

# A Critical Analysis of the Performance of Local Governments in Zimbabwe under the COVID-19 Pandemic

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## ABSTRACT

This paper examines the responses of urban local authorities in Zimbabwe to the COVID-19 pandemic because in the midst of a pandemic, local authorities are rightly positioned to minimise human cost, provide relief to communities and supply day to day service delivery. Specifically, this study sought to undertake a critical analysis of the performance of local governments in Zimbabwe under the COVID-19 pandemic. The article reviews available literature and examples are drawn from three urban areas in Zimbabwe. The article notes that COVID-19 exacerbated a crisis that was already playing out in Zimbabwe and reveals that the local authorities were ill-prepared and ill-equipped to handle the pandemic and cannot handle a crisis, endemic or any catastrophic disaster. The paper further delves to look at the lacklustre performance of urban local authorities and a major finding is that the central government policies have had a huge impact on the decline and free fall of urban local authorities' service delivery. The key findings may be used to inform ongoing policy responses to the COVID-19 pandemic and improve future resilience.

**Keywords:** Local government, COVID-19, Service delivery

## 1 Introduction

The Coronavirus disease (COVID-19) pandemic has revealed the vulnerability of systems in urban settings in a way that has never been seen before. The pandemic has entrenched itself in urban areas and cities and it has become the most unsettling force to the trail of economic growth (UN India, 2020). COVID-19 has clearly demonstrated that while national governments are critical towards a concerted and efficient system to the response and mobilisation of resources, it is in the urban systems and the cities where the battle is fought. In Zimbabwe, the COVID-19 pandemic has been a crisis within a crisis, as it has intensified the urgency on the need to address weaknesses that have beleaguered Zimbabwe for many years now. Long before the pandemic, the urban citizens of Zimbabwe have faced a lot of challenges such as lack of sanitation services, clean water and unavailability of primary health care and poor road infrastructure. The pandemic has managed to amplify what Zimbabwe urban local authorities have gone through over time, which is a chain of economic, partisan, social and political crises that have all adversely affected urban governance. According to WHO (2022) from January 3, 2020 to 8:36pm to April 14, 2022, there were 247,160 confirmed COVID-19 cases in Zimbabwe, with 5,460 deaths. A total of 9,518,765 vaccination doses has been delivered as of 3 April 2022. This article aims to critically examine the performance of urban local governments in Zimbabwe confronted with the COVID-19 pandemic and will show that the pandemic is not in any way responsible for the lacklustre performance of urban local councils but will expose the deeply embedded systemic local governance weaknesses that have been in existence even before COVID-19. The paper starts by conceptualising local government in Zimbabwe then looks at the Zimbabwean COVID-19 experience before giving an analysis of the responses of urban local authorities to the pandemic. The last section gives a review of the state of local authorities before the COVID-19

pandemic. The cities of Harare, Gweru, and Chitungwiza Municipality will be used to give empirical examples.

## **2 Contextualizing Local Government in Zimbabwe**

According to Shah & Shah (2006) local government refers to specific entities and institutions created in four main ways. Firstly, in countries like Italy, India, Japan, Denmark, Brazil, and France, national constitutions create local governments, secondly by state constitutions as in USA and Australia. Thirdly, as in other nations such as the New Zealand and United Kingdom a regular legislation of a higher level of central government is used. Lastly local government can be created through executive order as in the case of China. The main purpose of local government is to provide a diverse array of specialized amenities to a small geographically outlined and specified area.

Chakaipa (2010) defines local government as a democratically established and devolved echelon of government tasked with the delivery of services mandate, is comprised of legal organizations with defined authority that are equipped with enforcing rules over a specific area within national legislation's bounds and are mostly self-financing. Local government according to Musingafi (2012) is the establishment of democratically elected and participatory arrangements that are based on the constitution that can connect with people's needs at the grass-roots level ensuring the provision and the long-term preservation of infrastructure and key, essential services. Local government, as stated by Murimoga and Musingafi (2014) is the creation of a lower tier of government having the mission of engaging in responsibilities that the central government is unable to properly carry out because it is too far away from the people. As the level of government closest to the people, local government has the capability to respond to and better enunciate local requirements. Murimoga and Musingafi (2014) go on to say that when it comes to carrying out its mandate, local governments are better positioned to take advantage of opportunities that arise from local effort and knowledge. In Zimbabwe, local government competencies have a significant impact on local people's daily lives.

Every country's local government is an important feature and level of government where adequate investment must be made in this tier to ensure sustainable development. It should be an accountable government which is based on active citizen participation in the process of decision-making as well as the provision of excellent and first-class services. Local government is nearest to the general public as it communicates to establishments, organizations and practices of service delivery which take place within the geographical vicinity of residents (Nkomo, 2017).

With the arrival of the British South African Company (BSAC) and the establishment of the Salisbury Sanitary Board in the 1890s, Zimbabwe's first local authority was founded (Jordan, 1984). In Zimbabwe, local governance has always been legislative, making it a non-independent realm of government. The Urban Councils Act (1996) and the Rural District Councils Act (1996) are the two pieces of local government law and these are administered by the Ministry of Local Government and Public Works (MLGPW). Local government bodies, organizations and entities are treated as extensions of the central government by the MLGPW, which directs their actions. (Zimbabwe Institute, 2005). The MLGPW is also responsible for administering the Regional Town and Country Planning Act, The Provincial Councils and Administration Act (1985) and the Traditional Leaders Act (2000). Together these five pieces of local governance legislation determine the purposes, authorities, organisation and practises of local authorities (Chatiza, 2010).

Table 1 below shows how Zimbabwe's urban local authorities are organized by size and function.

**Table 1:** *Urban Local Authorities in Zimbabwe (Urban Councils Association of Zimbabwe, 2021)*

Level One (1): Cities	Level Two (2): Municipalities	Level Three (3): Town Councils	Level Four (4): Local Boards
Bulawayo	Beit-Bridge	Chipinge	Ruwa
Gweru	Bindura	Chiredzi	Lupane
Harare	Chegutu	Gokwe	Epworth
Kadoma	Chinhoyi	Karoi	Hwange
Masvingo	Chitungwiza	Mvurwi	Chirundu
Kwekwe	Gwanda	Norton	<b>Total: 5</b>
Mutare	Kariba	Plumtree	
Victoria Falls	Marondera	Rusape	
<b>Total: 8</b>	Redcliff	Shurugwi	
	<b>Total:9</b>	Zvishavane	
<b>Total:10</b>			
<b>Total Urban Councils in Zimbabwe: 32</b>			

### 3 COVID-19: The Zimbabwean Experience

Zimbabwe's then Minister of Health, Dr Obadiah Moyo announced at a press conference on state television on 21 March 2021 that Zimbabwe's first case of COVID-19 had been recorded and this was a 38-year-old male who had recently travelled from Manchester, England (Mbizwo, Tunhira, & Chingarande, 2020). This marked the beginning of soaring cases of infection that reached 4,893 on 12 August 2020 and 122 recorded deaths (Maulani, Nyadera, & Wandekha, 2020). The COVID-19 dashboard from the World Health Organization (WHO) on 21 February 2021 reported that the cumulative total cases for Zimbabwe were 35,768 and 1,432 deaths (WHO, 2021).

His Excellency, Comrade Emmerson Dambudzo Mnangagwa, President of Zimbabwe declared a twenty one (21) day lockdown which started on 30 March 2020, this was in an endeavour to halt the increase of the disease COVID-19. This announcement compelled all persons to stay at home with the exception of necessary undertakings such as shopping for food and health services or the critical services sector (Chagonda, 2020). This lockdown restricted movement within the country, flights to and from Zimbabwe were suspended and most shops were closed. At this same time some provinces in Zimbabwe such as Mashonaland East, Manicaland and Masvingo also struggled with an outbreak of malaria and at least 131 people succumbed to malaria in the new outbreak (Chingono, 2020).

On 2 January 2021, the Vice President and also the Minister of Health, Constantino Dominic Guveya Dominic Chiwenga announced a national lockdown from Tuesday 5 January 2021 to Friday 3 February 2021. To regulate this lockdown, The Public Health COVID-19 Prevention, Containment and Treatment (National Lockdown No. 2) (Amendment) Order 2021, Statutory Instrument 10 of 2021 was gazetted. This instrument enforced the following measures among others: funerals reduced to 30 people, other gatherings such as weddings, churches, gymnasiums, restaurants, bottle stores and bars were banned and closed for the period of the lock-down. Social distancing, hand sanitization, wearing of face masks and temperature checks were all rigorously enforced.

The pandemic's second wave hit Zimbabwe at a stage when the state's health system was exhausted and depleted. Personal protective equipment (PPE), drugs, beds, and crucial equipment in the COVID-19 fight

such as oxygen tanks and ventilators were all in limited supply in most hospitals (Zimbabwe Situation, 2021).

In Zimbabwe over thirty years of economic crisis characterised by unemployment, corruption and hyperinflation and overall public service delivery has been underfinanced, understaffed and shaky even before the COVID-19 pandemic. The country has been struggling with a multitude of diseases and most patients die from treatable diseases such as malaria, cholera and cardiovascular diseases (Maulani, Nyadera, & Wandekha, 2020).

#### **4 Local Government Performance in Zimbabwe under the COVID-19 Pandemic: A Critical Examination**

As the level of government closest to residents and communities, local government is in a sturdier position to innovate and lead in the COVID-19 response. However, the COVID-19 pandemic in Zimbabwe has brought with it local governance social, financial and economic shocks. As the coronavirus continues to spread and with it devastating aftermaths on local communities, local governments remain at the vanguard of combatting the outbreak. Local governments' service delivery, disaster preparedness, human resource and capital capabilities, infrastructure and inter-governmental coordination which are key to COVID-19 response, have only managed to expose the underlying decay at the urban councils in Zimbabwe (Chagonda, 2020). Service delivery by urban councils include maintenance and construction of roads, primary health care provision, sanitation and waste management (Marumahoko, Olugbemiga, Sadie, & Nhede, 2020) through funding with cash generated by local communities with loans and grants from the central government and other institutions based locally (Nkomo, 2017). Yet most authorities had shortcomings in the provision these services even before COVID-19 was in the picture. The country's urban councils entered the COVID-19 period with numerous pre-existing challenges that threatened to undermine effective response to the pandemic (Moyo-Nyede & Kugarakupi, 2020). Local governments in Zimbabwe face a common problem: poor performance in the delivery of services, the COVID-19 pandemic is only adding fuel to the fire that started burning a lot time ago in local governments in Zimbabwe.

##### **4.1 Sanitation and the Provision of Clean Water**

The world celebrated World Water Day on 22 March 2020 with much anguish and grief as it was undergoing the COVID-19 pandemic. A week earlier, on the 13<sup>th</sup> of March, WHO had introduced the "Safe Hands" challenge which encouraged individuals all over the world to wash their hands regularly with soap under running water for at least 40-60 seconds to prevent the virus from spreading and to maintain cleanliness (WHO, 2020). The virus's particles are physically degraded and removed when hands are washed thoroughly and on a regular basis.

Despite the fact that the washing of hands is one of the most efficient strategies to thwart the transmission of the virus, millions of people in developing countries do not have access to safe drinking water, and so the execution of hand washing activities is visibly hampered (Zvobgo & Do, 2020). The "Safe Hands" challenge already added to the woes that urban council authorities and municipalities already face. Numerous factors influence water supply, including diverse and institutional obstacles, population increase, and insufficient financial resources and aging and poorly maintained infrastructure (Ainuson, 2010). These obstacles make it difficult for municipalities to provide clean, adequate, and consistent water to the public, increasing the vulnerability of millions of people to COVID-19 and other diseases (Zvobgo & Do, 2020). On 31 March 2020, President of Zimbabwe, Emmerson Mnangagwa called for a country wide lockdown and asked citizens to stay indoors, except for necessities. Approximately 10 million people throughout Zimbabwe must secure water daily and almost half of the population in urban areas accesses water outside their home (Chakunda, 2020).

On 25 August 2020, the city authorities in Harare reported that the City of Harare was facing severe water crisis and public health concerns and stated that the water levels in supplying Harare had drastically dropped during the COVID-19 pandemic (Mavhunga, 2020). COVID-19 has exacerbated Harare's already deadly

and dire water issue. Instead of relying on potable tap water, the majority of Harare's residents make trek to open water sources or manually pumped boreholes. As many citizens gather at the boreholes or water sources, queuing in line waiting for turns to get water, such gatherings are in violation of social distancing guidelines. Most city residents are forced to spend the majority of their day searching for water. Also, unscrupulous individuals have manipulated this crisis for monetary gain and sell water at the boreholes for exorbitant prices (Chitale, 2020).

According to the *Newsday* of 2 April 2020, Gweru City Council turned down pleas by resident to discontinue water rationing during the 21-Day lockdown which was meant to slow down the advancement of the spread of COVID-19, the Mayor Josiah Makume however indicated that water rationing would continue and will remain in force as a way of ensuring that the little water in dams will be preserved until the next season and secondly, technically the city does not afford to pump water to all the areas at once (Matendere, 2020). Gweru residents were in April 2020 receiving water supplies for only two days a week. In August 2020, a water crisis was looming in the city as Gweru's two main dams that supply water were fast drying up and this in turn forced the council to further tighten the rationing of water. Gwenoro Dam which was constructed in 1984 was 17 % full and Amapongokwe Dam which was built in 1960 was 38 % full. Some Gweru suburbs such as Mkoba 1, 19, 18, 15, Haddon Park and Ascot infill were going for weeks without water. This sad development has forced residents to get water from unsafe water sources such as shallow wells and council swimming pools. The serious water challenges bedeviling Gweru can be attributed to several variables for this such as prolonged and recurring droughts, obsolete water reticulation systems and power outages (Chitumba, 2020).

The *Chronicle* of 2 February 2021 reported that the cash strapped City of Gweru was faced with a myriad of obstacles in service delivery such as uncontrolled refuse and the residents of Gweru feared that a health hazard might be imminent as the city council is failing to collect refuse citing the unavailability of fuel as well as obsolete refuse collection trucks. With the COVID-19 pandemic in full swing, there is fear that there would be another outbreak of diseases which are water-borne, cholera and typhoid for example, as there is flooding across the city (The *Chronicle*, 2021). The *Chronicle* further reported that the residents said they had last seen refuse trucks early 2020.

## 4.2 Health Delivery Systems

The COVID-19 epidemic has fully swamped Zimbabwe's health sector, according to Muzvidziwa-Chilunjika, Mutizwa and Chilunjika (2020). This is supported by the fact that the health sector's capacity to adapt has been constantly found wanting due to factors such as lack of human capital, absence of financial capital and a management operations capacity that is constrained. The pandemic of COVID-19 struck on a sector that was already weakened, crippled, and paralyzed. The sector was found to be under-equipped, with no single ventilator, which resulted in the first documented case at Wilkins, a City of Harare-run infectious diseases hospital (Nyoka, 2020).

Donations and purchases of solar systems, boreholes, ventilators and oxygen came after the first fatality, and this exposed the local authorities unpreparedness which revealed the management and leadership operations capacity (Mutizwa, 2020). Dr. Prosper Chonzi, the Harare City Council (HCC) Health Director, after the renovations done at Wilkins Hospital announced that the infectious disease hospital had the capacity to admit 50 active COVID-19 patients, with the intensive care unit having an additional 10 beds bringing the total of 60 beds. To this, argues Mutizwa (2020) was not a call for celebration but rather a wake up call of what needs to be done.

In June 2020 the Harare City Council closed its clinics citing staff shortages as nurses engaged in industrial action citing lack of personal protective equipment (PPE) and low remuneration. The council clinics are situated in various suburbs in the city and offer residents primary health care. Pregnant women suffered as a result of the local government's closure of polyclinics that serve as birth centers, putting them at danger owing to a lack of access to delivery, prenatal, and postnatal services (Munyoro & Rupapa, 2020).

On January 2021, Harare City Council indicated that it was swamped by the increasing number of COVID-19 cases, as Harare had become the epicentre of COVID-19. The acting mayor, Stewart Mutizwa also said the health delivery system was beleaguered as the pandemic continued to descend out of control on the backdrop of an already inundated health delivery system. Over the two previous weeks, the city had been recording over seven hundred cases every day and an increasing number of the population was turning to the social media appealing for ventilators and oxygen as both public and private facilities failed to cope with the upsurge (Mhlanga & Matenga, 2021).

### **4.3 Absence of Devolution**

The populace loses interest in what the government is doing when a state fails to devolve control and power to local government structures (Shumba, 2020). Nyikadzino (2020) notes that to improve performance, a well-devolved system offers authority, power, and autonomy to lower levels of government. In the midst of the COVID-19 outbreak, it has become very apparent and glaring that without devolution, the central government will continue to make decisions for local government. (Shumba, 2020). Shumba further asserts that response to the pandemic should be witnessed at the local government level with health specialists and professionals in the forefront of decision-making together with the citizens. In Zimbabwe regrettably all this is centred around the COVID-19 National Taskforce and a group of Cabinet Ministers. Local governments like the Chitungwiza Municipality, the City of Harare and the City of Gweru have been left out of the process and are unable to obtain financing from the central government for water treatment chemicals as part of the national response (Shumba, 2020).

## **5 Lacklustre Performance and Systemic Local Governance Weaknesses**

The Oxford Dictionary defines lacklustre as lacking in vitality, conviction or force, uninspiring and uninspired. It notes some of the synonyms are unimaginative, lifeless, dull, characterless, boring, tedious, mundane and wearisome (Oxford Dictionary, 2021). The Merriam-Webster defines it as lacking in sheen, vitality and brilliance and something mediocre (Merriam-Webster Dictionary, 2021). According to Rolstadas (1998) defines performance as a complex inter-relationship between seven criteria: efficiency, quality, productivity, effectiveness, quality of work life, profitability and innovation. Pulakos (2004) views the term performance as the contribution of specific systems which can be employees, processes and organisational units to achieve and confirm a company's objectives. Different definitions reviewed by Samsonowa (2012) have two common characteristics that is efficiency and effectiveness. These two terms lacklustre and performance will assist as a basis in the review of service delivery in Zimbabwe.

Several scholars note that the Zimbabwean urban local government system has over the years been confronted with countless challenges whose impacts on the delivery of service was deep and wide. The plethora of problems appears to be rooted in the socio-economic and political dimensions (Makunde, 2016). The state of service delivery in Zimbabwean cities is poor at best, and in several situations non-existent. Shah (2005) states that service delivery in local governments is weakened as evidenced by noncompliance, corruption, low citizen participation, ineffective revenue systems, poor delivery of critical services and goods and inefficient resource allocation. A number of commission reports and studies on the status of local government services reveals a widespread pattern of degeneration where there is evidence of a lack of considerable infrastructural expansion such as education and health, reticulation and water systems to cater for the growing urban population (Chatiza 2010, Dewa et al. 2014, Jonga, 2014, Mandisodza 2014, Dube 2019, Mavhunga 2020).

According to Marumahoko et.al (2020) basing on literature, the roots of unsatisfactory urban service delivery appear to be placed in two broad explanantions. The first explanation attributes failure of urban service delivery to the policies and actions of the central government and the second explanation points to the inadequacies, insufficient and ineffectiveness of the process of local public service delivery. In Zimbabwe, the beginning of the twenty-first century signaled the start of unrestricted political and

socioeconomic deterioration of local governance. a crisis that subsequently resulted in service delivery and local public administration failure.

### **5.1 Funding, Financing and Narrow Revenue Bases**

In Zimbabwe, meagre funding for local governments has remained the greatest challenge to the fulfilment of their service delivery roles. Local governments' revenue sources are not diverse and they rely heavily on user fees as a primary source of revenue. It is very ironic that Zimbabwe's urban local governments are supposed to get their revenue from social delivery activities like the providing basic health delivery, provision of water and refuse collection yet these services have been exceptionally underfunded (Dube, 2019). Local governments collect roughly 40% of their revenue through user fees, and they rely largely on property taxes, this accounts for around 29% of total revenue. Grants from the government, which account for 11% of total revenue, a conspicuous manifestation of the central government's fiscal space limits. Under the Urban Councils Act, short-term borrowing is permitted and accounts for around 2% of revenue, projects that generate income do not bring in a lot of revenue with only 2 %, licenses contribute about 7 % of the total revenue (Dube, 2019). Most local governments, both urban and rural, have limited funding sources, resulting in tight budgets and inadequate service delivery (Nkomo, 2017).

Mandisodza (2014) posits that the City of Harare faces a myriad of challenges in mobilising its revenue bases due to the economic meltdown. Another problem that has been distressing Harare City's mobilisation of revenue is the Urban Councils Act (29:15) of 1996, precisely 2(9) (1)(c) which requires the council to get consent from the Minister of Local Government before imposing new rates. Harare city council is also confronted with numerous obstacles in marshalling its revenue and these impediments can be attributed to high levels of political intervention particularly where politicians acquire mileage using urban councils as an instrument to achieve their political gain.

Because of Zimbabwe's volatile and uncertain economic situation, most local governments have limited financial resources as a result of people's failure to pay utility and water bills and this was exacerbated by Dr. Ignatius Chombo, the then-Minister of Local Government, who called for all utility and water bills incurred between 2009 and 2013 to be scrapped or cancelled for each and every Zimbabwean citizen just before the 2013 elections (Dube, 2019). Defaulters hailed and welcomed the move, but it paralyzed and hampered local governments' efforts to repair and build infrastructure, offer clean water, and provide adequate garbage collection for people. The failure of government departments and ministries to pay for the services supplied to them by councils, despite the fact that the Treasury gives monies to them to settle this, is contributing to the woes of local governments (Dewa, Dziva, & Mukwashi, 2014). In most instances the high-level defaulters are the political untouchables and this in turn affects the power and disposition of the local authorities to collect such dues. Jonga (2014) amplified this by noting that this is depriving and denying local authorities vital revenue that is important in financing effective and efficient service provision. Generally, with respect to revenue collection, local authorities have a poor record. The average local authority collection capacity is about 52 % (Dube, 2019). Also over 80 % of the urban employment is clustered in the unstable and low income formal sector. This means that the population of Zimbabwe's cities does not provide a viable base from which to supply services, leaving international and local financial organizations as the workable options (Chakunda, 2020). This has resulted in urban dwellings becoming what Simone (2016) referred to as "pirate cities" where urban residents rely on pirate operations like illegal electricity connections and mobile water vendors due the lack of valid engagement.

The central government has been evading or failing to pay the provincial and local governments the constitutionally mandated 5% of revenue since 2013, moreover, by omitting to specify the sums allotted to each authority, service delivery is jeopardized, this further buttresses the accusation that Zimbabwe African National Union-Patriotic Front (ZANU-PF), the ruling party has been destroying opposition-controlled councils in an attempt to ensure that they collapse (Mananavire, 2019). Where it is given, Rural District Councils (RDCs) have been recipients of a bigger share than urban councils, providing a justification that

RDC are relatively poor despite their populations being large though it appears that the purpose for this is to appease the rural populace, which is ZANU- PF's stronghold (Chakunda, 2020).

Central funding has invaded some of the local authorities revenue sources such as vehicle licensing fees and as a result, local governments have lost a significant source of money from the issue of vehicle licenses, which is now centralized. The Zimbabwe National Road Administration (ZINARA), which is under the Ministry of Transport and Infrastructure Development, is now in charge of collecting and distributing vehicle licensing fees on behalf of the central government. Nonetheless, ZINARA's support of local governments road maintenance is said to be lower than it was before the duty was transferred to ZINARA. Councils have constantly complained that the central government has always influenced ZINARA to allocate funds and grants along political lines there by disadvantaging the councils that are led by opposition parties (Chakunda, 2020). According to Nyikadzino and Nhema (2015) The transfer of water management from local governments to the Zimbabwe National Water Authority (ZINWA) has had a significant impact on revenue inflow streams in local governments.

Local governments in Zimbabwe borrowed for recurring expenses, which had a negative impact on service delivery because the borrowed money were not used for resource-generating projects and instead were used to repay loans and overdrafts. The City of Harare borrowed from Central African Building Society (CABS) US\$32,5 million for terminal benefits and salaries for employees without ministerial approval as stated in the in Chapter 29:15 of the Urban Councils Act. The City of Mutare and Gweru City Council were also blamed for borrowing of funds for recurrent expenses amounting to USD\$5,4million and USD\$775,000 respectively. Even donor funds and capital development funds are in many instances diverted to fund recurring expenditure.

Harare City Council also uses public-private partnerships (PPPs) to raise funds, however these have also underperformed. Other suggestions include increasing public sector investment, promoting ethics in local government administration, strengthening inter-governmental synchronisation, and strengthening monitoring and evaluation (Marumahoko et.al, 2020).

## **5.2 Corruption**

In Zimbabwe, thriving corruption has resulted in significant resource inefficiencies and waste among local authorities. Corruption is defined as behaviour that deviates from the formal responsibilities of a public official to monetary and economic gains (Kunaka, Mashumba, & Matsheza, 2002).

The cancer of corruption is seen in Gweru City council's governance of city affairs. Councillors are awarding themselves luxury vehicles, perks and financial resources and housing stands at a fraction of the market price (Dewa, Dziva, & Mukwashi, 2014). Different forms of corruption have been identified at Chitungwiza Municipality include the illegal sale of commercial stands, the allotment of vending spaces has been tainted by corruption (Mukonza, 2013), illicit allocation of housing infill stands, awarding tenders to companies with political connections, conversion of land use (Mumera, 2020) ghost workers and financial misappropriation (Mlambo, 2017).

Dube (2019) recommends that watchdog institutions should be strengthened to combat rent-seeking behaviour and corruption. The government should empower monitoring organizations with prosecutorial and punitive powers.

## **5.3 Centralization**

The indignity of central government meddling in urban administration is felt most acutely in matters of budget ratification and critical official appointments (Nkomo, 2017). The Minister of Local Government's inconvenient amending of the Urban Councils Act can be viewed as another stumbling block to service delivery as it can be regarded as the abuse of power to undermine service delivery in the cities and towns that are controlled by the opposition (Marumahoko, Olugbemiga, Sadie, & Nhede, 2020). Marumahoko, Chigwata and Nhede (2018) highlight that the MLG takes advantage of key provisions in the act to stifle local urban processes, even when they are the result of extensive public discussions and consultations. The



MLG, for example, might issue instructions and directives to councils (section 3(5) of the Urban Councils Act), dismiss local authorities, and replace them with central governments established commissioners (Urban Councils Act Section 80) rescind the resolutions and decisions made by local council (Urban Councils Act Section 3(4)), appointment of the local's board (section 132 of Amendment 1 of 2008), special interest councillors appointment (Urban Councils Act Section 4 A) and have unrestricted access to the proceedings of council meetings (section 91 Of the Urban Councils Act).

Nyikadzino and Nhema (2015) revealed that the centre-local interactions between Chitungwiza Municipality and the Minister of Local Government were highly centralised, according to a case study of Chitungwiza Municipality and the MLG retained all control and power over the municipality. They also pointed out that the minister was involved in the municipality's day-to-day operations rather than playing a strategic role in policy formulation and implementation. Potholed roads, irregular water supply, burst sewer pipes, and inefficient garbage collection are all examples of the master-subordinate relationship's negative impact on service delivery in the municipality (Nyikadzino & Nhema, 2015).

There is a need for genuine devolution; the central government must give local governments more autonomy. Local governments will be more innovative, responsive, adaptable, and engaged as a result of their liberation. It will also increase adaptability (Nyikadzino, 2020).

#### **5.4 Poor Infrastructure**

Local governments are burdened with repairs due to old, outdated and substandard infrastructure. Many sewerage systems and road networks in Zimbabwe's largest towns, including Harare, Gweru, and Mutare, were built in the 1980s and 1990s and are now in desperate need of repair by cash-strapped local governments. (Dewa, Dziva, & Mukwashi, 2014). Constant sewer bursts are attributable to outdated pumps that have never been serviced and the financial muscle of local governments is restricted and limited to perform a thorough overhaul of the decaying infrastructure. The quality of infrastructure in metropolitan and urban councils, particularly in the areas of roads, water, and waste water, demonstrates that local governments' capacity to perform to expectations is minimal (Chakunda, 2020).

According to Maodzwa (2015), the City of Harare has undergone tremendous growth in population from 310,260 in 1961 to 658, 400 in 1982. In 2002 the population was 1,896 134 and approximately 3 million residents in 2010 and this increase in population puts a pressure on service delivery. For instance the sewer and reticulation system for the city was designed for 1,5 million but now over 3 million are being catered for (Chakunda, 2020).

A study conducted by Dube (2019) established that local governments confront additional challenges due to a lack of complementary financing for infrastructure development from the central government. From 2010 to 2018 the total infrastructure projects allocations from the central government were 7,6 % of the total expenditure. This means that local governments must fund themselves in order to meet their infrastructure needs. Consequently, the state of local government infrastructure is currently rather poor, deplorable and dismal. It is estimated that about USD\$582,600 000.00 worth of both rural and urban water supplies require investment to repair and rebuild water infrastructure. (Dube, 2019).

Waste water management in the local authorities is also poor (Chatiza, 2010) and it is claimed that 14,2 percent of public toilets in local governments are not functioning. Only a little amount of waste water is recycled as only 8.1 % of waste water is reused. Water and waste water treatment systems have become inefficient as a result of extended periods of underfunding, with effluent and raw sewer inflowing into dams and rivers. Dry spells also result in frequent sewer system blockages due to a lack of consistent water flows. The majority of Zimbabwe's water distribution infrastructure are in desperate need of repair (Dube, 2019) There are multiple problems in the infrastructure of the road network (Chakunda, 2020). In urban councils, just 52% of roads are sealed and of these sealed roads only 21,2 % are in a good condition. On the roads in urban councils, only 10 per cent have carnage markings and those with controlled intersections are 16,9%. In urban councils, the average national road network is roughly 63,1 percent translating to that 36 % of the urban settlements do not have a road network (Dube, 2019).

## **5.5 Political Interference and Political Wrangling**

Unlike countries such as Tanzania and Uganda, in Zimbabwe local government has no autonomy as the performance of its function is bestowed on it by the central government. While the roles are prescribed by law, they are subject to reassignment by the central government to other state bodies. As a result, the birth, development and death of local government are all defined by the central government. The central government determines the fate of local governments and this puts the function of local governments in jeopardy

Political wrangling at various levels of the local government service delivery system affects service delivery output. There is always squabbling and bickering that is politically motivated between urban local authorities and the Minister of Local Government (MLG). Also infighting is rife amongst the councillors, who are elected political authorities and the bureaucracy, who are the administrators (Marumahoko, et.al, 2020). The power struggles between the MLG and the opposition-controlled towns and cities started in 2008. The ruling party ZANU-PF amended Chapter 29:15 of the Urban Councils Act, a politically motivated decision which diluted local service delivery under the opposition-controlled towns and cities. ZANU PF endorsed the Urban Councils Amendment Act Number 1 of 2008 which ended the system of Executive Mayor which enabled the engagement of mayors in service delivery matters on a daily basis, and replaced it with the Ceremonial Mayoral system which was ineffective and facilitated for the intrusive in the service provision by the Amendment central government (Marumahoko S. , 2020). The amendment in addition facilitated for the MLG to appoint twenty five percent of the councillors in all urban authorities under the pretence of engaging technocrats and professionals or the special interest councillors and this strategy was used to bring in candidates from the ruling party who had lost local government elections. The MDC, which controls Harare City Council has on numerous occasions hit out at the central government that the strategy of firing sitting mayors and councillors as an endeavour by the ruling party, ZANU-PF to regain the control of Harare City, most of the elected councillors who are perceived to be obstacles or troublesome have been replaced by the ruling party commissioners.

Wellington Jonga, a town planner branded ZANU-PFs approach to local governance as “political banditry”. In Zimbabwe, the conduct of council business and full council debates have been politicized. When the business of the city council is divided along party lines, councillors instead of adopting constituency or community goals adopt individual goals as a reason for their occupation of the positions. He further argues that central government political influence in local governments is a major source of corruption (Thondhlana, 2018)

Many local governments agree that the ruling ZANU-PF party has reduced local authorities to mere extensions of the central government. Further to note is that ZANU-PF has proffered to appoint ministers of metropolitan and provincial affairs to direct urban development (Thondhlana, 2018).

## **5.6 Levels of Education of Councillors**

Councillors run cities because they are elected by the people during elections. The majority of councillors are elected on a political party ticket and are not educated and knowledgeable enough to comprehend in the concept of good governance as stipulated by the Urban Councils Act, this is according to Dewa, Dziva, and Mukwashi (2014). It is not necessary neither is it a requirement to have an academic or professional background to run for the office of councillor in Zimbabwe. This is aggravated by poor remuneration, political bickering and poor working conditions. Because most educated people regard politics as a dirty game, they do not run for council positions and the position of councillor is not regarded lucrative, allowing the uneducated to participate. Councillors are of questionable competency due to their lack of qualifications as many fail to grasp the basic regulations like the Urban Councils Act (Chapter 29:15) and also the Regional Town and Country Planning Act (Chapter 29:12). The majority of the time, council employees have little understanding of the council's responsibilities thereby steering to ineffectiveness and inefficiency. Professional qualification and education should be a necessary prerequisite as it engrains a leader's

understanding of issues. As a result, individuals employed by a local authority or a councillor must be educated in order to understand the basic laws of local governance and management concepts (Dewa et.al, 2014).

The central government must adopt and introduce capacity building programs for council employees, mayors and councillors. Training programs on policy formulation and implementation can greatly benefit mayors, councillors and employees to make informed contributions towards development (Nyikadzino & Nhema, 2015).

## 6 Conclusion

This paper analysed the performance of selected local councils in Zimbabwe during the Covid 19 pandemic. It unravelled that lacklustre performance by these local councils during the Covid 19 pandemic is not a product of the current Coronavirus outbreak; to some extent the Covid 19 exacerbated an already existing catastrophe. By examining poor service delivery especially in the health system, water and sanitation and transport infrastructure, the paper concludes that the dilapidation witnessed on infrastructure is not a making of the current epidemic but points to long neglected standards well before the emergence of the Corona Virus in 2019. Evidence of bad governance exists in local councils as spelt out by concrete corruption cases alleged on these councils. The centralization of power by the central government has been raised as a pertinent issue as this badly impart on the funding of local authorities. There is evidence of political interference within the management of local authorities which is a setback to good service delivery. Lastly, although still a subject of debate, the credibility of leaders within local authorities, in terms of education and managerial know how, when subjected to acid test leaves a lot to be desired. The Covid 19 pandemic came in as an opportunist to the already crumbling administration. Effects of the Covid 19 pandemic alluded to in this paper include down streaming manpower in service delivery, diverting of resources towards the Covid 19 and over burdening the health infrastructure such as ICU, hospital beds and ambulances. This paper to a larger extent exonerates the Covid 19 epidemic from absolute responsibility of lacklustre performance by local councils who most often considers it a scapegoat to their mandated accountability. These findings give local governance and politicians a chance to contemplate on their management during the early months of the pandemic in order to identify shortcomings in order to enhance the effective implementation measures. Policymakers should also pay special attention to resource allocation while keeping fiscal constraints in mind.

## 7 Declarations

### 7.1 Competing Interest

The authors declare that they have no conflicting and competing interests.

### 7.2 Publisher's Note

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