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Zimbabweans approve of COVID-19 response but expect more aid for vulnerable households

Afrobarometer Dispatch No. 556 | Simangele Moyo-Nyede and Jonathan Kugarakuripi

Summary

Zimbabwe recorded its first confirmed case of COVID-19 on 20 March 2020 – three days after the government had declared COVID-19 a national disaster (Crisis24, 2020). A week later, schools were closed until a phased reopening started in September of that year. A nationwide lockdown in March-April 2020 was followed by slightly relaxed sets of restrictions, then reimposed in January 2021 after a surge in COVID-19 cases (Ndoma & Kugarakuripi, 2021).

Restrictions continued at various levels of intensity for more than two years. On 22 June 2022, the government lifted the night curfew and extended business hours for shops, bars, and restaurants. However, masks are still compulsory in public (Chingwere, 2022), as are sanitising of hands when entering buildings and temperature checks when accessing certain shops, government offices, and medical facilities.

Critics have argued that the enforcement of lockdown restrictions has at times been overly harsh, with arrests of suspected violators and accusations of human-rights abuses by members of the uniformed forces and police (UN News, 2020; Amnesty International, 2021; Ndoma & Kugarakuripi, 2021).

As of 28 September 2022, the country has reported 257,409 confirmed cases of COVID-19 with 5,602 deaths (WHO, 2022). More than 12.1 million doses of COVID-19 vaccines have been administered, providing full coverage for more than 6.5 million people, or about 42% of the population.

A new Afrobarometer survey in Zimbabwe shows that while most citizens approve of the government's overall management of the pandemic, majorities criticise its limited provision of pandemic-related assistance to vulnerable households and believe that COVID-19 resources were lost to corruption. Most are also unhappy about disruptions to children's education.

More than seven in 10 Zimbabweans say they have been vaccinated against COVID-19, and despite some concerns about vaccines, a large majority say they trust the government to ensure that the vaccines are safe.

Afrobarometer surveys

Afrobarometer is a pan-African, nonpartisan survey research network that provides reliable data on African experiences and evaluations of democracy, governance, and quality of life. Eight rounds of surveys have been completed in up to 39 countries since 1999. Round 9 surveys (2021/2022) are currently underway. Afrobarometer conducts face-to-face interviews in the language of the respondent's choice.

The Afrobarometer team in Zimbabwe, led by the Mass Public Opinion Institute (MPOI), interviewed 1,200 adult citizens of Zimbabwe between 28 March and 10 April 2022. A sample of this size yields country-level results with a margin of error of +/-3 percentage points at a 95% confidence level. Previous surveys were conducted in Zimbabwe in 1999, 2004, 2005, 2009, 2012, 2014, 2017, and 2021.

Key findings

- **Effects of the COVID-19 pandemic:**
 - Almost two in 10 Zimbabweans (18%) say they or a member of their household became ill with COVID-19 or tested positive for the virus, while more than one-third (38%) say someone in their household lost a job, business, or primary source of income due to the pandemic.

- **Attitudes toward vaccines:**
 - More than seven in 10 Zimbabweans (72%) say they have been vaccinated against COVID-19.
 - Among those who are not vaccinated, more than half (53%) say they are "somewhat unlikely" (38%) or "very unlikely" (15%) to try to get vaccinated.
 - Among vaccine-hesitant citizens, the most frequently cited reasons have to do with vaccine safety.
 - But a majority (64%) of Zimbabweans say they trust the government "somewhat" (31%) or "a lot" (33%) to ensure the safety of COVID-19 vaccines.

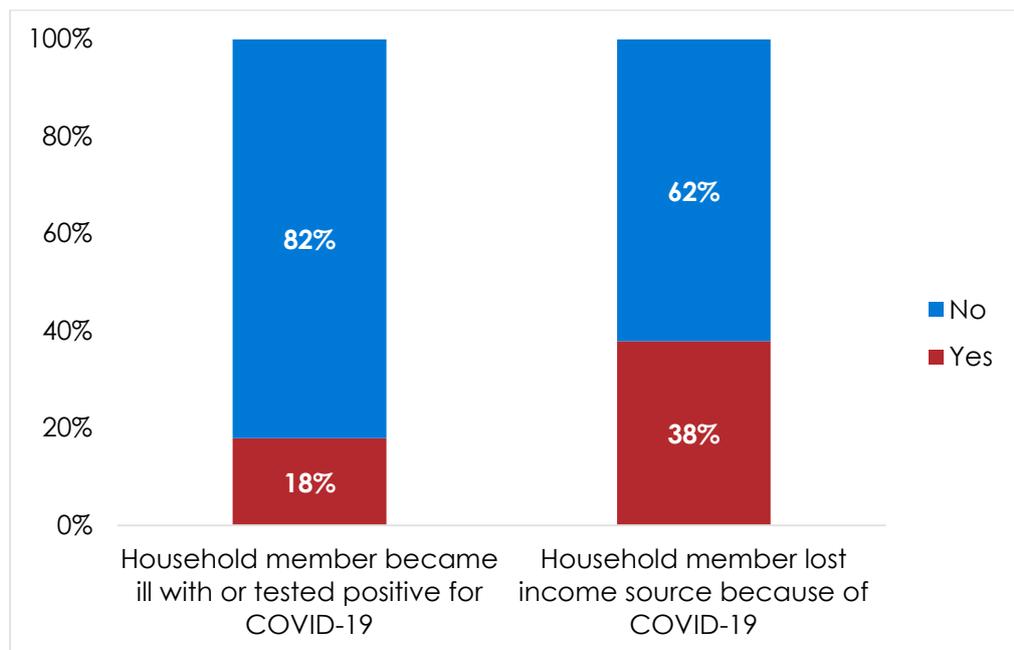
- **Government response to COVID-19:**
 - Overall, three-fourths (75%) of Zimbabweans say the government has done a "fairly good" or "very good" job of managing the response to the COVID-19 pandemic.
 - But large majorities are dissatisfied with the government's efforts to minimise disruptions to children's education (70%) and to provide relief assistance for vulnerable households (63%).
 - Six in 10 respondents (60%) believe that "some" or "a lot" of the resources intended for the COVID-19 response were lost to corruption.
 - Nearly two-thirds (65%) of citizens approve of using the police or military to enforce public health mandates during a pandemic, but more than half object to censoring media reporting (53%) and postponing elections (51%) in response to a public health crisis.

- **Looking ahead:**
 - A slim majority (53%) of citizens think the government is prepared to deal with future public health emergencies.
 - By 50% vs. 37%, citizens say the government needs to invest more in preparations for future health crises, even if it means fewer resources are available for other health services.

Effects of COVID-19

Almost two in 10 Zimbabweans (18%) say they or a member of their household became ill with or tested positive for COVID-19, while more than one-third (38%) say someone in their household lost a job, business, or primary source of income due to the pandemic (Figure 1).

Figure 1: Effects of COVID-19 | Zimbabwe | 2022



Respondents were asked: Please tell me whether you personally or any other member of your household have been affected in any of the following ways by the COVID-19 pandemic: Became ill with, or tested positive for, COVID-19? Temporarily or permanently lost a job, business, or primary source of income?

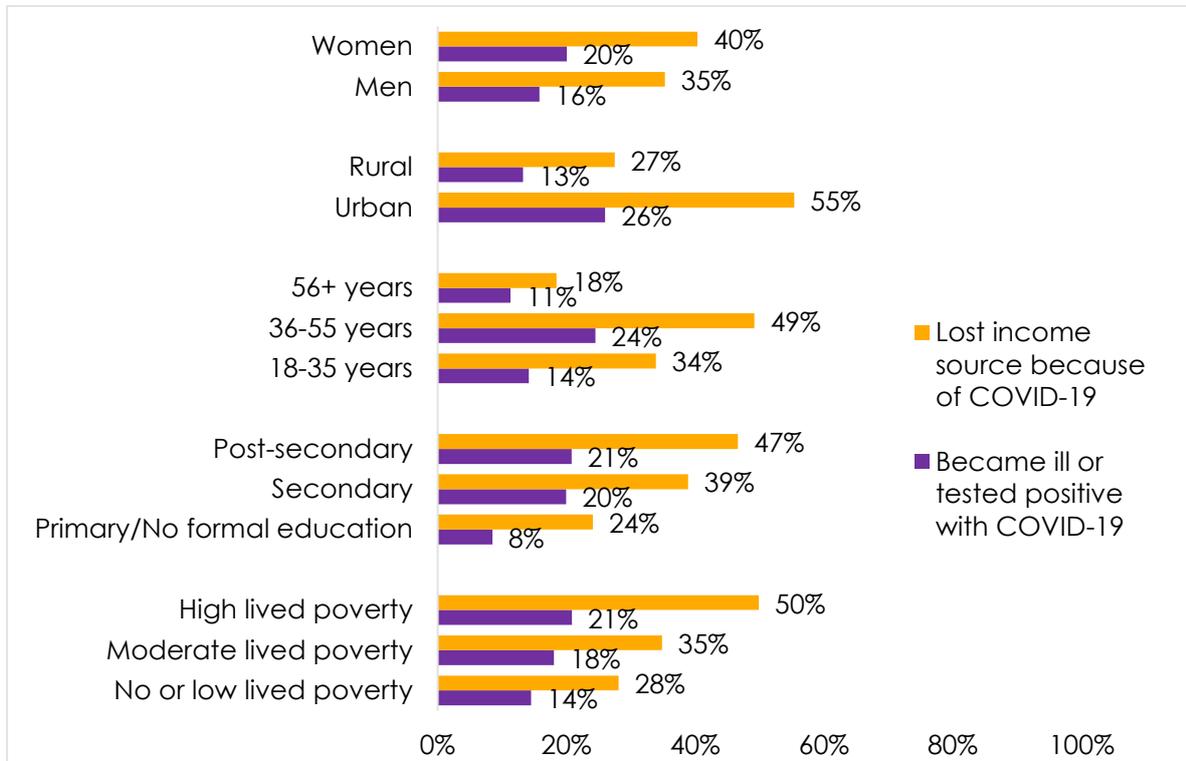
The effects of COVID-19 are significantly more prevalent in cities than in rural areas. Urbanites are twice as likely as rural residents to report losing an income source (55% vs. 27%) and becoming ill with or testing positive for COVID-19 (26% vs. 13%) (Figure 2).

Illness and/or positive COVID-19 tests are somewhat more common among middle-aged respondents (24% of 36- to 55-year-olds) than among youth and elders, and increase in frequency with respondents' education level, ranging from 8% of those with primary or no formal education to 21% of those with post-secondary qualifications.

Loss of an income source is least common among those with primary or no formal education (24% vs. 39%-47% of more educated respondents). But it is more common among poorer citizens (50% of those experiencing high lived poverty,¹ compared to 28%-35% of better-off respondents).

¹ Afrobarometer's Lived Poverty Index (LPI) measures respondents' levels of material deprivation by asking how often they or their families went without basic necessities (enough food, enough water, medical care, enough cooking fuel, and a cash income) during the preceding year. For more on lived poverty, see Mattes (2020).

Figure 2: Effects of COVID-19 | by demographic group | Zimbabwe | 2022

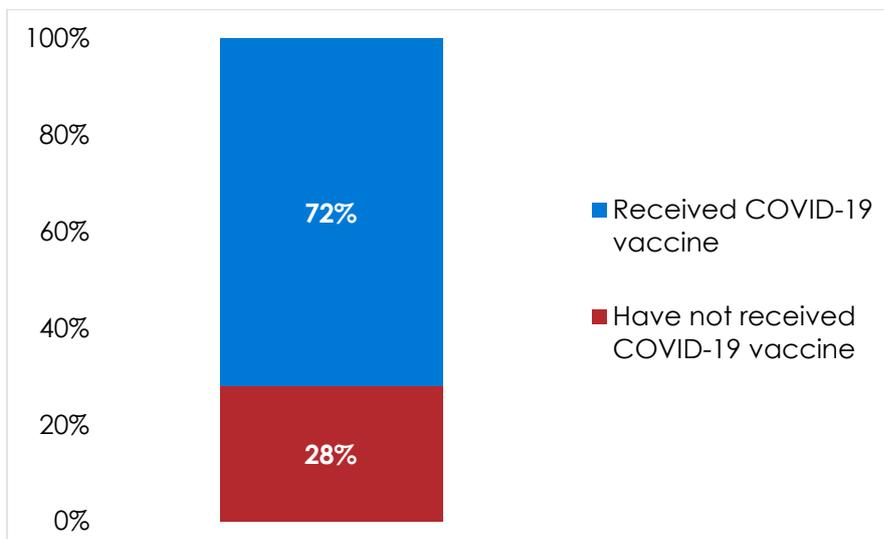


Respondents were asked: Please tell me if you personally or any other member of your household have been affected in any of the following ways by the COVID-19 pandemic: Became ill with COVID-19? Temporarily or permanently lost a job, business or primary source of income? (% who say "yes")

Attitudes toward vaccination

More than seven in 10 Zimbabweans (72%) say they have been vaccinated against COVID-19, while 28% say they have not received the shot (Figure 3).

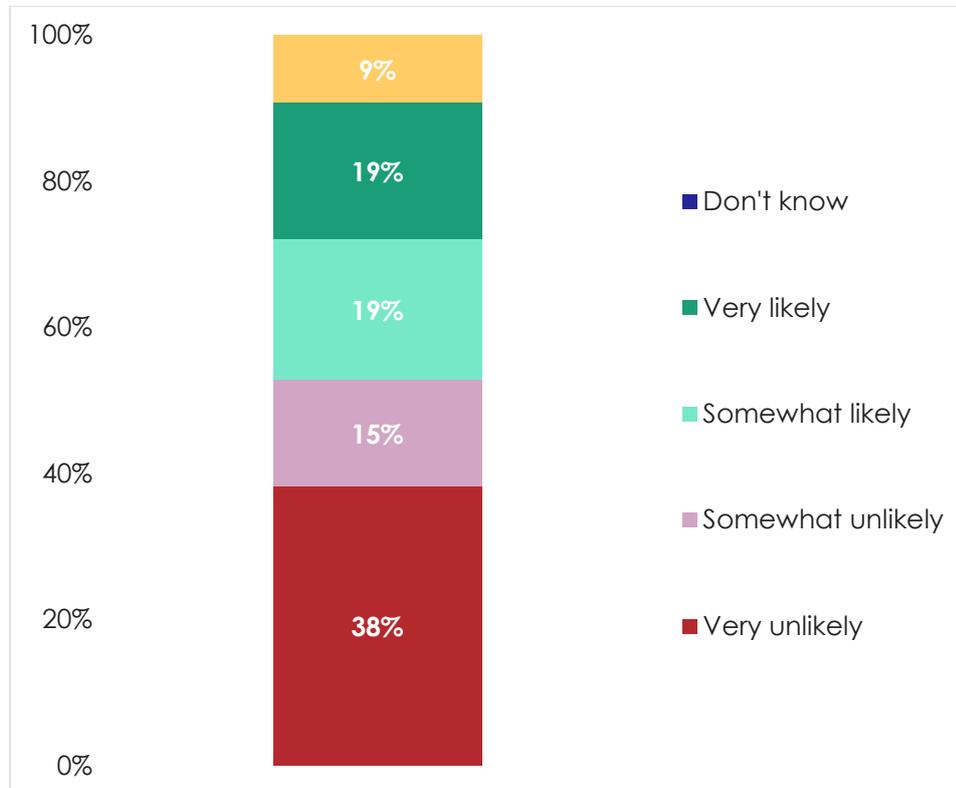
Figure 3: Received COVID-19 vaccination | Zimbabwe | 2022



Respondents were asked: Have you received a vaccination against COVID-19, either one or two doses?

Among those who have not been vaccinated, more than half (53%) say they are “very unlikely” (38%) or “somewhat unlikely” (15%) to try to get vaccinated. About four in 10 (38%) describe themselves as “somewhat” or “very” likely to try to get vaccinated (Figure 4).

Figure 4: Likelihood of trying to get vaccinated | Zimbabwe | 2022



Respondents who had not been vaccinated against COVID-19 were asked: *If a vaccine for COVID-19 is available, how likely are you to try to get vaccinated? (Respondents who say they have been vaccinated are excluded.)*

Women and men are similar in their vaccination rates and proportions of likely vs. unlikely recipients of the vaccine (Figure 5).

Urbanites are less likely than rural residents to be vaccinated (69% vs. 73%) and to say they will probably get vaccinated (6% vs. 14%).

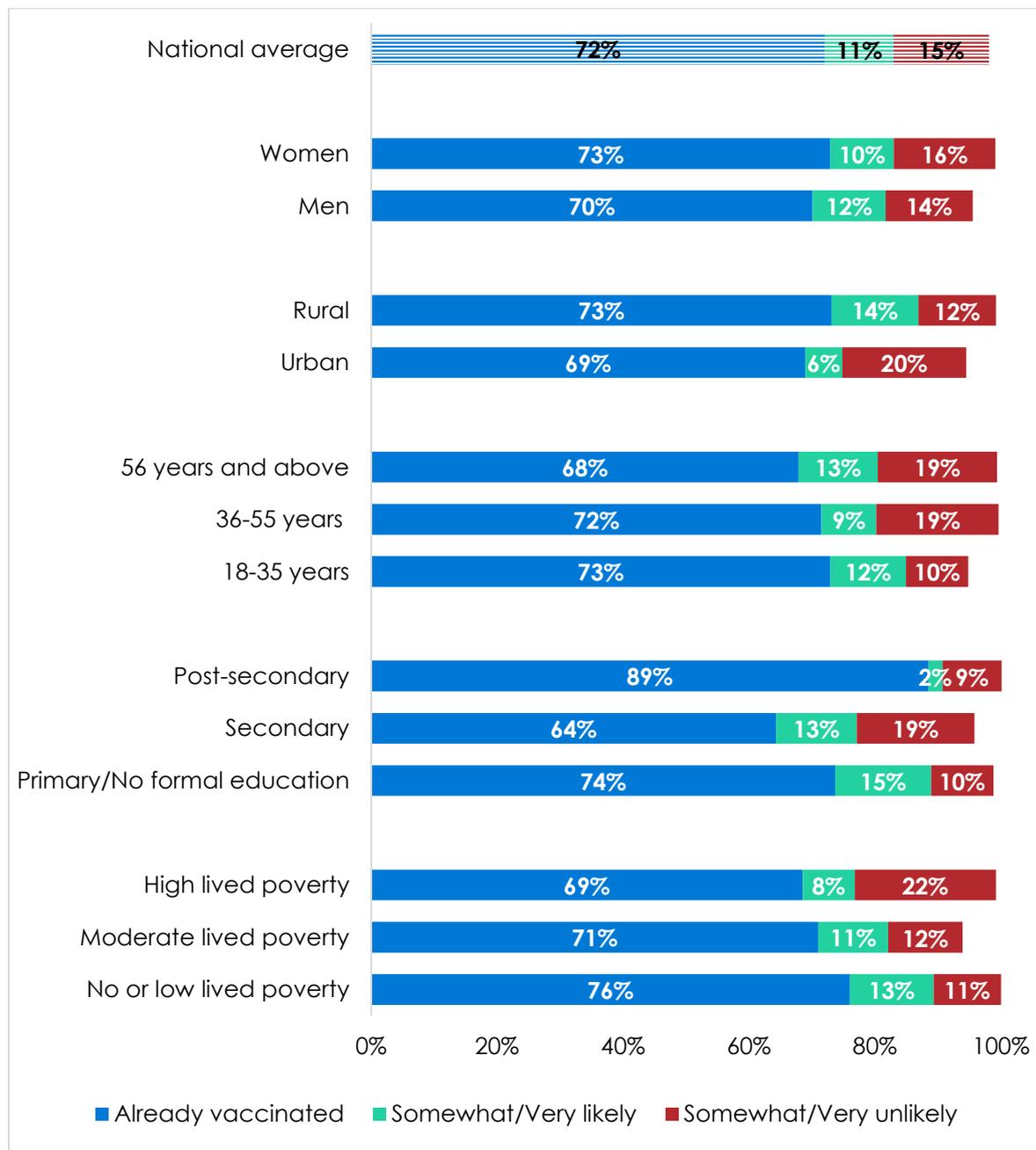
Young respondents are most likely to be vaccinated (73%) and least likely to express vaccine hesitancy (10%).

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Highly educated Zimbabweans (89%) are significantly more likely than their less educated counterparts (64%-74%) to have received the vaccine, while the poorest respondents are least likely to have done so (69%).

Overall, vaccine hesitancy is highest among the poor (22%), urban residents (20%), citizens above age 35 (19%), and those with secondary education (19%).

Figure 5: Vaccination status | by demographic group | Zimbabwe | 2022



Respondents were asked: *If a vaccine for COVID-19 is available, how likely are you to try to get vaccinated?*

Among citizens who say they are unlikely to get vaccinated, the most frequently cited reasons have to do with vaccine safety: Many do not trust the vaccine or are worried about getting a fake or counterfeit vaccine (28%) or believe the vaccine is not safe (5%), was developed too quickly (3%), or may cause negative side effects (2%) (Figure 6).

Others believe that God will protect them from COVID-19 (16%), that COVID-19 is not serious or life-threatening (14%), or that they run little risk of contracting COVID-19 (7%), while some voice religious objections to the COVID-19 vaccine or to vaccines in general (7%).

Figure 6: Main reason for vaccine hesitancy | Zimbabwe | 2022

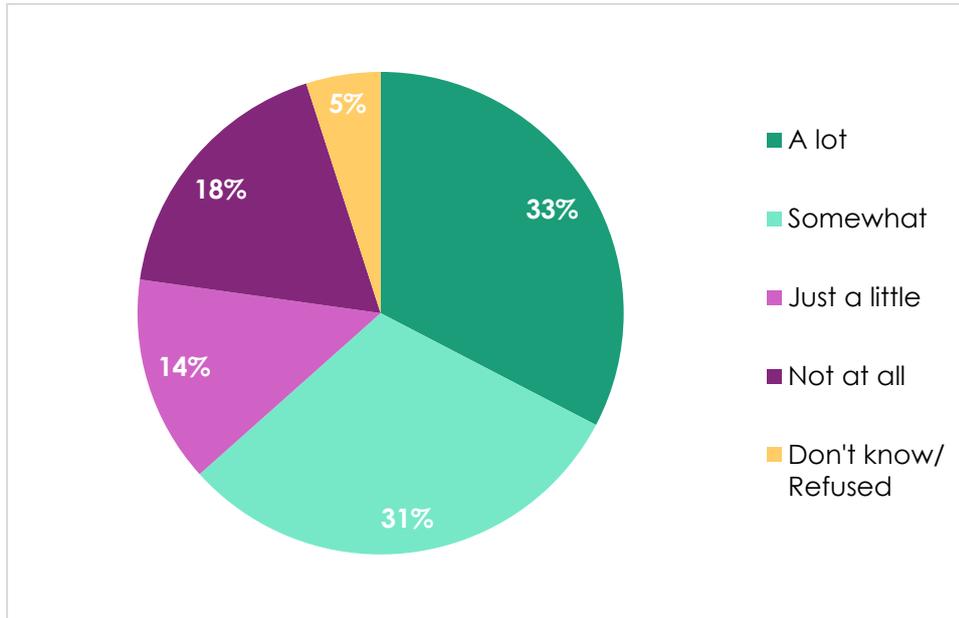


Respondents who say they are not likely to get vaccinated were asked: What is the main reason that you would be unlikely to get a COVID-19 vaccine? (Respondents who say they have been vaccinated are excluded.)

Widespread concerns about vaccine safety can present a major hurdle for government efforts to vaccinate the population. However, in Zimbabwe, more than six in 10 citizens (64%) say they trust the government “somewhat” (31%) or “a lot” (33%) to ensure the safety of COVID-19 vaccines, while a minority express “just a little” trust (14%) or no trust at all (18%) (Figure 7).

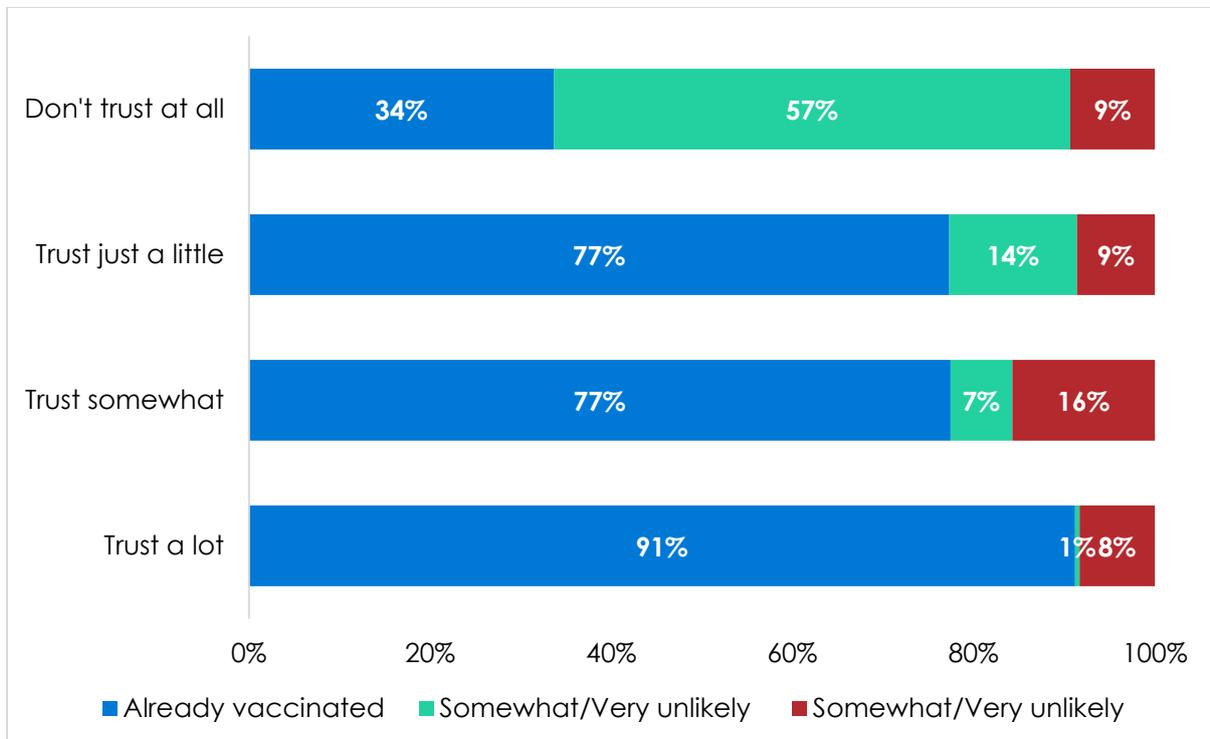
Citizens' willingness to get vaccinated against COVID-19 is strongly associated with their trust in the government's ability to ensure the safety of the vaccine. Citizens who trust the government “a lot” to ensure vaccine safety are almost three times as likely to be vaccinated as those who express no trust at all (91% vs. 34%) (Figure 8).

Figure 7: Trust government to ensure vaccine safety? | Zimbabwe | 2022



Respondents were asked: How much do you trust the government to ensure that any vaccine for COVID-19 that is developed or offered to Zimbabwean citizens is safe before it is used in this country?

Figure 8: Likelihood of trying to get vaccinated | by trust in government to ensure vaccine safety | Zimbabwe | 2022



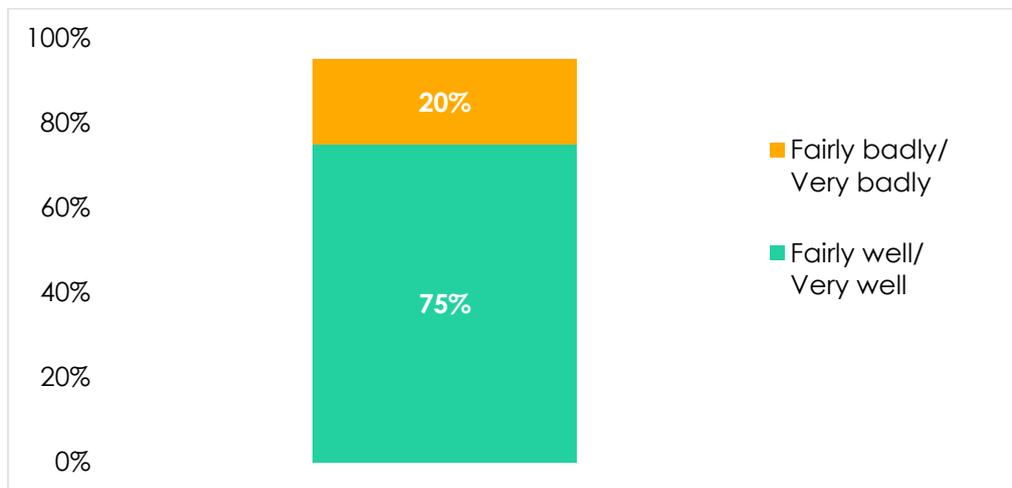
Respondents were asked:
 If a vaccine for COVID-19 is available, how likely are you to try to get vaccinated?
 How much do you trust the government to ensure that any vaccine for COVID-19 that is developed or offered to Zimbabwean citizens is safe before it is used in this country?

Government response to COVID-19

Three-quarters (75%) of Zimbabweans describe the government's overall performance in managing the response to the COVID-19 pandemic as "fairly" or "very" good, while 20% say it has done a poor job (Figure 9).

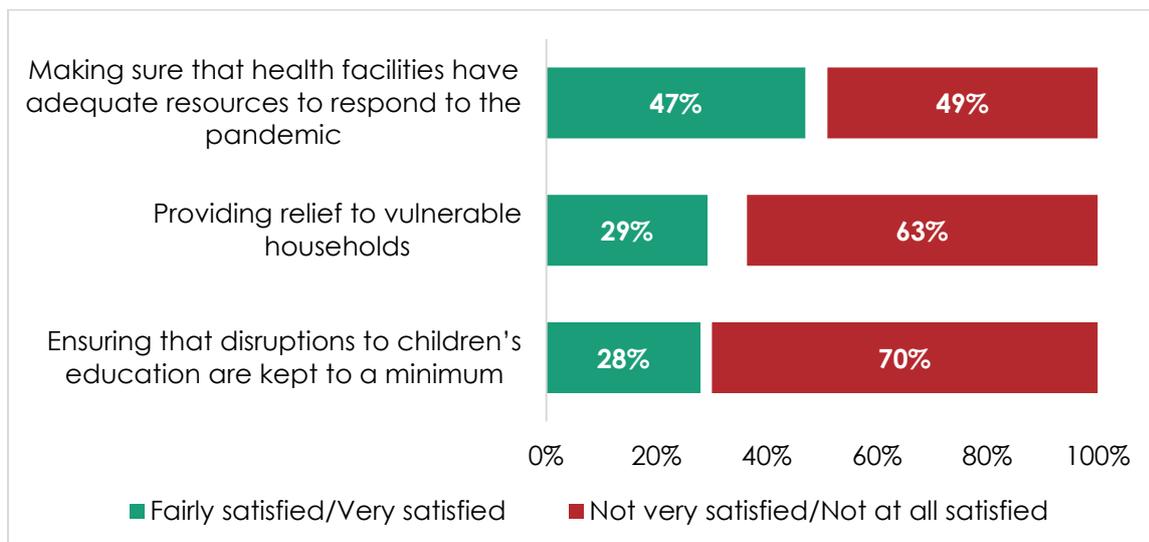
On specific aspects of the COVID-19 response, however, assessments are much less positive (Figure 10). Majorities say they are "not very satisfied" or "not at all satisfied" with the government's efforts to ensure that disruptions to children's education are held to a minimum (70%) and to provide relief to vulnerable households (63%). Views are about evenly divided on how well the government has ensured that health facilities have adequate resources to respond to the pandemic.

Figure 9: Government response to COVID-19 | Zimbabwe | 2022



Respondents were asked: How well or badly would you say the current government has managed the response to the COVID-19 pandemic?

Figure 10: Satisfaction with government's response to aspects of the pandemic | Zimbabwe | 2022



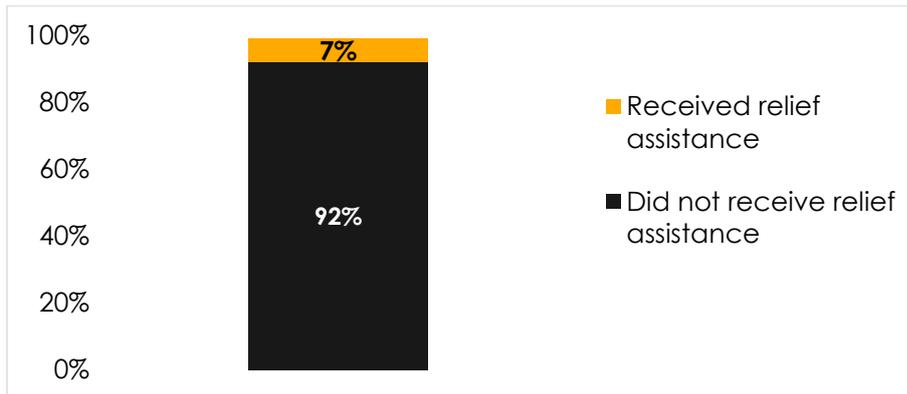
Respondents were asked: How satisfied or dissatisfied are you with the government's response to COVID-19 in the following areas?

COVID-19 relief assistance

Fewer than one in 10 Zimbabweans (7%) report that their household received COVID-19 relief assistance from the government, while the overwhelming majority (92%) say they did not (Figure 11).

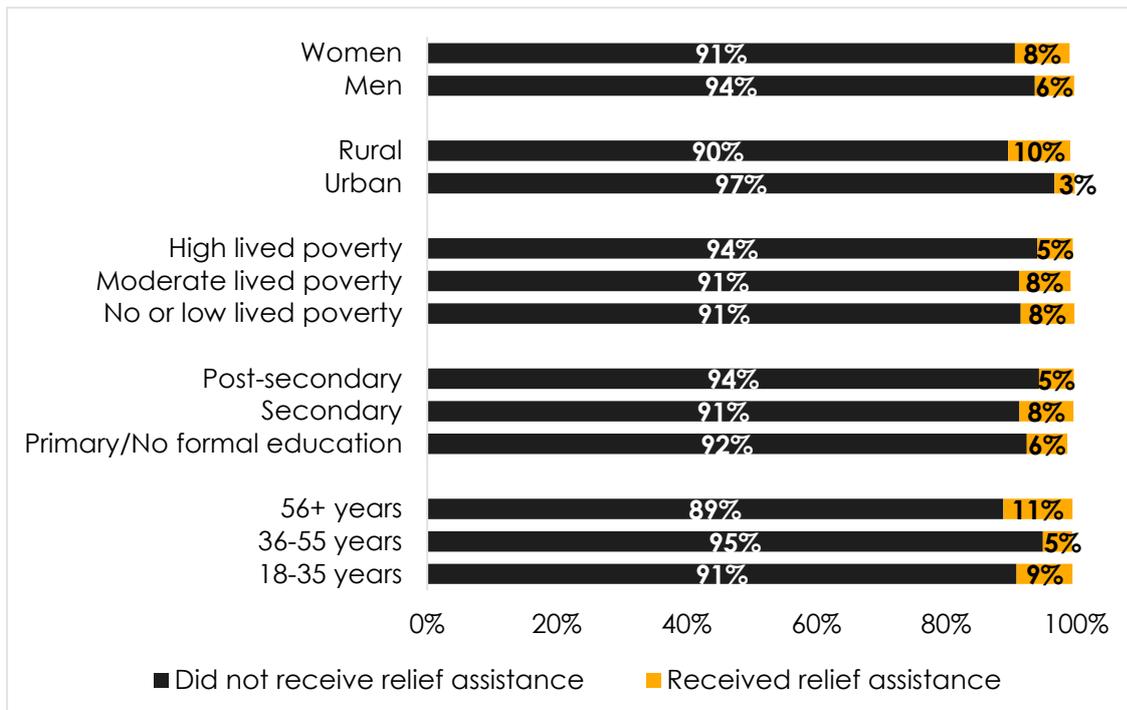
Urban households are less likely to report benefiting from government assistance than those in rural areas (3% vs. 10%) (Figure 12).

Figure 11: Received COVID-19 relief assistance | Zimbabwe | 2022



Respondents were asked: *Since the start of the COVID-19 pandemic, have you or your household received any assistance from government, like food, cash payments, relief from bill payments, or other assistance that you were not normally receiving before the pandemic?*

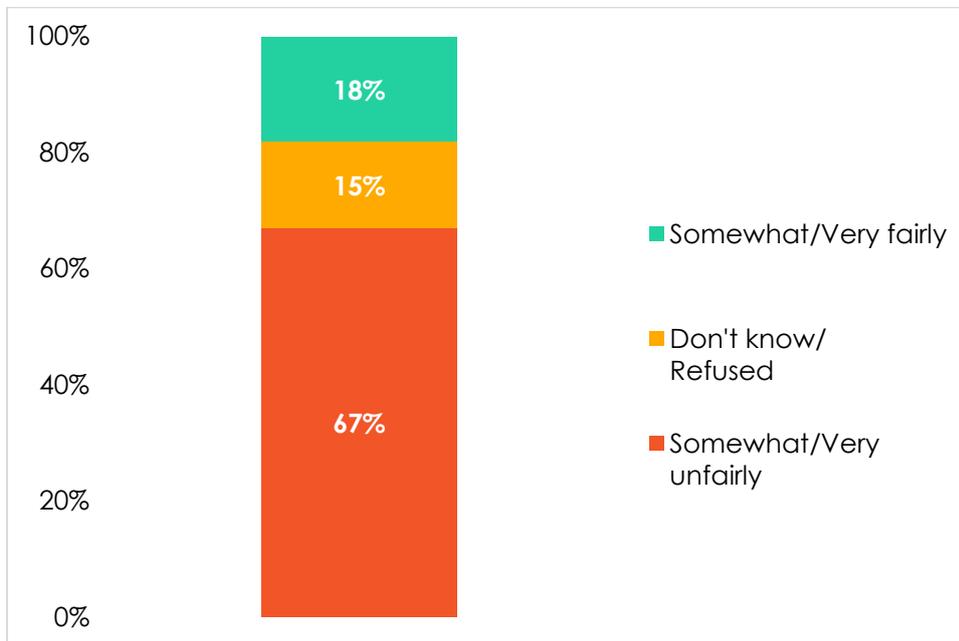
Figure 12: Received COVID-19 relief assistance | by demographic group | Zimbabwe | 2022



Respondents were asked: *Since the start of the COVID-19 pandemic, have you or your household received any assistance from government, like food, cash payments, relief from bill payments, or other assistance that you were not normally receiving before the pandemic?*

Two-thirds (67%) of citizens say that COVID-19 relief assistance was distributed “somewhat unfairly” or “very unfairly,” while just 18% say the distribution was fair (Figure 13).

Figure 13: Was COVID-19 relief assistance distributed fairly? | Zimbabwe | 2022

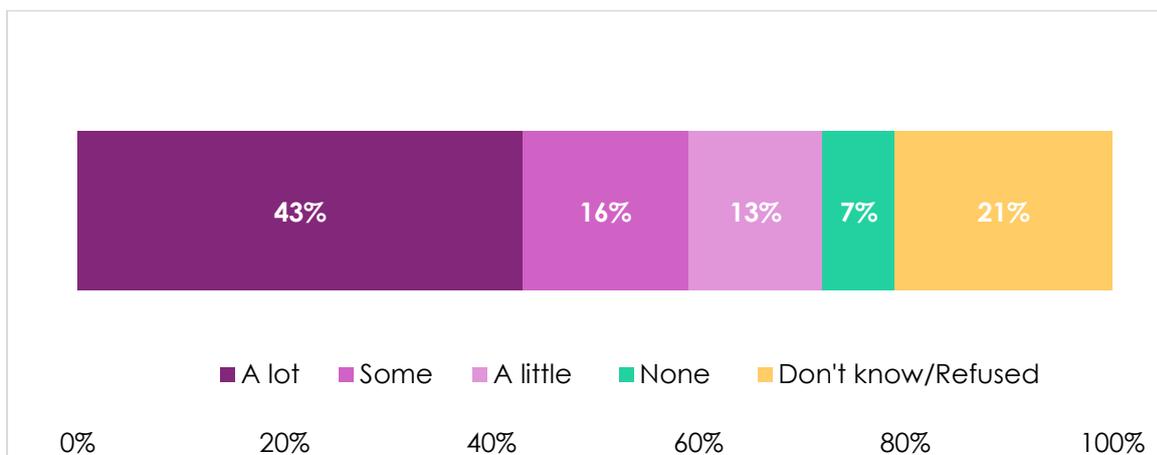


Respondents were asked: Do you think that the distribution of government support to people during the COVID-19 pandemic, for example through food packages or cash payments, has been fair or unfair?

Corruption related to COVID-19

In addition to expressing significant dissatisfaction with government relief assistance, six in 10 Zimbabweans say they believe that “a lot” (43%) or “some” (16%) of the resources intended for the COVID-19 response were lost to corruption. Only 7% think that none of these resources were embezzled (Figure 14).

Figure 14: Perceived COVID-19-related corruption | Zimbabwe | 2022



Respondents were asked: Considering all of the funds and resources that were available to the government for combating and responding to the COVID-19 pandemic, how much do you think was lost or stolen due to corruption?

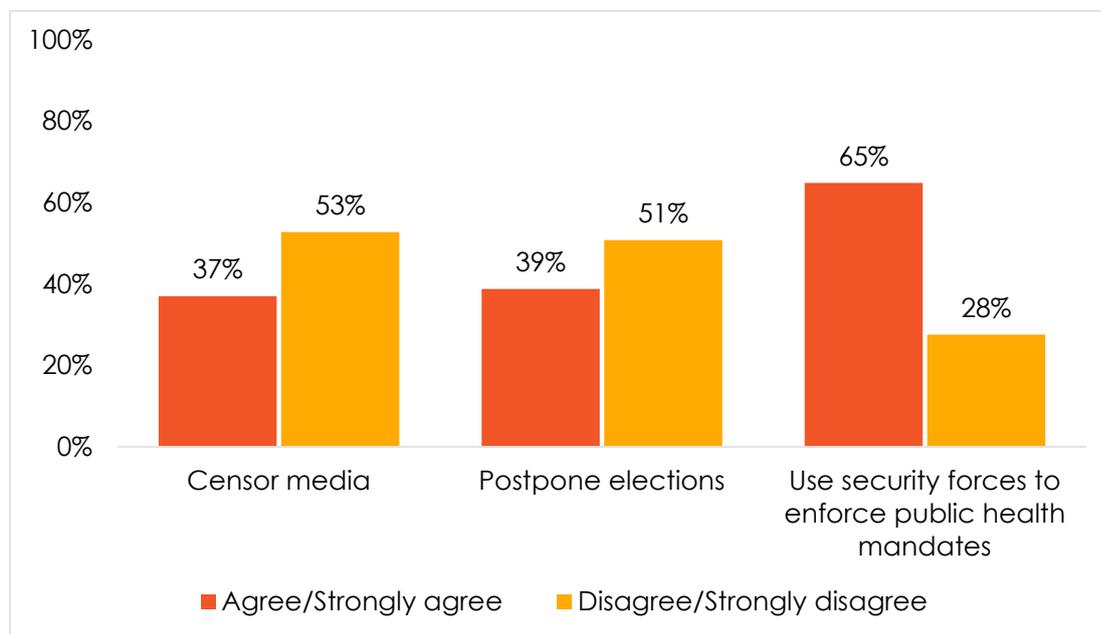
Limit democratic freedoms during a pandemic?

Lockdowns and other pandemic-related restrictions in some countries have raised questions about the extent to which citizens are willing to forego certain freedoms, even temporarily, to protect public health.

In Zimbabwe, almost two-thirds (65%) of citizens “agree” or “strongly agree” that it is justified for the government to use the armed forces or the police to enforce public health mandates during an emergency like the pandemic (Figure 15).

But slim majorities “disagree” or “strongly disagree” with censoring media reporting (53%) and postponing elections (51%) as justified steps during a health emergency.

Figure 15: Limit democratic freedoms during a public health emergency?
 | Zimbabwe | 2022



Respondents were asked: When the country is facing a public health emergency like the COVID-19 pandemic, do you agree or disagree that it is justified for the government to temporarily limit democracy or democratic freedoms by taking the following measures:

Censoring media reporting?

Using the police and security forces to enforce public health mandates like restrictions on public gatherings or wearing face masks?

Postponing elections?

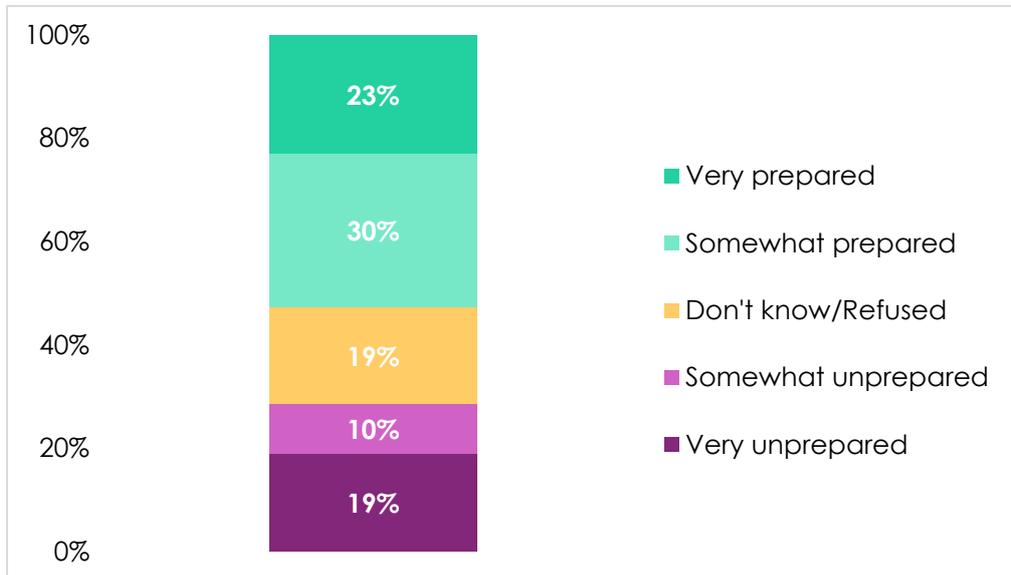
Looking ahead

After experiencing the COVID-19 pandemic, how prepared will the Zimbabwean government be to deal with future public health emergencies?

Slightly more than half of citizens believe that the government will be “somewhat prepared” (30%) or “very prepared” (23%) for the next public health crisis. About three in 10 (29%) think their government will not be ready (Figure 16).

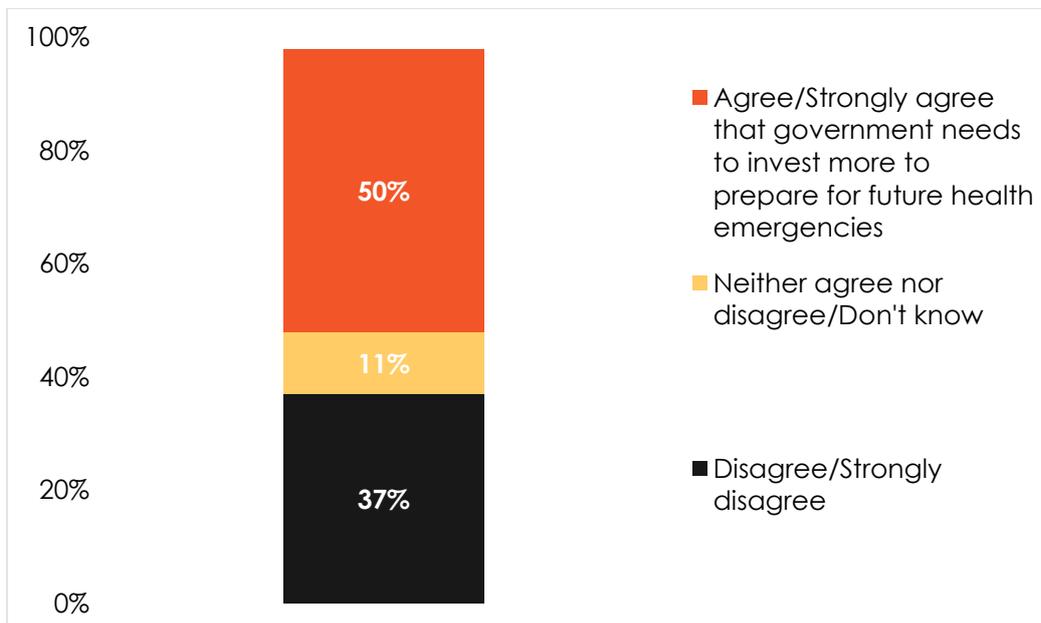
In line with these concerns, half (50%) of Zimbabweans say the government needs to invest more in preparing for future public health emergencies, even if it means that fewer resources are available for other health services. More than one-third (37%) disagree (Figure 17).

Figure 16: Preparedness for future health emergencies | Zimbabwe | 2022



Respondents were asked: After experiencing the COVID-19 pandemic in Zimbabwe, how prepared or unprepared do you think the government will be to deal with future public health emergencies?

Figure 17: Invest more to prepare for future health emergencies? | Zimbabwe | 2022



Respondents were asked: Do you agree or disagree with the following statement: Our government needs to invest more of our health resources in special preparations to respond to health emergencies like COVID-19, even if it means fewer resources are available for other health services?

Conclusion

Considering COVID-19's negative impacts on the health and livelihoods of Zimbabweans, it is notable that three-fourths of citizens applaud the government's overall response to the pandemic. Moreover, concerns about the safety of COVID-19 vaccines do not appear to have undermined vaccine uptake or trust in the government's ability to ensure that vaccines are safe before they are offered to Zimbabweans.

Still, survey findings highlight areas of public concern, including dissatisfaction with the amount and fairness of pandemic-related assistance to vulnerable households, the perception of significant losses to corruption, and the damage to children's education during the pandemic.

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