

Data updated April 30, 2020



Tanzania

Background

Public health and social measures (PHSMs) are an important strategy to slow transmission of COVID-19 and reduce the burden on health care systems. Effective implementation of PHSMs requires public support and adherence, but they can place a significant burden on people, especially when they restrict movement or entail the closure of services. This situational analysis, based on publicly available data and a recent phone survey, aims to inform efforts in Tanzania to balance PHSMs to mitigate COVID-19 with other priorities, including public acceptance and social impacts.

Effective Implementation of Public Health and Social Measures in Tanzania: Situational Analysis

Highlights¹

Public health and social measures should respond to data about the growth of the epidemic and be implemented in a way that engages communities. Communities should be involved in helping to determine strategies for adapting measures to the local context, protecting livelihoods, and introducing appropriate relief measures to counteract the economic impact of these measures. The government should counter misinformation with appropriate risk communication and engage with communities to ensure voluntary adherence to COVID-19 response measures.

- While initially the epidemic had a slow growth rate in Tanzania, cases have been increasing more rapidly, with large variation in new daily cases and deaths reported reflecting lags in reporting.
- The government has implemented minimal measures to mitigate spread of the disease. Schools are closed but there is no stay-at-home order in place. It will be important to monitor the epidemiological situation closely.
- Tanzania showed a small change in population mobility following school closures in mid-March; however, cases continue to rise and no further changes in mobility are observed.
- According to survey results, the vast majority of urban residents are aware of COVID-19, but there is significant misinformation, some of which may provide a misplaced sense of protection or contribute to stigma that could lead to violence or prevent people from accessing needed care.
- While most urban Tanzanians view COVID-19 as a national problem, only one in three thinks they have high personal risk of infection.
- Survey results showed strong support for the government response and high levels of trust in COVID-19 information from the government. Support for many PHSMs is significantly lower than in other African Union (AU) Member States polled. In particular, there is significant opposition to closing workplaces, shutting down markets, and closing churches and mosques.
- There have been minimal reports of insecurity or unrest related to COVID-19.

ABOUT PERC

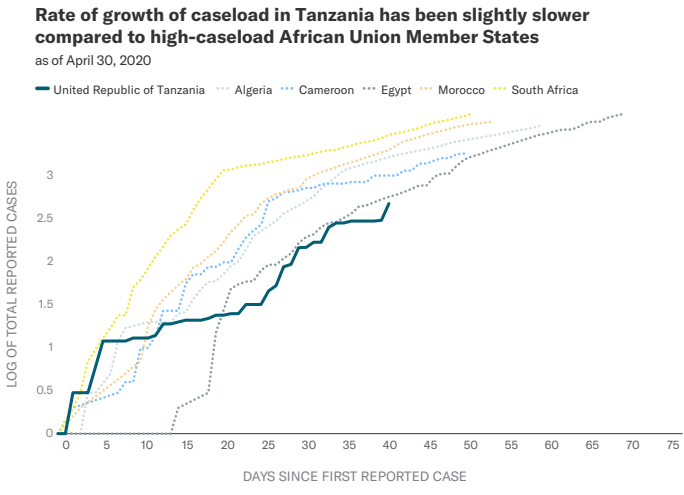
The Partnership for Evidence-Based Response to COVID-19 (PERC) is a public-private partnership that supports evidence-based measures to reduce the impact of COVID-19 on African Union Member States. PERC member organizations are: Africa Centres for Disease Control and Prevention; Resolve to Save Lives, an initiative of Vital Strategies; the World Health Organization; the UK Public Health Rapid Support Team; and the World Economic Forum. Ipsos and Novetta Mission Analytics bring market research expertise and years of data analytic support to the partnership.

¹ This situational analysis brief is based on data from available sources as of the date of publication, and may not reflect more recent developments or data from other sources not referenced. Information about data sources available here: <https://preventepidemics.org/coronavirus/perc/data>

Disease Dynamics

TANZANIA STILL HAS A RELATIVELY LOW REPORTED CASELOAD AT 480, BUT THIS IS GROWING WITH 174 NEW CASES REPORTED ON APRIL 30. SIX DEATHS WERE REPORTED ON THE SAME DAY.

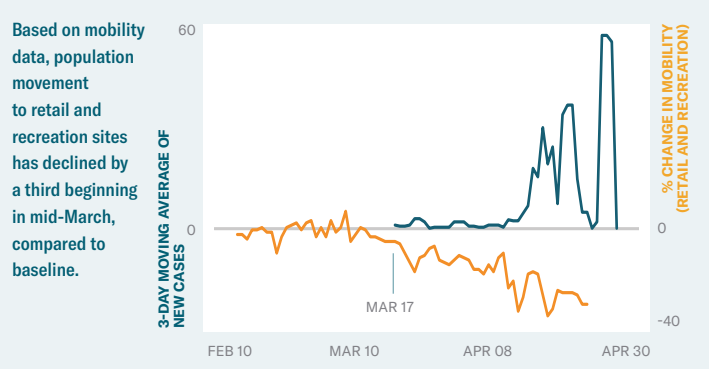
Total cases	Total deaths	Case-fatality rate (%)	Total # of days to double case count	Date of first reported case
480	16	3.33	9	March 17



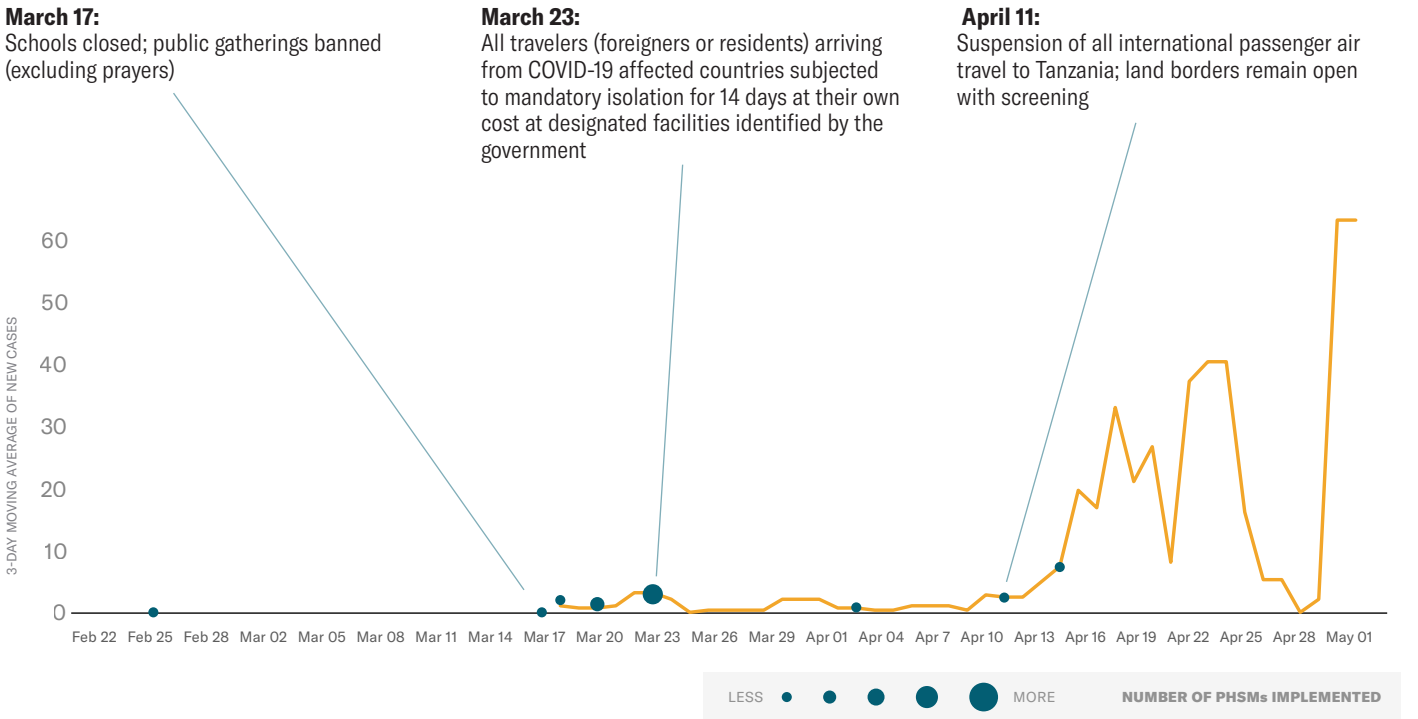
- When compared to the five AU Member States with the highest caseloads, Tanzania’s caseload has grown somewhat slower, although cases have been increasing more rapidly since mid-April with large numbers of cases reported on April 22 and April 30. Unlike other AU Member States, Tanzania has not been releasing daily reports of cases, which limits understanding of epidemiological trends.
- The most recent doubling time is nine days. Doubling time is number of days it took for cases to double to reach their current level. This metric can be used to estimate the recent rate of transmission, with higher doubling times indicating slower growth. In general, doubling times exceeding seven to 10 days and increasing over time suggest a slowing of the epidemic. If testing is believed to be sufficient or is increasing, then changes in case counts per day can also be used to assess COVID-19 transmission.
- While publicly collated data on testing are not available from our source, anecdotal reports suggest testing is limited to major cities.

Implementation of Key PHSMs

THE TANZANIAN GOVERNMENT HAS IMPLEMENTED BORDER CONTROLS TO STOP IMPORTATION OF CASES, CLOSED SCHOOLS, AND LIMITED PUBLIC TRANSPORT. THESE MEASURES WERE IMPLEMENTED WITHIN TWO WEEKS OF THE FIRST REPORTED CASE. NO FURTHER PHYSICAL DISTANCING MEASURES HAVE BEEN RECORDED.



3-day moving average of new cases and date of PHSM implementation

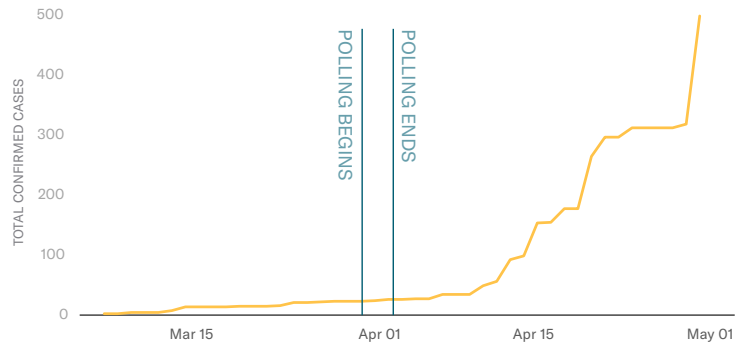


Public Reactions to COVID-19 and Related PHSMs

RESULTS FROM RECENT POLLING

Market research firm Ipsos conducted a telephone poll of 1,103 adults in two urban and peri-urban areas of Tanzania (842 in Dar es Salaam and 261 in Zanzibar) between March 30 and April 2, 2020. At the time of polling, Tanzania had 14 to 20 confirmed COVID-19 cases.

Timing of poll in Tanzania

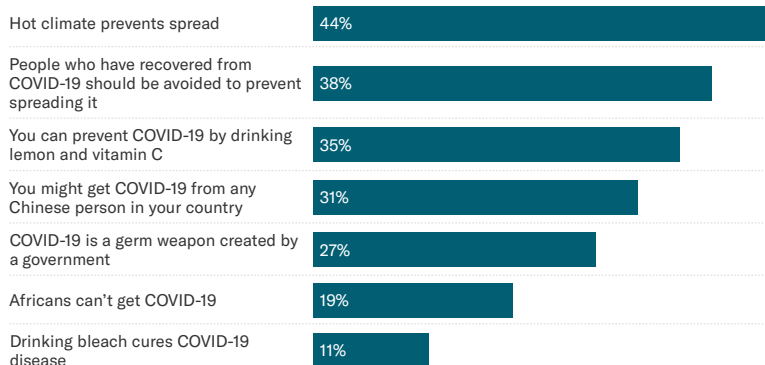


Information on COVID-19

In the poll, Tanzanians reported high awareness of COVID-19 (93%), although this was lower than the near-universal awareness recorded in other AU Member States polled. Some harmful misconceptions persist, such as that hot climate prevents spread (44% believe this to be true), Africans cannot get COVID-19 (19%), or that drinking bleach is a cure (11%). There are also some prevalent misconceptions that could lead to stigmatization of people at risk for the disease, with 38% believing that individuals who have recovered should be avoided, and 31% thinking “you might get it from any Chinese person in your country.” A sizeable minority (26%) felt they needed more information, particularly on transmission, prevention and treatment/cure.

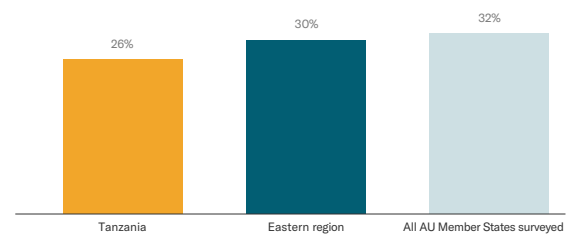
Belief in Misinformation and Rumors

Percentage believing each false statement is probably or definitely true



Demand for Information

Percentage reporting they **do not** currently have enough information about COVID-19



Information Needs

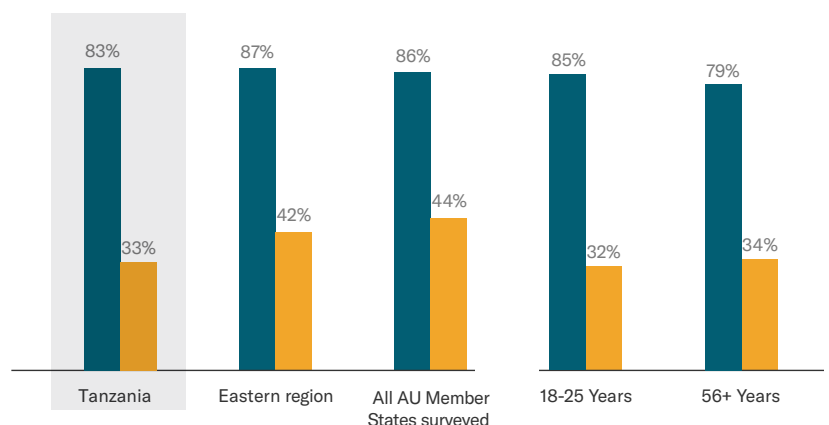


Risk Perceptions

A large majority (83%) of urban Tanzanians polled said they expected that COVID-19 will be a problem for Tanzania. Far fewer respondents (33%) believed that their personal risk of infection was high or very high, a lower proportion than in the East African region (42%) and across all Member States polled (44%).

RISK PERCEPTIONS IN TANZANIA IN CONTEXT

RISK PERCEPTIONS IN TANZANIA BY AGE



■ Percentage reporting COVID-19 will be a problem in the country
 ■ Percentage reporting personal risk of catching COVID-19 high/very high

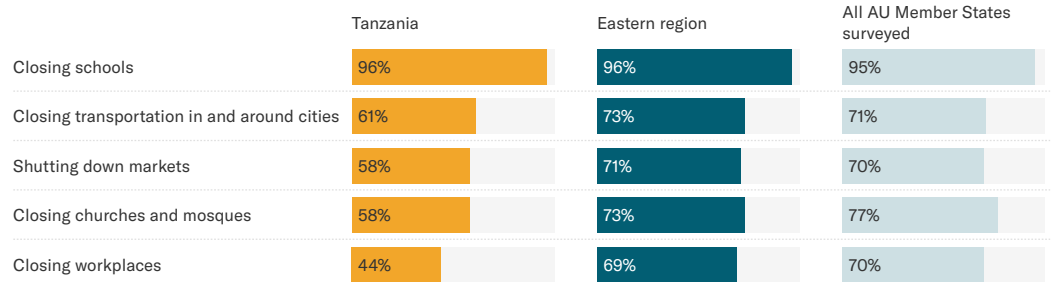
Support for Government and PHSMs

A large majority of Tanzanians surveyed were positive about the government's response to date, with 90% satisfied. These levels of satisfaction are reflected in high levels of trust in information from the government (90%). These are higher levels of support and trust compared to averages in the region and across all AU Member States surveyed. Respondents expressed optimism that they would be able to get the care they needed if they became ill, with 81% confident that they could get help.

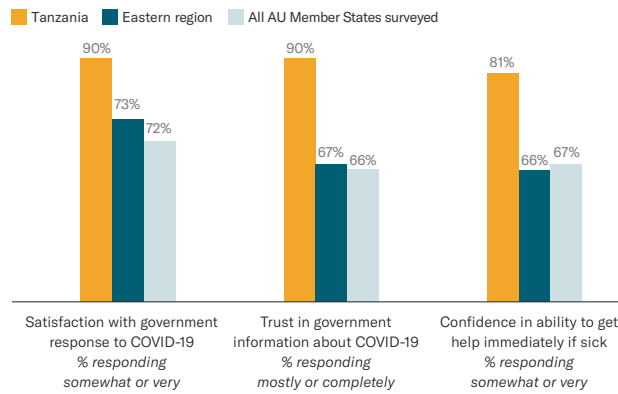
Respondents expressed lower support compared to other AU Member States polled for a wide range of personal and community public health and social measures to help limit the spread of COVID-19. For example, while 96% support school closures, only 44% support closing workplaces, 58% support shutting down markets, and 58% support closing churches and mosques.

Support for PHSMs

Percentage of respondents that somewhat or strongly support

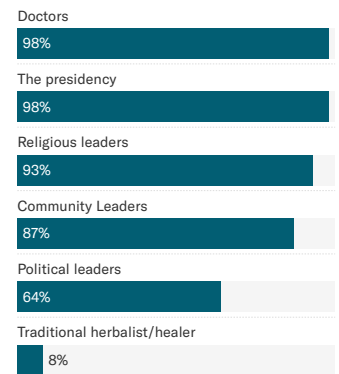


Perceptions of Government & Health System



Trust in Information Sources

Percentage that completely or mostly trust each source for health information



Barriers to Adherence

Interventions may be difficult to comply with as current personal supplies of food and cash will last less than one week for most households, and only one in three have separate rooms at home to isolate sick family members.

35%

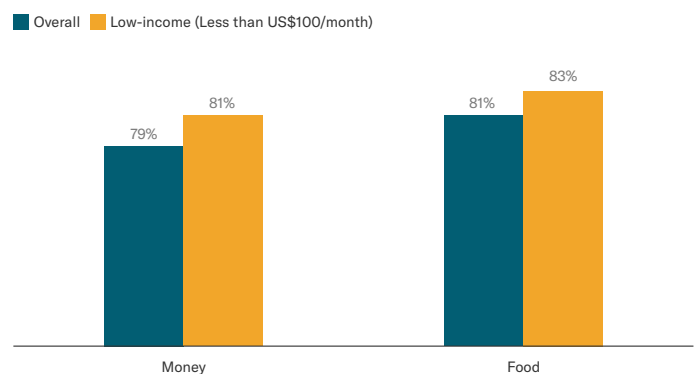
of respondents have a separate room in the home to isolate someone with COVID-19

30%

of respondents in families making less than US\$100 per month have a separate room in the home to isolate someone with COVID-19

Supplies of Food & Money

Percentage who expect to run out in 1 week or less



Economic and Relief Measures

No relief measures have been announced to date for individuals, but the government is assessing the economic impact of COVID-19. A number of private sector initiatives and private philanthropic donations have been announced to support the response. Tanzania's president has called on international creditors to provide debt relief to AU Member States in order to increase their fiscal capacity to respond to the COVID-19 crisis

Overview of Security Incidents Related to COVID-19

A rise in unrest or insecurity—including peaceful protests as well as riots and violence by and against civilians—can affect adherence to PHSMs and serve as a warning sign of the burden such measures are imposing on the population. In Tanzania, there has been minimal unrest, with only two incidents reported, both related to foreigners suspected of carrying the coronavirus.

INFORMATION ABOUT DATA SOURCES AVAILABLE HERE: [HTTPS://PREVENTEPIDEMICS.ORG/CORONAVIRUS/PERC/DATA](https://preventepidemics.org/coronavirus/perc/data)



² <https://www.reuters.com/article/us-health-coronavirus-tanzania/tanzanias-president-calls-for-debt-forgiveness-to-help-battle-virus-idUSKCN224346>