related data was brought to mind by the ruling party's cover-up of Covid-19. In September 2019, the Magufuli administration came under fire from the World Health Organization (WHO) for refusing to release information despite repeated requests by concealing the clinical results on two suspected Ebola-related fatalities in Dar es Salaam. The clinical reports were not communicated since they were not needed by law when the tests were negative, Tanzania's health minister Ummi Mwalimu later acknowledged. The 2019 Ebola obstructionism in Tanzania simply served as a prelude to the continuing COVID-19 outbreak. As an EAC member, Tanzania is not obligated to cede its sovereignty.⁸³

3.3. How did the political opposition and civil society respond?

In Tanzania, the civil society and political opposition, which included NGOs, performers, and famous people, pushed for more open government, dispelled conspiracies, and educated the populace about pertinent policies. Zitto Kabwe, the leader of the Alliance for Change and Transparency (ACT) party, pushed for the government to give daily briefings that included time for media questions and extensive statistics broken down by region. Zitto criticized

⁸³ Brigid Gesami, The Efficiency of the Community Response to COVID-19 in East Africa (April 18, 2022). offered at SSRN: <u>https://ssrn.com/abstract=4086667</u> or <u>http://dx.doi.org/10.2139/ssrn.4086667</u>

government inaction, distributed songs with public health messages, and forbade the blending of faith and science in governmental decision-making.

In response to the untimely deaths of three MPs in just 11 days, Freeman Mbowe, the leader of the Chadema opposition party, urged his colleagues to enter self-quarantine for two weeks in early May 2020. Mbowe demanded that "emergency measures" be taken by the government to halt the disease's spread and save Tanzanian lives. Head of Chadema's external affairs division Deogratias Munishi criticized Magufuli's stance on religion and begged the president to outlaw religious gatherings, impose a lockdown in high-risk areas, and provide funding for the health industry.

Non-governmental organizations (NGOs) also expressed interest. In a joint statement, the Open Government Partnership (OGP) and Twaweza, a civil society organization that is a part of the steering committee, warned that governments were weakening "parliamentary oversight and other vital checks and balances, removing key watchdog officials, and instituting aggressive censorship and pressure on journalists" without specifically mentioning Tanzania by name.⁸⁴

It was suggested that nations broaden their availability of trustworthy information about Covid-19 and disseminate that information along with contextual data, analytical models, and research findings. OGP and Twaweza warned in their cautionary statement, "We can either handle this pandemic in a way that protects or even revives trust, democracy, open and inclusive governance, or we may disregard them and expect a greater degradation of open governance, one that would be very difficult to restore. In an open letter to her president that was published in South Africa's Mail & Guardian newspaper, Mwanahamisi Singano,

⁸⁴ Kalolo, A. (2020). Solidarity in turbulent times: reflections on the East African Community countermeasures against the COVID-19 pandemic. https://www.internationalhealthpolicies.org/featured-article/solidarity-in-turbulent-timesreflections-on-the-east-african-community-countermeasures-against-the-covid-19- pandemic/ Accessed on May 21, 2022.

manager of programs at the women's development organization FEMNET, pleaded with Magufuli to "give us the truth, even if it's painful to swallow."

Tanzanian celebrities, influencers, and musicians also contributed to the effort by revealing the scope of the outbreak, dispelling myths, promoting safety precautions, and giving locals financial support. In the midst of the outbreak, Musicians Kala Jeremiah and Malaika shared a song outlining anti-virus precautions, and Diamond Platnumz pledged to pay 500 people's rent for three months.

Originating in Los Angeles Tanzanian socialite turned activist Mange Kimambi urged the Magufuli administration to take tougher action and shared shaky recordings of nighttime burials that her supporters in Tanzania had given her. Gado, a well-known Tanzanian cartoonist, also addressed the virus's myths and conspiracies, which were widely circulated in local and international sources. The "Tanzanian Joker," a performance artist also known as Alex Kalemera, used his lungs to paint his body, performed skits, and squeezed hand sanitizer into onlookers' hands in the streets of Dar es Salaam to raise awareness of Covid-19.⁸⁵

3.4. What were the potential implications of Magufuli's mismanagement?

Politics, the economy, and health in Tanzania and the surrounding region all suffered as a result of the ruling party's inadequate response to Covid-19. According to the study, an increase in unplanned deaths is due to the high rate of virus transmission and the ruling party's opposition to implementing a containment strategy. The elderly and people with immune-suppressing illnesses like HIV, diabetes, tuberculosis, and others were particularly at

⁸⁵ Kalinina, A. (2020). What the world can learn from regional responses to COVID-19.

https://www.weforum.org/agenda/2020/05/covid-19-what-the-world-can-learn-from regional-responses/. Accessed on May 21, 2022.

risk. Travelers, such as truck drivers, were particularly prone to contracting and spreading the virus throughout Tanzania's 29 administrative regions.

Following an increase in cases in border towns, Zambia and Kenya blocked their borders with Tanzania due to Tanzania's undoubtedly large and unreported caseload. According to Kenyan opposition politician Raila Odinga on BBC Swahili, Magufuli's response to COVID-19 is "ill-advised," and the "destinies" of EAC states are "connected together."

Due to lower export prices and sluggish daily business activity, Tanzania's economy suffered. The length and severity of the epidemic were directly influenced by Magufuli's policies; the longer the virus persisted, the longer it took for the economy to recover. Over 700,000 people were employed in the travel and tourism sector, which was eliminated, and 17% of Tanzania's GDP was derived from it. Tanzania's tourism sector suffered as a result of its reputation as a Covid-19 hotspot.

Additional financial shockwaves occurred when EAC nations started to reopen their economies but excluded Tanzania due to the nation's ongoing health issues. If the death toll rose quickly, Magufuli's response to the virus from a political standpoint might widen a rift within CCM.

One group, which supports Magufuli and holds significant party positions, and another, which is wary of Magufuli and has deeper organizational roots, was at odds.

The CCM officials who had previously questioned Magufuli's course of action as well as those who supported him but were concerned about the virus's destruction began to turn against the president and work against his re-election when more senior politicians died from unexplained illnesses. Magufuli had the option of holding or delaying Tanzania's presidential and legislative elections in October 2020, depending on his decision.⁸⁶

3.5. What are the opportunities for regional and international responses?

Despite studies showing that regional governments and health organizations could influence Magufuli's policy response if they used the appropriate tone, 50% of survey participants believed that the Tanzanian government was unlikely to respond to attempts to influence internal politics surrounding Covid-19.The EAC states and African health organizations stayed in touch with the president and the ruling party in order to accomplish this goal and whenever practical, provided information.⁸⁷

All of the regional leaders asserted that they made attempts to contact Magufuli but were unsuccessful. His EAC counterparts stayed in touch with him, reaching out to him in a spirit of camaraderie, sharing perspectives from their own nations, and inviting him to take part in Covid-19 virtual EAC meetings. Tanzanian events did not stay there forever. All of East Africa was affected, as was the continent and the global community, in terms of politics, economics, and health.

In a scientific appeal to the Magufuli administration, the WHO and the Africa CDC pleaded with him to draw lessons from the virus's devastation in Europe and the US, emphasized the errors made by Western leaders in formulating policy, and forewarned of similar problems if strict precautions were not implemented. In an effort to improve information sharing and help the Tanzanian Ministry of Health and other governmental organizations connect their plans with regional and continental goals, the WHO and the Africa CDC offered embeds to Tanzania.

⁸⁶ Kalinina, A. (2020). What the world can learn from regional responses to COVID-19.

https://www.weforum.org/agenda/2020/05/covid-19-what-the-world-can-learn-from regional-responses/. Accessed on May 21, 2020.

⁸⁷ Martin A. Aluga, "Coonavirus Disease 2019 (COVID-19) in Kenya: Preparedness, Response, and Transmissibility." journal of microbiology, infection, and immunology 53, no. 5 (2020): 671-673

Celebrities, civil society, and the political opposition in Tanzania were all affected by the pandemic politics. These Tanzanians' constitutionally guaranteed freedom of expression was safeguarded by regional and international parties. There is merit in more restrained strategies like reposting their social media campaigns, elevating their voices in the media, and providing financial support for their initiatives in order to maintain crucial public discourse and defend Tanzania's standing as a vibrant, open, and pluralistic country.

3.6. Summary of the chapter key findings

This chapter looks at the Tanzanian government's response to the COVID 19 pandemic. Tanzania's strategy stood out among East African partner states because the administration decided to disregard measures that were internationally advised to protect its citizens. This chapter examines the underlying issues that led to the approach taken by the Tanzanian government and how these actions affected the Tanzanian citizens and the East African community.

Tanzania's unregulated status and lack of openness caused its neighbors to lose trust. President John Magufuli responded to Covid-19 with conspiracy theories, strict media regulation, and antagonism against science. Tanzania's position in coping with the epidemic deteriorated further as a result of these developments. The political opposition and civil society in Tanzania, which included NGOs, artists, and celebrities, pushed for greater government transparency, dispelled conspiracies, and informed the populace about pertinent policies.

The chapter's conclusion states that what happened in Tanzania did not stay there. Tanzania's inadequate response to COVID-19 had severe health, economic, and political repercussions for the EAC region. The longer the virus persisted, the longer it took for the economy to

recover. Due to an increase in cases in border towns brought on by Tanzania's undoubtedly large and unreported caseload, Zambia and Kenya blocked their borders.

CHAPTER FOUR

THE NATIONAL RESPONSE MECHANISMS BY THE KENYAN GOVERNMENT IN THE CONTROL AND MITIGATION OF THE SPREAD OF COVID 19 **PANDEMIC.**

4.0. Introduction

The Kenyan government created a national response strategy to slow and halt the COVID 19 pandemic, and this chapter looked at that strategy. The effects of these actions on Kenyans and the East African community are examined in this chapter.

4.1. The implications of Kenya's response to mitigate the spread of Covid 19.

On March 12, 2020, Kenya discovered its first case Covid-19. The Kenyan government has been steadfast in issuing a directive and enforcing a number of public health measures, such as curfews, travel restrictions, and the closure of workplaces, houses of worship, and schools, since the first case was reported.⁸⁸. Along with an increase in the capacity and supplies of the health services, mass testing to determine how the virus was disseminating in the general population was also necessary in order to stop the virus' spread.

Research indicates that by August 16th in 2020, a total of 391,000 tests had been conducted, implying that the total positivity rate had increased to 7.7% considering that the World Health Organization (WHO) guidance requires that a nation should record a figure below 5% for at least 14 days before opening places of public. According to the Kenyan Health Cabinet Secretary (CS), the nation was equipped and prepared to begin mass testing after benefiting from medical aid supplies from China in mid-April⁸⁹. With frequent foreign aid from other nations to combat COVID-19, Kenya is believed to have been in a better position to mitigate

^{88 &}quot;East African Community Covid 19 Response Plan," East African Community Secretariat, 2020. East African Community, Arusha. https://www.tralac.org/documents/resources/covid-19/regional/3466-eac-covid-19-response-plan-april-2020/file.html ⁸⁹ Sib, Bhekimpilo, and a. 2020. "Africa: Tracing the History of Pandemics." AllAfrica.com. June 15, 2020

the risk associated with the virus as the government showed positive response to collaborate with other nations and its neighbors in combating the virus that risked to spread if no measures were not taken seriously among nations of the world.

A good job was done managing the COVID 19 pandemic, according to 58% of respondents from Kenya. The government mismanaged finances and the lack of adequate equipment in various referral hospitals didn't give the common mwananchi a chance, according to the 42% of people who believed the government would have done better. Based on the Global Health Security Index, Kenya's general preparedness score stood at 47.1, a figure that was above the universal average of 40.2 across 195 assessed nations, placing the country in the "moderate" preparedness category.

Based on the six categories, Kenya faired averagely in rapid response, risk environment, and health system preparedness. The nation also performed best on detection, reporting, and compliance with the international standards.

4.2. How the Kenyan government through the Ministry of Health managed COVID-19

The Kenyan government, under the direction of the president and the Ministry of Health, developed policies intended to stop the spread of infectious diseases after COVID 19 was declared a global health pandemic. On March 25, 2020, the then-president of the Republic of Kenya, Uhuru Kenyatta, gave a speech outlining a number of measures intended to protect the populace from the negative effects that the Covid-19 could have on the country if the populace failed to adhere to the requirement as a whole.⁹⁰. The announcement by the president presented the Cabinet Secretary (CS) with a task that would see the nation strive

Martin A. Aluga, "Coronavirus Disease 2019 (COVID-19) in Kenya: Preparedness, Response, and Transmissibility." Infection, Immunology, and Microbiology Journal 53, no. 5 (2020): 671-673

through thick and thin to ensure that the infected were detected, the uninfected protected, and the public involved in a fight that threatened humanity across the globe.

The Kenyan government played its role in ensuring that there was minimal spread of the virus by first ensuring that its borders were closed to prevent entry or exit of infected persons from the country. Like other nations, the country ensured that flights from countries with high cases of Covid-19 were banned, a directive by the president to the Airline and other transport lines in and out of the country. In order to restrict movement and contact between people in urban areas with high COVID-19transmission rates as well as between urban cities with high COVID-19incidences and other areas with lower incidence rates, the government also implemented a dawn to dusk curfew nationwide.⁹¹.

The Ministry of Health understood that the older demographic, which was highly vulnerable, lived in rural areas. Because of the economic distress being experienced in urban settings, this effort helped to prevent mass migrations to rural areas, which could have infected the elderly and more vulnerable minorities later on. The Uhuru Kenyatta administration also ordered educational institutions and daycare centers to stay closed in order to stop the virus's spread through the Office of the Cabinet Secretary for Health.

Employers who do not offer essential services were also advised to support physical distance measures and allow remote work when workers were absolutely required to access their workstations. In order to limit face-to-face interaction, the president also outlawed all large gatherings, political events, religious gatherings, trade shows, festivals, sporting events, and

⁹¹ Ibid

cultural events. The reasoning behind this was that it was difficult for a large crowd to maintain physical distance, such as at the entrance or exit spaces of transportation terminals.⁹²

As long-term implementation of the countermeasures was necessary for their success, the government was aware of the difficulties that came with the restrictions. Social interaction with families, friends, and coworkers over digital media, such as the internet or phone, was encouraged in order to maintain physical distance. In order to provide emergency internet across the nation, Uhuru Kenyatta's administration in collaboration with Google launched a network of enormous internet-capable balloons.⁹³. Additionally, e-learning, e-commerce, and home-based work were all supported by this internet connection. The Ministry of Health also demanded that facilities for proper hand washing be installed in every public space as a requirement for global healthcare in light of the impending COVID-19 pandemic.

4.2 How did the political opposition and civil society respond?

All throughout the COVID-19pandemic period in Kenya, the political and socioeconomic context was important. A repeat election was held two years ago, and Uhuru Kenyatta of the Jubilee Alliance, the leader of the opposition and the incumbent president, was declared the victor despite Raila Odinga of the National Super Alliance (NASA), who boycotted the vote, being declared the loser. But the Building Bridges Initiative (BBI), a cease-fire negotiated by Uhuru Kenyatta and Raila Odinga, helped reduce the tense situation. The initiative did, however, precipitate a falling out between the president and his deputy, which gave rise to a power struggle within the ruling party. The wrangles between the president and his deputy also derived from the mismanagement of funds and other resources said to be helpful in managing and mitigating the COVID-19 risks.

⁹² Collins, T., 2020. Will Magufuli's Covid-19 gamble pay off for Tanzania? - African Business. [online] African Business. Available at: https://african.business/2020/10/trade-investment/will-magufulis-covid-19-gamble-pay-off/> [Accessed 18 October 2022].

⁹³ Ouma, Polet Njeri, Abednego Nzyuko Masai, and Israel Nyaburi Nyadera. "Health coverage and what Kenya can learn from the COVID-19 pandemic." *Journal of Global Health* 10, no. 2 (2020).

The research gathered that as the effects of COVID-19increases, the different opposition leaders questioned the government's role in improving the economy. Trends in Gross Domestic Product (GDP) illustrates that the economy registered an upward growth of 5.7% in 2015 and 6.4% in 2018 but at the onset of the COVID-19pandemic, the rising trajectory has since been revised to 1.7% as at 2019 during the rise of COVID-19.

The opposition and leaders allied to Deputy President have been vocal on the slowed economic growth where the government has depended on debt to meet its objectives. For instance, the Deputy President's camp has questioned the President during the COVID-19times for spending a considerable amount of money on Building Bridges Initiative (BBI) which as struck down by the Supreme Court being declared as unconstitutional initiative fronted by the president. Also. Corruption in the public sector is highly criticized with heavy borrowing which have exacerbated the budget discrepancy.

The civil society, which can be thought of as the "third sector" in addition to the government and business sector, has vigorously reacted to the way the government has handled the COVID-19 mitigation. Concerns about how the cash transfer program, intended to assist lowincome people deal with the economic impact of COVID-19, failed to assist those recipients due to irregularities and corruption have been raised in the public by civil society groups. According to research by Kenyan Human Rights, officers entrusted with the task of allocating funds frequently disregarded the eligibility requirements for beneficiaries and, in some cases, directed aid and funds to their friends' or relatives' businesses or relatives' businesses.

Concern over a scandal in which medical supplies donated to Kenya were improperly turned into commercial goods through the use of tendering practices was also loudly expressed by human rights organizations and other organizations. The fact that a cash transfer program designed to help low-income people deal with COVID-19 did not actually help the intended target demoralized Kenyans as well. Research by Human Rights Watch revealed that those in charge of disbursement of funds routinely ignored the eligibility requirements for beneficiaries and, in some cases, directed the funds to their own personal accounts, businesses, or family and friends.

4.3 Was their mismanagement on the part of the government?

Despite the country being praised for being swift in managing the COVID-19risks, some of the measures taken did not meet the expectations as there were cases of management of funds and other resources intended for the public. Different reports indicate that the government failed to fulfil its promise to safeguard the health and livelihood of the public during the tough COVID-19period. The government's cash transfer program failed to safeguard the vulnerable population who disproportionately suffered the economic fallout from the looming health pandemic⁹⁴. Reports from Human Rights document that political leaders channeled some of the relief funds to relatives, friends, and supporters. Besides, enrolled beneficiaries only received less money than promised, a process where the implementation was masked in secrecy.

Some of the measures taken by the government had severe repercussions on the economy in general. To respond to the COVID-19pandemic, the government imposed strict rules that included curfews and stay-at-home orders, movement restrictions, school closures, and the banning of international travels. In informal settlements, the strict measures impacted to harsh living conditions considering that a significant portion of the population depended on casual labor for survival⁹⁵. This section of the population was vulnerable resulting to families facing evictions from their landlords or skip meals to make the ends meet. While the government

⁹⁴ Ouma, Polet Njeri, Abednego Nzyuko Masai, and Israel Nyaburi Nyadera. "Health coverage and what Kenya can learn from the COVID-19 pandemic." *Journal of Global Health* 10, no. 2 (2020).

⁹⁵ Huho, Julius M. "The two sides of Covid-19 in Kenya: getting a closer look." *International Journal of Scientific and Research Publications* 10, no. 8 (2020): 478-484.

promised to disburse relief funds to such households, the money ended up in wrong hands, not fulfilling the intended purpose to relieve the population in these informal settlements.

During the early months of the pandemic, President Uhuru Kenyatta announced a cash transfer program that would help the vulnerable in the public to cope up with the income losses especially in casual jobs. The cash transfer program targeted 669,000 households as reported by the Cabinet secretary for the National Treasury & Planning. The Cabinet Secretary later reiterated that the fund was able to reach a population of 333,000 households across the nation with the money spent quoted as 9.3 billion Kenya shillings⁹⁶. The Human rights watch conducted a study that disapproved the report from the government Cabinet Secretary, indicating that the selection process lacking transparency and there was no explanation was documented why thousands of households that met the stipulated criteria did not receive any funds.

Corruption allegations were also filed against 15 top government officials and business persons concerning misuse of millions of dollars that were intended to purchasing COVID-19medical supplies. After an investigation, it was discovered that there was proof of contracts allegedly awarded to businesses and individuals with political clout. The investigation had established the criminal responsibility of the public officials in the acquisition and distribution of Covid-19 emergency goods at the Kenya Medical Supplies Authority (KEMSA), which led to an unauthorized use of public funds. Some of the procedures and rules that must be followed during the tender allocation process were broken in the way that some of the tenders were awarded.

The second stage of the investigation into mismanagement of COVID-19resources targeted companies that were alleged to have benefitted from unlawful tendering process. While

⁹⁶ Ibid

reports indicate that none of the companies tend to have misappropriated the funds, documents that were submitted to the Kenya Senate committee indicate that some of the tenders were given to companies that were formed just weeks earlier. Other examples showed that the businesses awarded tenders to supply the medical equipment were associated to politicians. According to the reports, one business was owned by relatives to a sitting governor⁹⁷. Also, contained in the reports are contracts worth millions of dollars that were awarded to people with personal connections to people having high hierarchy in positions of power in the country. In other instances, the PPEs supplied to the Kenya Medical Supply Agency (KEMSA) had inflated prices, in most cases as high as three times the known market rate.

4.4 The implications of mismanagement of COVID-19resources

Although the number of COVID-19cases appear to be comparatively low in Africa and countries such as Kenya when compared to other world regions, the pandemic already has had disastrous effects on the continent's already struggling health systems, a factor that has resulted into a social and economic emergency. The country was hit by macroeconomic supply and demand shocks which could have adverse effects on the growth of the society. The decline of the economic activity and employment during the looming period is determined by the persistence and magnitude of the shock, the effect of pre-existing crises and susceptibilities and the responses made by the government and thriving businesses in the economy.

The mismanagement of COVID-19resources had a massive impact on the main financial flows within the society. The research gathered that with the country experiencing lower level of domestic resources compared to other regions, the country was forced to depend on

⁹⁷ Carpio, Carlos E., Oscar Sarasty, Darren Hudson, Anthony Macharia, and Mumina Shibia. "The demand for a COVID-19 vaccine in Kenya." *Human Vaccines & Immunotherapeutics* 17, no. 10 (2021): 3463-3471

external financial flows, which were mostly funneled to individual accounts of high-profile people in the government rather than serving the intended purpose.

The mismanagement led to the government officials to circumvent the criteria that had been laid out for selecting the people to rightful benefit from the funds and other resources⁹⁸. Instead, the public still faced hard times without employment while the funds and medical supplies were wrongfully directed to friends and families of the government officials in the government. Research also found that the government failed to generate awareness around the program leaving the people uninformed regarding its existence or how they could take part in the registration process.

In the corporate world, Kenya is among the countries whose airline industry dropping by 60% in 2020, a factor that made air and tourism to drop significantly for a low record in the country's history. Hotels in the coastal region of Kenya witnessed one of the worse inactivity in history since with the airline industry down, the tourism businesses could not receive visitors from countries such as German, Italy, and United Kingdom as the most frequent tourism visitors to the coastal town. With the airline and tourism industry experiencing slowdowns, the sector has to lay off a significant number of its employees to be able to cope with the decreased demand of their services and products.

4.5 What are the opportunities for regional and international responses?

Based on the research it was noted that as a result of the emergency situation and the need to address the issue attributed to the COVID-19, Uhuru Kenyatta's government made consultations with public health experts both within and outside the country. Kenya had to take advantage of the health experts outside the country such as the CDC Africa on research and directives required to control the spread of the virus in the country. A number of surveys

⁹⁸ Ibid

and research that had guided health experts in handling of the COVID-19has been sourced from policies and regulations set by agencies such as CDC, World Health Organization (WHO), among other international that have acted as a source of information in mitigating the COVI-19 risks within the country.

Kenya is among the Africa countries that are still coping with the struggling healthcare sector issue that continues to be the cause of growing health concerns. Most countries lack a comprehensive and working healthcare insurance that guarantees its citizens quality, accessible, and affordable healthcare services⁹⁹. Kenya had been a beneficiary of the International Monetary Fund (IMF) has pronounced awarding over USD 100 billion in relief and emergency lending and an amount if 1 trillion that would be channeled to its members. From 2020, Kenyan has also taken advantage of the World Bank Group that decided to lend over USD 150 billion for a period of 15 months.

Already the scarce resources in combination with sought effect of the COVID-19crisis, it means that developing nations' economies will struggle to finance adequate public health, economic, and social responses. Kenya had the opportunities to seek assistance from philanthropic donors that played a greater role in mitigating the Covid-19risks. Philanthropists are strongly embodied in the health sector in countries such as Kenya that are still developing, categorized as the third largest funders of healthcare services. With opportunities for regional and international responses at disposal, the country has a way to involved external stakeholders in running the Covid-19management and ensuring that the different nations and other international agencies work together in ensuring that they contain the virus.

⁹⁹ Nchanji, Eileen Bogweh, and Cosmas Kweyu Lutomia, "Regional impact of COVID-19 on the production and food security of common bean smallholder farmers in Sub-Saharan Global *Food Security* 29 (2021): 100524.

4.6. Summary of the chapter key findings

This chapter demonstrated that Kenya, as opposed to Tanzania, developed strategies to stop the spread of Covid-19. Its borders were sealed off to stop infected people from entering or leaving the nation. In accordance with the EAC and WHO recommendations, the government implemented a dawn to dusk curfew to restrict people's movement and interactions in urban areas. Former President Uhuru Kenyatta restricted person-to-person contact by outlawing all large gatherings, political events, religious gatherings, trade shows, festivals, sporting events, and cultural events. To provide nationwide emergency internet access, the government launched a network of enormous internet-capable balloons in partnership with Google.

The challenges Kenya faced, including corruption, are covered in the final section of this chapter. It should be noted that those who received the cash transfers intended to assist low-income people in adjusting to the effects of COVID-19 on their economy did not gain anything from them. Officials in charge of allocating funds consistently disregarded the eligibility requirements for beneficiaries and allocated funds to their own individual accounts, businesses, or close personal relationships. The disastrous effects of the Pandemic on the continent's already struggling health systems, a factor that resulted into a social and economic emergency. Kenya is among the Africa countries that are still coping with the struggling healthcare sector issue that continues to be the cause of growing health concerns.

CHAPTER FIVE

SUMMARY OF THE STUDY FINDINGS, CONCLUSION AND RECOMMENDATIONS

5.0. Introduction

This chapter examines each objective in terms of a summary of the key conclusions, recommendations, and supporting evidence that will be important to the study of the East African community and, more importantly, the value of cooperation in the struggle against a common, peaceful foe.

This chapter serves four main aims; the chapter reexamines the study's two core objectives with a view to demonstrate the extent to which their sets out tasks have been met. The second aim is to determine whether the hypotheses are validated. The third aim dwells on the conclusion and thesis of the entire study while the fourth is centered on giving academic recommendations gathered and determined.

5.1. Summary of the findings

The goal of the study was to compare and contrast Kenya's and Tanzania's responses to the COVID 19 pandemic and to examine how state-centric ideologies impact regionalism. The study also sought to assess the trend that has been seen previously from Tanzania when encompassed with a health threat that knows no borders and the different manner in which Kenya behaves and how this affects cooperation within the East African Community.

The first objective was to identify and assess EAC regional responses and containment strategies for the COVID 19 pandemic. The East African Community (EAC) is the region with the highest average score across all five dimensions of regional integration. Its most crucial element is unrestricted human movement, and its least crucial element is successful integration.

The principles of good neighborliness and unity upheld by the EAC are based on a shaky and "shifting" foundation. The pandemic response has been left to individual member states due to a lack of leadership at the regional level.¹⁰⁰ The pandemic has almost made the EAC dysfunctional. As a result, it is now less able to fight COVID-19 as a unit. For instance, the Extraordinary Summit of the Heads of States was repeatedly postponed despite the fact that it was urgently necessary. Due to the EAC's lack of coordination, the Tanzanian government was compelled to make humiliating accusations that Kenya was tampering with the outcomes of its truck drivers' Covid-19 tests.¹⁰¹ It led to states such as Burundi conducting national elections in the middle of a pandemic, and nothing was done to address this.

The COVID 19 pandemic was under control and mitigation by the Tanzanian government, and objective two was to identify and assess national response systems. The study found that Tanzania did not adhere to the recommendations made by the WHO and EAC.

The government ignored plight caused by the pandemic, and this risked the lives of it citizens and its neighbours. The tit-for-tat politics played by the Late Magufuli crippled integration in the region and led to mistrust between Kenya and Tanzania. The lack of might from the EAC enabled the state to continue risking the fight against Covid within the region.

The third objective was to identify and assess the national response plans adopted by the Kenyan government to halt and contain the COVID 19 pandemic. The Kenyan government adopted the recommendations made by the EAC and WHO right away.

¹⁰⁰ Damilola Adegoke. Covid-19: How the Complicated Reaction of the East African Community Has Revealed the Slow Integration Process Covid-19: How the tangled response from the East African Community has revealed the sluggish integration process. November accessed 9, 2022. https://www.africanleadershipcentre.org/index.php/covid-19-research/659covid-19-how-the-east-african-community-s-convoluted-response-has-exposed-the-slow-integration-process.

The actions the governments took up were able to allow trade to continue within the region as well. However, corruption and lack of integrity while dealing with allocated funds and donations posed a problem for its citizens causing recovery to be slower as anticipated.

5.2. Conclusion

This study's primary goal was to conduct a comparative analysis of the containment and response strategies used by Kenya and Tanzania. The study established that Kenya worked alongside the EAC recommendations, by ensuring that apart from securing its citizens trade within the region still flourished. The actions implemented by Kenya were well thought out and articulated without any bias. Kenya demonstrated its commitment to the group by making sure they followed international standards and attended EAC meetings. Tanzania, on the other hand, failed to protect its citizens and the region, leading to mistrust among the member states and a prolongation of the pandemic's effects in Tanzania and the surrounding area. The late President Magufuli's actions incited fear among Tanzanians, and when coupled with the country's already subpar healthcare systems, a worsening of the situation resulted from a lack of responsibility and accountability. This nationalistic containment and response measure had an impact on the might of the East African community in collaborating towards the Pandemic. In a unified coordinated set up the spread of the pandemic would have been controlled. Article 118 of the EAC was signed and ratified by every member of the EAC and those states not following the guidelines given should have faced sanctions or consequences so that they learn from this pandemic.

5.3. Recommendations

The COVID 19 pandemic should act as a catalyst for the EAC to strengthen and expedite regional integration efforts. A regional strategy should be employed to counter future threats. For instance, the West African Economic Community (ECOWAS) has a joint task force for

pandemic response. Since there was a system in place, the region was able to respond quickly to other serious pandemics like Ebola. Before the African Union (AU) established the Continental Center for Disease Control, ECOWAS had already established the Regional Center for Surveillance and Disease Control (ACDC). The regional bloc should have implemented sanctions in cases of non-compliance to discourage states from acting against the interests of the whole. As threats that do not require physical combat, such as health threats, have replaced those that do, states must sacrifice short-term gains of national interest in order to combat the pandemic through coordinated policy actions. The pursuit of such collective security can only be successful if it directly advances the national interests of the actors, in this case, the East African Community (EAC) partner states.

Tanzania has in recent years taken an opposite approach when it comes to regional/ international dilemmas that require a common ground within the community. This has been attributed to competition among EAC member states to dominate the regional market and the different ideologies among member states. In the former EAC there was what was deemed as "the coalition of the willing" and this revived when Tanzania chose a more isolating response to the pandemic which in turn led to mistrust within the region. This research recommends that Tanzania should commit to the bylaws ratified by the state, this would show its commitment in the integration process. Instead of looking inward during a threat that knows no boundaries it is imperative that Tanzania aligns with the region. The new President has taken measures to reinstate the relationships that were broken, and this will go a long way in preparing for a similar threat. Ensuring that Tanzania works harmoniously with its neighbors creates a conducive environment for integration to flourish.

Kenya has been a strong leader within the region, acting and setting the pace for other members of the collective. The approach Kenya took enhanced integration by leaving room for trade to still flourish in the midst of the pandemic. This move ensured that goods moved freely within the region and safeguarded the drivers and citizens as well. The research established that as much as Kenya was compliant with the EAC guidelines, the state still experienced high corruption rates, and this hindered many initiatives that would have helped the citizens of Kenya. The embezzlement of funds and medical equipment caused the destabilization of health facilities which were already strained by the numbers of infected people requiring medical assistance. Integration is collective action and Kenya being a strong regional actor is in a position to push for better integration and stabilize the region.

5.4. Areas for further Research

Despite ongoing political focus on cross-border health-related issues, public health and international relations have not yet had a fruitful conversation. The COVID 19 Pandemic is still having an effect on states as of right now, which offers an opportunity to add more theoretical frameworks that describe the present and future of collective security.

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APPENDICES

APPENDIX 1: Letter to Respondents

Dear Respondent,

THE EFFECTS OF NATIONAL RESPONSE MECHANISMS IN MITIGATING THE CORONA VIRUS PANDEMIC IN THE EAST AFRICAN REGION: A COMPARATIVE ANALYSIS OF KENYA AND TANZANIA'S RESPONSE TO COVID 19.

I am a student at the University of Nairobi and currently pursuing a course of study for the degree in Masters in International Studies Program. Pursuant to the pre-requisite course work, I am currently carrying out a study on **The Effects of National Response Mechanisms In Mitigating The Corona Virus Pandemic In The East African Region: A Comparative Analysis of Kenya And Tanzania's Response To Covid 19.**

This will involve use of semi structured interviews. There are no correct and wrong answers to these statements, and they are intended just to obtain opinions, views & feelings. Would you please kindly spare a few minutes of your precious time and avail yourself for the interview as well as the discussion. The information you will provide in this study will be treated with the utmost confidence and will be used strictly only for the academic purpose mentioned above.

Thank you for your cooperation.

Yours faithfully,

Monie

Maryanne Wanjira

Researcher

APPENDIX 2: Interview Schedule

Dear Sir/ Madam,

My name is Maryanne Wanjira, a student at University of Nairobi, I am currently carrying out research on **The Effects of National Response Mechanisms In Mitigating The Corona Virus Pandemic In The East African Region: A Comparative Analysis of Kenya And Tanzania's Response To Covid 19**. I thought it would be a good idea to interview you, so that I can get the needed information for the study.

I would like to ask you some questions about your background, some experiences you have had when dealing with Regionalism and also how nationalistic responses to the pandemic have affected the synergy and effectiveness of the East African Community in combating the spread of Covid 19. I require this information to develop my thesis.

I hope to use this information to help improve on the scope of health diplomacy and regional integration. The interview should take about 10 minutes. Are you available to respond to some questions at this time?

APPENDIX 3: Questionnaire

Introduction:

This questionnaire is designed to generate information that will enable government and other regional stakeholders effectively improve on how they respond to Pandemics. It specifically targets information on the effects of how the Government of Kenya or Tanzania responded to the COVID 19 pandemic and the impact to regional measures put in place. This will be done in Kenya and Tanzania. Kindly answer all the questions as truthfully as possible. All information volunteered, including respondent identity, will be kept strictly confidential.

Circle which applicable

A. Demographic

1.	Gender	$1 = \mathbf{Male}$	2 = Female	3= N	on-binai	ry	
2.	Age Bracket	1 = (18 - 25)	2 = (26 - 35)	3 = (3	6 - 45)	4= (46 – 55)	5 = 56 +
3.	Occupation		(Ple		specify)		
B.	General Ques	stions					
1.	What is	your ı	understanding	of	COVID	19	Pandemic?

.....

- 2. Do you know the regional guidelines which were recommended and ratified by your country through the EAC to mitigate the spread of the Corona Virus Pandemic?
 - a. Yes
 - b. No
- 3. If yes, has your country implemented and followed through with the regional requirements?
 - a. Yes
 - b. No
- 4. Explain answer above (question 3)

C. Tanzania

- 1. How did Government of Tanzania manage Covid-19?
 - a) They did a good job
 - b) They could have done better
 - c) They did a bad job
- 2. Explain your answer above (question 1)

.....

- 3. How did the political opposition and civil society respond?
 - a) They were unhappy with the government ways
 - b) They were satisfied with what the government was doing
 - c) They were silent
 - d) They would have done more
- 4. Did you feel there was mismanagement on the part of the government?
 - a) Yes
 - b) No

5. Explain your answer above. (question 4)

.....

6. If answered yes in question 4 what was the potential implications of the mismanagement?

.....

- 7. Was the Tanzanian government in line with the regional policies put in place?
 - a) Yes
 - b) No
- 8. Explain your answer (Question 7)

..... 9. What are the opportunities for regional and international responses? 10. In your opinion, what would you recommend would have been the best approach for Tanzania to take?

D. Kenya

- 1. How did Government of Kenya manage Covid-19?
 - d) They did a good job
 - e) They could have done better
 - f) They did a bad job
- 2. Explain your answer above (question 1)

- 3. How did the political opposition and civil society respond?
 - e) They were unhappy with the government ways
 - f) They were satisfied with what the government was doing
 - g) They were silent
 - h) They would have done more
- 4. Did you feel there was mismanagement on the part of the government?
 - c) Yes
 - d) No
- 5. Explain your answer above. (question 4)

6. If answered yes in question 4 what was the potential implications of the mismanagement?

.....

.....

7. Was the Kenyan government in line with the regional policies put in place?

- c) Yes
- d) No

8. Explain your answer (Question 7)

9. What are the opportunities for regional and international responses?

- 10. In your opinion, what would you recommend would have been the best approach for Kenya to take?
 - a) The government would have aligned with the regional policies more
 - b) The government did the best they could
 - c) Other
- 11. Explain your answer (question 10)

Thank you for your time and cooperation. I appreciate your feedback.

APPENDIX 4: NARCOSTI



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July 27, 2022

TO WHOM IT MAY CONCERN

RE: MARYANNE WANJIRA MBUGUAH - R50/38557/2020

This is to confirm that the above-mentioned person is a bona fide student at the Department of Diplomacy and International Studies (DDIS), University of Nairobi pursuing a Master of Arts Degree in International Studies. She is working on a research project titled, "THE EFFECTS OF NATIONAL RESPONSE MECHANISMS IN MITIGATING THE CORONA VIRUS PANDEMIC IN THE EAST AFRICAN REGION: A COMPARATIVE ANALYSIS OF KENYA AND TANZANIA'S RESPONSE TO COVID-19".

The research project is a requirement for students undertaking Masters programme at the University of Nairobi, whose results will inform policy and learning.

Any assistance given to her to facilitate data collection for her research project will be highly appreciated.

Thank you.

Dr. Patrick Maluki Chairman, DDIS of Diplomacy Million