

# A Contextual COVID-19 Social Distancing Monitoring Strategy for Remote Communal Settings: Insights from Biriiri Communal Lands, Zimbabwe

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## Abstract

The World Health Organisation recommended social distancing to curb the spread of the Coronavirus (COVID-19). Strict lockdown measures monitored by law enforcement agents were imposed in countries including Zimbabwe. The use of law enforcement agents and soldiers suits urban setups that have concentrated and potentially riotous populations. This paper is based on the study of the Biriiri Communal Lands in Chimanimani District, Zimbabwe. In Buriiri community, homesteads are physically distanced. However, existing social networks makes social distancing problematic in this area. People's livelihoods are connected in many ways as villagers commonly share local resources in order to survive. Even though infection and mortality figures are currently low countrywide, the deadly spread of COVID-19 threatens rural community given its strong social cohesion. A case study design was adopted. Eight (8) Village Health Workers (VHW) and five (5) village heads were randomly selected and interviewed to shed light on the level of compliance to self-distancing regulations over the lockdown period. The findings revealed that villagers collectively meet to mourn, fetch water, gather firewood and work in community gardens. In the absence of law enforcement agents, local traditional authorities affirmed the capacity to control their subjects whilst ensuring that livelihoods continue to thrive. Noted experiences with *Zunde raMambo* (chief's granary scheme), *chisi chaMambo* (chief's day of rest) and observance of taboos in rural settings showed that chiefs, headmen and village heads have the capacity to regulate the daily operations of their subjects in rural settings. The paper recommends the adoption of a cultural framework that utilises traditional governance to facilitate social distancing without compromising the livelihoods of people in remote rural settings.

**Key words:** Coronavirus, rural livelihoods, traditional governance, social distance



## Introduction

Coronavirus (COVID-19) is a deadly pandemic that has infected millions of people and killed many all over the world. It is a respiratory illness caused by a virus that was first recognised at the end of 2019 (Food and Agricultural Organisation [FAO], 2020). The disease is transmitted by droplets, aerosol and oral-fecal routes through social contact networks (Zhao, 2020). It is known to have originated from South China's Seafood Market in Wuhan back in 2019 (Anjorin, 2020; Singh and Adhikari, 2020; Milne et al., 2020). Later, it quickly spread to other countries such that the World Health Organisation (WHO) declared it a pandemic on the 11<sup>th</sup> of March 2020 (Human Rights Watch, 2020).

To date, the COVID-19 pandemic has affected countries all over the world irrespective of their economic and political backgrounds (Miller et al., 2020; UNECA, 2020). There is a danger that governments may divert their resources to cater for COVID-19 patients and therefore give room to other diseases such as HIV-AIDS, Tuberculosis and Malaria to kill people in large numbers (Miller et al., 2020; Adhikari, 2020). This is of particular concern especially in those countries where risks of such diseases still exist due to the relatively low development capacity of their health systems.

With no ready cure for COVID-19 in place (Milne et al., 2020; Singh and Adhikari, 2020; Zhao, 2020), countries all over the world imposed stringent lockdown measures to combat rapid spread of the disease. Lockdown measures were meant to minimise human contact since epidemics are generally dependent on social network connectivity and time (Zhao, 2020). Thus, social distancing was announced by the World Health Organisation as the best way to contain the rapid spread of the pandemic (Miller et al., 2020; Zhao, 2020). In its strict sense, social distancing implies that one must avoid close contact with people who are healthy. Those that are sick can help to halt the spread of COVID-19 by socially distancing themselves (Milne et al., 2020). In turn, those who are healthy also prevent themselves from getting infected with the disease.

When health scientists widely claimed that the COVID-19 pandemic brought more deadly catastrophes than other pandemics such as Ebola, HIV-AIDS and malaria (UNECA, 2020), it stimulated fear among many people, including the business community. With projection for extended periods of business closures (Anjorin, 2020), commodity prices soared. People moved out to purchase basic commodities while others fought to pursue their routine livelihood practices. Consequently, a lot of panic and unrest ensued in many countries. This development relapsed the lockdown and social distancing initiatives in many countries. In response, governments in affected countries mobilised law enforcement agents to force the public to adhere to social distancing measures.



The strict imposition of lockdown measures crippled socio-economic systems all over the world (Anjorin, 2020; Zhao, 2020). Livelihoods became diminished, giving rise to shrinking food supply chains (FAO, 2020). Consequently, many people lost their jobs while others have had their incomes cut due to company closures. Livelihoods have been impaired, thus fuelling massive food shortages. Given the serious threats of a constricted economic growth (UNECA, 2020), many countries all over the world have placed greater emphasis on supporting businesses during and after the COVID-19 scourge. Several interventionist policies were put in place by, for instance, the United States of America, South Africa and several other countries around the world (Khambule, 2020; UNECA, 2020).

The World Health Organisation affirmed that countries in the less economically developed world, particularly Africa, are heavily threatened with widespread infections and rampant deaths if no adequate preparatory measures are put in place to deal with the deadly pandemic (FAO, 2020; Miller et al., 2020). With the weakest health systems than anywhere in the world, the African continent has a deplorable average of 1.8 hospital beds per 1000 people (UNECA, 2020). To combat the deadly COVID-19 pandemic, the continent is expected to seriously work towards stocking its health systems with adequate and appropriate medical resources. The continent's health systems by far lack the required intensive care standards to contain the COVID-19 pandemic (Mackworth-Young et al., 2020). There is a heavy reliance on imported pharmaceutical and medical products (UNECA, 2020), which may not be immediately available.

Zimbabwe is one of southern African countries with a weak economic system that renders the majority of the people highly vulnerable to COVID-19 infection. The country has a total population of 13 572 560 persons, with rural areas carrying 51% of the country's population (ZIMSTAT, 2017). A nationwide lockdown was declared on 30th March 2020 (Mackworth-Young, 2020). This followed a government gazette out of which Statutory Instrument 83 of 2020 on Public Health (COVID-19 Prevention, Containment and Treatment) (National Lockdown) Order 2020 was unveiled. Part II section 4 (i) of SI 83 of 2020 compels individuals to remain confined in their homes over the lockdown period. It adds that not more than one person per household shall be permitted to leave home for any stated purpose (GoZ, 2020). Exceptions to the regulations are essential services necessary for the containment of the pandemic (Mackworth-Young, 2020). The country's lockdown statutes are in line with the World Health Organisation's (WHO) call to suppress a rapid spread of the COVID-19 pandemic.

Since COVID-19 became a crisis, greater concern has often been of economic recession and employees who lost jobs due to business closures (Aslam, 2020; FAO, 2020; UNECA, 2020). There is limited down-scale policy consideration for silent but highly essential environmental incomes and health systems of remote rural villagers. In Zimbabwe, rural



areas generally lack frequent patrols by law enforcement agents despite them being home to the majority of the country's population (ZIMSTAT, 2017). Nevertheless, to impose some form of social distancing on rural communities based on a purely conventional standpoint tends to brew antagonism between the local people and law enforcement agents.

Accordingly, this paper prioritises remote rural settings that remained side-lined in terms of COVID-19 social distancing enforcement, with a view to influence policy. It appraises the functionality of local traditional authorities as key governance players capable of organising effective social distancing in rural set ups. Given the nature of livelihoods and local cultural patterns, the paper advocates for an Afrocentric approach to the implementation of social distancing in remote rural settings. Afrocentrism is a philosophical view contenting that people of African origin better understand matters pertaining to their own development (Chawane, 2000); therefore, these people should be regarded as valuable partners in the development mainstream (Chikwuokolo, 2017). In the case of COVID-19, local people, with the guidance of their traditional leadership, should participate in designing social distancing measures that help to safeguard their fragile livelihoods.

In order to desist from professing disregard for orthodox law enforcement structures already in place, the paper advocates for a hybrid governance system that puts traditional leaders at the forefront but remaining buttressed by conventional law enforcement systems, including other external players with valuable interests in the noxious COVID-19 pandemic. Therefore, the key objectives of this paper are to:

- ❖ expose the level of observance and respect for social distancing regulations in Biriiri;
- ❖ account for the laxity in adherence to social distancing in Biriiri; and
- ❖ formulate a rural area-based social distancing monitoring framework using insights and reflections from Biriiri Communal Lands.

## Methodology

### Description of the Study Area

The study was done in Biriiri Communal Lands, Zimbabwe. It falls under Chimanimani Rural District Council in the south-eastern part of the country. Biriiri Communal Lands lie close to the country's border with Mozambique and South Africa. There are very remote village settings such as Nyamusundu, Dzvore, Tomeke, Dembeza, Mauyangei, Mashumbiro, Chirongwe and Nyamunhamba. These are situated outside the partly modernised Biriiri Rural Service Centre, approximately 117 kilometres south of Mutare City. Narrow and



hardly manoeuvrable roads connect the villages with Biriiri Rural Service Centre. Villagers travel over long distances on foot to obtain basic goods and services from this small rural business centre. They also rely on Biriiri Rural Health Centre for health services.

The village settings in Biriiri Communal Lands are traditionally governed by Chief Muusha, Headman Saurombe and several village heads. Each of these have functional traditional courts that are recognised by the District Administrator's office at Chimanmani Rural District Council. The local people belong to the Ndaou sub-group, which is part of the broader Shona people of Zimbabwe. Due to their Ndaou culture, the people are generally discreet, with a deep sense of local connectedness amongst themselves. Their range of livelihoods is quite diverse. The majority are smallholder farmers who practise peasant forms of production. These include small-scale gardening, livestock rearing, firewood fetching and trading of various commodities.

## **Methods**

A qualitative methodology grounded in a case study design was adopted. An inductive approach was utilised, and it involved the researcher's immersion in the cultural contexts and social interactions of the people (Armstrong, 2010) in the remote villages of Biriiri. This was done in order to facilitate an in-depth understanding of villagers' day-to-day choices and practices. The study utilised a few purposively selected Village Health Workers and village heads with aggregate knowledge of villagers' level of social distancing adherence in Biriiri. Accordingly, we selected and interviewed ten (10) Village Health Workers and eight (8) village heads to shed light on the level of compliance to self-distancing regulations over the lockdown period. The sentiments solicited from traditional leaders and Village Health Workers were complemented by views from thirty (30) randomly selected village representatives in the area. The latter representatives were identified at public gathering places such as community nutrition gardens and water fetching points which never closed during the lockdown period. As interviews were being conducted, researcher observations were also carried out in order to corroborate the specified responses.

Better still, the COVID-19 restrictions on movement and interaction did not compromise the study outcomes. Village Health Workers are part of the essential service providers who were exempted from lockdown restrictions. Traditional courts, administered by chiefs, headmen and village heads, were also not closed during the COVID-19 lockdown. Accordingly, the health workers and traditional leaders remained openly connected to the public, hence, they formed key information hubs regarding social distancing adherence matters. Biriiri Rural Health Centre was used as a health information hub for all villages. We relied on health personnel at the health centre to confirm reported insights regarding the COVID-19 situation in Biriiri. Findings were analysed using thematic content analysis



(TCA). The latter involved a synthesis of the diverse qualitative views that were collected. These were compressed into narrow themes (Saunders et al., 2015) that enabled insights to be drawn on the laxity of social distancing and its related causes. While interviews were conducted in Shona, the few selected responses were translated to English and presented as part of the key field narratives.

## Findings

Given the broad diversity of qualitative data on the COVID-19 lockdown and social distancing perspectives, we synthesised the responses and narrowed down our findings to focus on responses that specifically addressed the following key aspects: (i) the level of observance and respect for social distancing regulations across villages in Biriiri; (ii) reasons behind the laxity in the observance of social distancing and (iii) insights and reflections leading to the formulation of a contextual social distancing monitoring framework for remote rural settings.

The findings revealed that very remote village settings such as Nyamusundu, Dembeza, Tomeke, Mauyangei, Dzvore, Mashumbiro, Chirongwe and Nyamunhamba comprise homesteads that are physically distanced. At first sight, the sparse nature of homesteads creates a false impression of strong social distancing. However, empirical reflections from the study indisputably revealed that indeed people in such remote rural settings have strong socio-economic acquaintances that eliminate the misconception of automatic social distancing due to the physically distanced nature of the homesteads. After a lockdown was declared on the 29<sup>th</sup> of March in Zimbabwe, scores of villagers continued to pursue their routine socio-economic operations.

The leadership also expressed an awareness of the track record of the activities that their subjects engage in. Village heads in particular are directly involved in the day-to-day livelihood operations. They also have a strong influence on local people's cultural practices and their general social connectedness. All goings-on are relayed accordingly using the traditional leadership hierarchy which involves village heads, headmen and chiefs who are right at the helm of the hierarchy.

### Livelihood Practices

We noted a number of livelihood activities in the area which proved to be a challenge to social distancing measures. Ellis (2000) is of the view that a livelihood comprises assets, in the form of natural, physical, human, financial and social capital, together with the activities and the access to these, mediated by institutions and social relations that together determine the living of an individual or household. The nature of livelihoods predisposes people to multiple contact cases with each other, directly contradicting the



lockdown and social distancing thrusts. At the *Zunde raMambo* (chief's granary) project, villagers gather and work cooperatively in order to produce food stocks that are kept by the chief to sustain those families that accidentally run short of food supplies, particularly in the dry season. The *Zunde raMambo* stocks also help to cushion those households befallen by serious sickness that deters them from working in their own fields.

However, villagers rest during *Chisi chaMambo* (chief's day). The latter is observed on the first day of each month. While villagers take a break from their daily livelihood chores, they are compelled to gather at local village courts where they are addressed by their local traditional leaders on various matters. These include reminders on certain traditional regulations within the area. Due to the effective command and community influence that traditional leaders do have, the meetings are often attended in large numbers. Again, the huge gatherings in turn generally expose villagers to the threat of COVID-19 infection.

- *Water collection and use*

Rural people depend on shared water resources; hence, they meet at community boreholes and rivers where they bath and do their laundry. In Biriiri, the main sources of domestic water supply are community boreholes. Here, people meet quite often exchanging the operation of the bush pump handle. Villagers also utilise rivers for bathing and laundry purposes, thereby increasing the chances of getting in contact with each other. One senior Village Health Worker lamented the rural domestic water supply system which is not comparable to what prevails in urban settings where each household owns a tap. She added that rural women navigate through thickly wooded and winding pathways to reach distant water points. Since they walk through dangerous forests, it is an intractable challenge to separate the women for the purpose of achieving the COVID-19 social distancing objective.

- *Gardening*

There are several community nutrition garden initiatives in Biriiri. These were established by non-governmental organisations with the view of improving nutrition in the area. Community nutrition gardens are becoming an increasingly important source of food and income for poor households in rural areas (Chitongo & Magaya, 2013). Under the scheme, a common plot is fenced and subdivided into small portions allocated to individual households. Water is drawn from a common source, usually solar powered borehole, and led to a reservoir which releases it for irrigation. At Saurombe village, World Vision established a project that accommodates 42 households. Another one at Nyamutsitsi (Komora village) called Petasvitswa Nutrition Garden has 75 households. At each given moment, the villagers converge at various nutrition gardens in huge numbers, sharing water taps and several other utilities. Asked about the dangers of the spread of the novel



Coronavirus, one elderly woman who is a resident of one of the villages in Biriiri had this to say:

*We heard about Coronavirus and we know it is dangerous. Village Health Workers teach us about social distancing but we still converge here because we want to feed our families. If we catch the virus, we know we will die. At the same time, we will starve to death if we do not come here and work in order to eat.*

Nutritional gardens are also utilised by agricultural extension officers to educate small scale farmers on sustainable food production methods. The local ward councillor and traditional leaders also meet villagers at these nutritional gardens in large numbers to make their announcements. During the study, it was appalling to note that people working in these nutritional gardens lacked sanitary wear despite the fact that they converged there and exchanged various items.

- *Rotating savings and credit associations*

In rural Biriiri, saving and lending schemes are a common phenomenon. Rotating savings and credit associations play a significant role in poverty alleviation for rural communities (Mbizi & Gwangwawa, 2013). Households pool their resources in monetary and material form in order to create a community resource bank. Those members who face some household challenges can borrow money from the account and pay back with some interest determined by the association of beneficiaries. To date, some members of the community have extended this scheme to initiate chicken rearing projects. A prominent craft project called Biriiri Women's Craft was initiated in the same way. Women meet and share skills on how to make craft wares. They also raise funds as a group and allow needy members to borrow from the group.

For quite long, income saving projects have driven people into pooling their workforce, and financial and material resources. One traditional leader explained that the purpose is twofold. First, villagers pool their resources in order to raise sufficient capital to begin new and bigger projects which also give huge returns to them. Second, it helps to perpetuate the community's social cohesion. It was clearly stated that by coming together, community members create a strong form of social capital that shields them against rural poverty since they share both ideas and resources. A Village Health Worker further stated that at these cooperatives, women dialogue a lot as they share ideas. She added that those with face masks end up pulling them down to their chins in order to speak freely to their colleagues.

- *Firewood fetching*

Biriiri communities depend on wood as their principal source of energy. They use it primarily for cooking. The fetching of wood is also a livelihood practice. Villagers sell the wood to raise money to buy essential household goods and also to pay school fees for their



children. Unfortunately, good quality wood is no longer available in and around homesteads. Better quality wood is fetched over long distances from as far as Chingundu and Nyarunhenga mountains. The amount of firewood is rapidly dwindling due to overexploitation, general degradation, and overuse despite it being a renewable resource (Chazovachii et al, 2013). Due to their fear of the jungle, women and girls often move in groups of 10-20 members when they climb the mountains to fetch firewood. When interviewed on this matter, one long-serving Village Health Worker explained as follows:

*We educate women on social distancing but they do not effectively adhere to the regulations. We often meet them in groups and they insist that they can hardly isolate themselves in the jungles in which they fetch firewood. The women insist that if their spouses could accompany them to the forests then they would stop moving in large groups.*

It was confirmed that these rural women do not use personal protective equipment (PPE) as they meet and move in groups despite the current fears for COVID-19 infection.

- *Commodity trading*

Scores of traders were frequently observed roaming with commodity baskets in and across villages. We tracked the reasons for such laxity of operation despite the presence of Village Health Workers who educate and encourage members of the community to practice social distancing. They Village Health Workers widely reported that the majority of households depend on garden produce and other items to generate the much-needed family income. They mainly sell vegetables, fruits and crafts on a mobile basis. Community health workers pointed that they were making relentless efforts to encourage traders to desist from engaging in a door-to-door selling of commodities. Instead, traders were encouraged to establish commodity stalls at authorised health-approved market centres where anti-COVID-19 hygiene standards are regularly monitored.

It was also reported that some traded commodities are illegally purchased from across the border in neighbouring Mozambique and South Africa. Several informal cross-border traders frequently skip the border to and from Mozambique and South Africa without any health checks being done on the way. We probed traditional leaders on this matter. One village head had this to say:

*Such illegal cross-border movements are common here. We are even aware of the perpetrators of this black-market business. We also know of families that received returnees from South Africa and Mozambique in this COVID-19 period, but they have not reported to us or to Biriiri Rural Health Centre. It is possible to use our social networks to catch them but COVID-19 is dangerous and we do not want to risk our lives. It is scary to confront households and apprehend the offenders*



*without us having appropriate personal protective equipment in place because we do not know the cross-border returnees' health status.*

Another village head noted that traders who illegally cross borders and re-join their families do so secretly. This is because such traders are aware of the fact that traditional leaders regularly condemn such clandestine acts to the extent of convicting and charging the perpetrators with hefty fines if caught.

### **Local Cultural Practices**

Due to the broadness of the people's culture, we focused on those common cultural practices which contravene the World Health Organisation's regulations that are meant to prevent the spread of COVID-19 within communities. Furthermore, we relied on elderly traditional leaders who are the custodians of indigenous knowledge in Biriiri in order to confirm the cultural practices noted by Village Health Workers.

- *Greeting pattern*

Handshakes are a cultural norm in this remote rural setting. When people meet, a handshake expresses many reflections. It signifies peace between two different people. If two or more people shake hands for an extended period, it means they seriously missed each other and were longing to meet. It was confirmed that people withdraw the handshake practice when they intend to express their dislike of the presence of someone at a place or event. One elderly village head asserted:

*In our culture, if you want to ascertain whether you are welcome by a host family, let the people acknowledge your visit with a long handshake. To maintain social distancing when greeting or talking to visitors, particularly close relatives, is a sign of showing that they are unwelcome at a place or event.*

Such cultural practices were corroborated by observations done in various villages where people expressed their connectedness through repeated friendly handshakes.

- *Funeral gatherings*

We interviewed traditional leaders and community workers with a view to determine the level of compliance to the COVID-19 regulations on National Lockdown and Prohibition of Gatherings. Part II section 5 (i) (b) of Statutory Instrument 83 of 2020 clearly states that a funeral gathering is an exceptional case where mourners may gather but not exceeding 50 people at a time. Reports from community health workers showed that people in Biriiri communal lands paid no strict attention to this statutory regulation despite their awareness of it.

We attended funeral ceremonies in Mutakura Village in April and May 2020, the period during which the lockdown was extended in Zimbabwe due to increasing countrywide



infection cases. We observed that many mourners were unperturbed despite the government call to adhere to social distancing measures. Field evidence helped to confirm the reported 'business as usual' approach to conducting funeral proceedings as opposed to the 'new normal' that came with the COVID-19 restrictions. For instance, to give the deceased a respectful send-off, the body arrives a day before burial and is expected to spend the night in the house that the deceased used to dwell in. The body is supposed to be washed before it is finally wrapped in white cloth for burial. Many mourners attend funerals and participate in the burial procedure without the recommended personal protective equipment (PPE). When paying their condolences, mourners shake hands at a funeral, a culture locally known as *kubata maoko*. They stand in close proximity facing each other to share the grief in an emotionally connected manner. The longer the handshake, the stronger the expression of loss and sympathy by a mourner to the bereaved.

The study revealed that in these remote rural communities, the level of attendance following the death of a person reflects certain connotations. For instance, huge gatherings are of cultural significance at funerals in this remote rural area. Large gatherings are a reflection of love and concern for both the deceased and the bereaved family. Village members aged 18 years and beyond are expected to attend funerals and actively participate in all proceedings. The practice is believed to help active mourners to be equally recognised in the event of them being bereaved in future. However, the research showed that Village Health Workers were making frantic efforts to educate members of the community against such age-old traditions following the outbreak of the COVID-19 pandemic. Thus, the interviewed health workers reiterated the need to exercise a high level of consciousness and self-protection when attending funerals in the wake of COVID-19.

After collecting records of community livelihood and cultural practices, we interrogated some traditional leaders on their capacity to sanction large group operations, an option that works against government statutes on social distancing in the wake of COVID-19. Surprisingly, one traditional leader openly explained:

*We can easily cut down on the number of people who undertake certain livelihood practices and functions at each given time and place. This is not new because during the liberation war, we used to liaise with our people and form 'zvkwata' (cell groups). Each cell group was assigned a trusted and accountable leader. We currently do this at zunde raMambo and community garden projects to make sure that people work separately and seriously on different days of the week. Our challenge with this COVID-19 is that we received neither a remuneration package nor appropriate personal protective equipment from the government for the additional responsibility. Otherwise we can systematise locals into socially*



*secluded cell groups to ensure that only immediate members of the community meet and work together.*

These views were corroborated by several interviewed Village Health Workers. They echoed that in previous health-related programmes, traditional leaders outstandingly supported them by harmonising the initiatives as long as they were remunerated for their extended effort. Specific cases include those of families from the apostolic sect who used to refuse to be immunised against killer diseases. After referring the matter to traditional leaders, the families finally submitted after they were tried and given an ultimatum to have their babies immunised.

## **Summary of Gaps in Health and Sanitation**

COVID-19 is a deadly viral disease that should be scientifically perceived. Unfortunately, there is an incongruent response in Biriiri by the general public when it comes to the health and sanitation regulations announced by health personnel. Villagers declined to take heed to the social distancing call, thus rendering themselves vulnerable to infection. Regular handwashing is not being enforced. At some common meeting places, homesteads and even Biriiri Rural Health Centre, there are handwashing facilities. Water is available in containers, but many people by-pass its use. In other circumstances, handwashing water is available but not accompanied by any sanitising detergents for effective handwashing. Apparently, there is a lack of a conceptual framework that situates the socio-economic operations of the local people in line with recommended health guidelines meant to contain the spread of COVID-19.

## **Proposed Governance Framework for Social Distancing in Rural Settings**

We drew insights from narratives, experiences and perceptions of health workers and traditional leaders in Biriiri to develop a contextual COVID-19 governance framework for the effective implementation of social distancing. The framework places local traditional authorities at the centre of the implementation of social distancing implementation and other regulations meant to curb the spread of COVID-19. Using their rich knowledge of their subjects, traditional leaders and the leadership council (*dare raMambo*) have the capacity to identify key livelihoods within individual communities. With the help of villagers, small family cell groups are formed. The basis for the founding of each cell group is the closeness, strong social cohesion and familiarity amongst families in their neighbourhoods. To have fixed family circuits reduces chances of people mingling indiscriminately.



Village Health Workers work closely with each cell group at a time. Working closely with Biriiri Rural Health Centre, Village Health Workers facilitate the provision of personal protective equipment for chiefs, headmen and all village heads. The District Administrator’s office at Chimanimani Rural District Council then facilitates the mobilisation of remuneration for the traditional leaders in order to motivate them to steer the social distancing cause. Fashioned like those of the liberation war times, cell groups are small, hence, newcomers such as cross-border returnees can be easily identified. Likewise, they are reported to Village Health Workers for testing and possible screening. Traditional leaders then reprimand those who resist the health-check protocol and only engage the Zimbabwe Republic Police (ZRP) as their last resort, that is, if they face absolutely defiant offenders. Figure 1 illustrates the proposed governance framework which prioritises traditional leaders in the COVID-19 social distancing implementation cause.

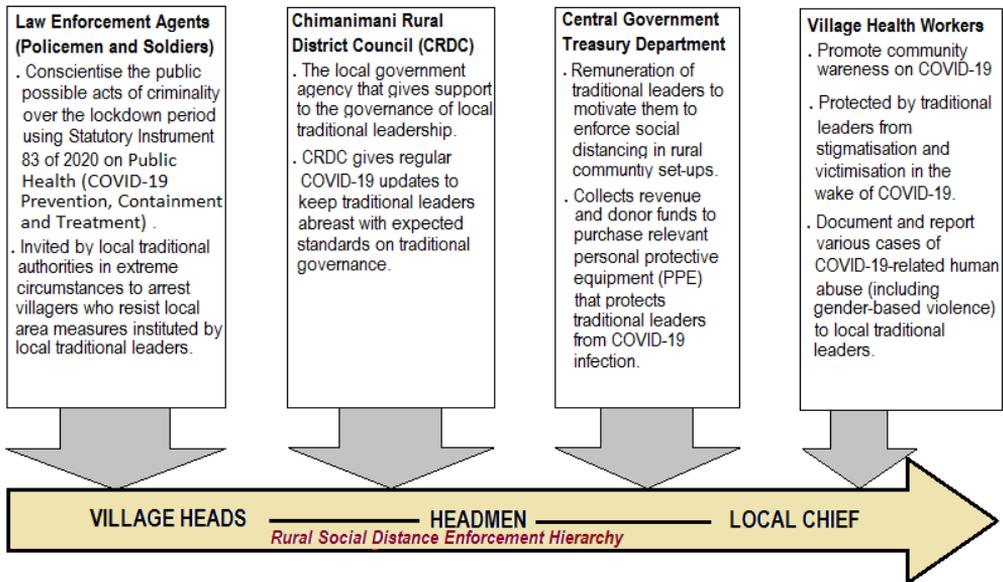


Figure 1: Conceptual social distancing monitoring framework for remote rural settings [Source: Authors]

This Afrocentric social distance monitoring framework has several advantages.

- By allowing small family circuit groups, the framework tolerates the livelihoods and strong cultural ties that rural dwellers do have in remote rural settings.



- It closes the law enforcement gap that exists when the police infrequently visit remote rural settings. Traditional leaders and their council members are ever-present and therefore take stock of all offenders within communities.
- It is friendly to communities because members participate in the grouping process based on decisions that allow their livelihoods to continue thriving. Community members know each other, including their livelihood choices and practices. Given room to organise themselves, they can do so in a manner that helps to contain the spread of the COVID-19 pandemic.
- When people are led by local traditional authorities, they are more likely to adhere to designated regulations than they would in the case of external law enforcement agencies.
- Those who contravene social distancing regulations hardly remain unnoticed as they do in the case of erratically available law enforcement agents such as the police and soldiers.
- With the inclusion of remuneration and appropriate personal protective equipment, traditional leaders are motivated to perform more than they currently do.

## Discussion

The study's findings dispelled the illusive impression that remote rural settings are already socially distanced and therefore not highly in need of conventional law enforcement agents to impose social distancing. Senior Village Health Workers who are also long-time residents of Biriiri argued that it is wrong to assume that since the remote rural communities are physically distanced, then they are unlikely to become COVID-19 hot spots. Cases of illegal returnees from South Africa and Mozambique whose health status remains unknown also help in dismissing these assumptions. Most of the COVID-19-triggered illegal migrations reportedly peaked after February 2020. Apparently, this is the period during which countries in the Southern African region effected strict screening and border closures (Anjorin, 2020) as they feared the spiralling of COVID-19 infection cases.

The lockdown measures declared in Zimbabwe failed to draw a balance between disease containment and livelihood sustenance, particularly for the remote rural settings. It is difficult for rural people in remote areas, who grossly depend on smallholder-based livelihoods, to accumulate sufficient financial and material savings capable of sustaining them over a protracted period. In line with this view, Miller et al. (2020) also argue that there are complex and difficult trade-offs that policy-makers face in their quest to respond to health and economic crises triggered by the Covid-19 pandemic.



The nature of rural people's livelihoods such as firewood fetching, and smallholder farming generally force people to pool their labour at both family and community level. In turn, this makes it hard for them to effectively conform to the social distancing call. In terms of their culture, rural people are bound by a myriad of practices that make members of the community enjoy a sense of belongingness (Musarandega et al., 2018). They are inseparably bound by close acquaintances that are unlike those of independent urban dwellers. Thus, the comprehensive social distancing that was imposed countrywide is more appropriate in a fully stocked economy where people can afford to be under lockdown for an extended period. After all, Human Rights Watch (2020) alludes that when lockdowns are enacted, respective governments are mandated to ensure that all people have access to clean water, food and health care support.

Villagers' failure to observe social distancing in the Biriiri Communal Lands is something that is highly expected in a situation where people's socio-economic backgrounds are not well understood. To apply absolutely conventional approaches of managing the COVID-19 pandemic is typically top-down in its nature. This applies when there is heavy reliance on the identification of priorities by experts that are external to communities (Loewenson, 2000). Findings from the study showed that it is quite critical to include communities in the quest to fight disease infections. This falls in line with Mackworth-Young et al., (2020) whose study in Chitungwiza reflects the importance of empowering communities with health knowledge and related decision-making.

Zimbabwe has been experiencing epochs of serious political and socio-economic downturn which caused widespread civil disgruntlement and political unrest (Mwananyanda, 2019). In response, the government has often unleashed its heavy-handed policemen and soldiers to conquer civil unrest (Mugari and Obioha, 2018; Mwananyanda, 2019; Simpson and Kronke, 2019). Government dependence on ruthless tactics employed by some police officers and soldiers promoted a general sense of antagonism between law enforcement agents and the public in many communities around the country (Makumbe, 2010; Mwananyanda, 2019; Simpson and Kronke, 2019). When a negative relationship develops between law enforcement agents and the civil society, it becomes difficult for their services to be welcome even in critical cases such as the COVID-19 pandemic. They are usually viewed as perpetrators of brutality despite their need to ensure effective social distancing within communities.

The findings showed that people in Biriiri, especially women, flouted social distancing rules because of the associated gender bias. Women have more domestic responsibilities than men (Human Rights Watch, 2020). In rural areas, they are burdened with the household duty to fetch firewood and water. Like in many other communal lands, these resources are located far from homes such that it becomes a threat for a woman to be isolated in remote



environments when fetching these resources. This confirms Human Rights Watch's (2020) assertion that the outbreak of the COVID-19 pandemic brought with it some gendered impacts. Under such circumstances, it is critical to realign rural governance structures in a bid to eradicate gender imbalance amid COVID-19.

Despite the complexity of livelihoods and cultural networks in Biriiri, social distancing measures should still be observed. To date, this has been the best weapon to fight COVID-19 in many countries the world over (Miller et al., 2020). This is because the pandemic knows no boundary and has proved to be a deadly infection (Anjorin, 2020; UNECA, 2020). Accordingly, the tightening of public health measures helps to decrease the total number of one's close contacts. Zhao (2020) avers that this results in higher levels of public separation, thereby inhibiting disease transmission. In addition, Anjorin (2020) advocates for the effecting of 5Ps to fight COVID-19; these are, prevention, preparedness, public health, political leadership, and the people.

The fragility of the health delivery system in remote rural Biriiri is similar to what prevails in many other communal settings in Zimbabwe (GoZ, 2010; ZIMSTAT, 2017) and Africa in general (ECA, 2019). With such high levels of vulnerability, to effect social distancing is done at a lower cost (Aslam, 2020) and is a sure way of preventing the spread of COVID-19. Milne et al. (2020) used infection and mortality data from China and Australia to prove that, indeed, social distancing significantly reduces disease infection rates. Likewise, Aslam (2020) avers that during the 1918 influenza pandemic, social distancing was not officially effected but people took "reactive social distancing measures" that made it possible to escape the projected fatalities due to the disease outbreak.

The fear that the Coronavirus might hit remote rural settings and disrupt their fragile livelihoods is highly present. After all, up to 90% of the labour force in many African countries is employed in the informal sector (AU, 2020; UNECA, 2020). Zimbabwe, with the greater proportion of its population situated in rural areas (ZIMSTAT, 2017), is also seriously affected, hence, the need for appropriate rural governance. FAO (2020) already hinted that a check on food supply chains in many countries means that desperate people are likely to cross regional and international boundaries in a bid to survive. Given the routine out-flux and return of job seekers, the Biriiri Communal Lands are highly exposed to COVID-19 outbreak. South Africa, which is close to Zimbabwe, happens to be the country with the highest number of COVID-19 cases and deaths on the African continent (Anjorin, 2020). Therefore, the area risks experiencing cases of the disease being brought by returning migrants from South Africa.

Some of measures put in place by Village Health Workers, such as regular handwashing, are in line with WHO standards of containing the deadly pandemic (UNECA, 2020; Anjorin; 2020). Village health workers (VHW) are a critical health asset to rural communities. They



form the pivot of community health care service provision, with the potential to help Zimbabwe meet its health-related development goals (GoZ, 2010). Since they live within their communities of operation, they are essential players who understand better health care and livelihood needs of their communities. This is in line with the mandate of the United Nations Committee on Economic, Social and Cultural Rights which seeks to ensure that appropriate and affordable healthcare is provided to all people, including marginalised groups, without discrimination (Human Rights Watch, 2020).

To develop a contextual framework was highly necessary because the initiative is in line with the United Nations (UN) Global COVID-19 Humanitarian Response Plan (FAO, 2020). The latter advocates for a review of the potential impacts of the pandemic as well to mastermind resilience programming that safeguards the livelihoods of vulnerable people. Singh and Adhikari (2020) also studied community settings in India and advocated for the implementation of social distancing based on peculiar characteristics that individual communities have, including social contact structures. This is critical because to impose social distancing restrictions without careful consideration may result in negative effects such as damaging the psychological mindset of a community (Aslam, 2020) and provoking panic buying which may result in crowding of people at shops (FAO, 2020).

To put traditional leaders at the forefront of law enforcement in remote rural settings also helps to protect Village Health Workers who are critically needed to deal with the COVID-19 pandemic. Health workers have been victimised by unscrupulous members of the community in some parts of the world (Human Rights Watch, 2020). Therefore, given the erratic presence of police and soldiers in rural settings, traditional leaders help to close the law enforcement gap by helping in pushing the social distancing agenda. In addition, many countries closed their borders to prevent the spread of COVID-19 (Milne et al., 2020). The move succeeded in official border posts. It is difficult to monitor the movement of people across the border in remote rural areas situated close to borders. In the absence of conventional cross-border control mechanisms, traditional leaders play a crucial role by identifying cross border culprits in remote near-border communities.

Traditional leadership becomes an alternative law enforcement institution for remote rural settings. Chiefs, headmen and village heads are the immediate custodians of rural cultural systems (Musarandega et al., 2018). They have existed for a long time and have always been responsible for the administration of rural community settings (Chigwata, 2016). Despite the erosion of their powers due to political interference (Makumbe, 2010; Chigwata, 2016), traditional leadership institutions continue to bear reasonable authority quite appropriate for the organisation and governance of rural livelihoods. This has been noted in their capacity to command and control villagers on matters pertaining to the *Zunde raMambo* scheme and *Chisi chaMambo*. There is a projected likelihood of people



shelving their political grievances and differences with them as they focus on the common COVID-19 cause (AU, 2020).

Whilst it was critical to develop a contextual framework based on the Afrocentric perspective, this paper does not reject other perspectives in the quest to fight the COVID-19 pandemic in remote rural settings. It still accommodates other capacities external to the remote rural communities such as conventional law enforcement agents, health personnel and non-governmental organisations. After all, Afrocentrism does not mean outright rejection of Eurocentric perspectives (Chiwane, 2000; Chikwuokolo, 2017). Diverse perspectives were still incorporated as buttresses in the COVID-19 containment agenda. This is why law enforcement agents should support traditional leaders to subdue criminal acts in the community.

Despite the recorded cases of harassment by police officers, their presence in communities helps to protect citizens in the country (Mugari and Obioha, 2018; Simpson and Kronke, 2019). Therefore, the study findings are in line with the norm that traditional leaders have always sought assistance from the Zimbabwe Republic Police to quell crimes in rural communities. What is critical is to ensure that the law is judiciously instituted to all people irrespective of their backgrounds and settings.

## **Conclusion and Recommendations**

The Lockdown execution by law enforcement agents was better effected in urban settings because they have concentrated and well planned settlements. Remote rural settings are already physically distanced, hence did not experience strict law enforcement on social distancing. However, remote rural dwellers remain vulnerable to the spread of COVID-19 given the acquainted nature of their livelihoods and cultural practices. Given the erratic presence of government law enforcement agents, the paper recommends the inclusion of local traditional authorities in the governance of livelihoods and cultural practices to effect social distancing in the wake of COVID-19. Like their counterparts in urban settings, Village Health Workers, traditional leaders and ward councillors should form part of the frontline team of essential service providers and be equally prioritised with remuneration and relevant Personal Protective Equipment to fight the COVID-19 pandemic.

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