

## "RWANDA'S COVID-19 JOURNEY: THE STRENGTH OF GOVERNANCE AND RESILIENCE

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### Article Info

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### Abstract

Managing the COVID-19 pandemic has been a complex task for governments all over the world. This paper analyses the management of the pandemic in Rwanda as an example of good governance. The study uses the UN's eight principles of good governance to scrutinize every decision and measure taken by the Rwandan government in managing the pandemic. Rwanda, ranked 11th out of 54 African countries for good governance in the 2020 Mo Ibrahim Index of Governance in Africa, has been successful in maintaining good governance principles throughout the COVID-19 outbreak. The paper discusses testing and treatment of COVID-19 patients, pre-pandemic preparedness, vaccination campaigns, and principles and characteristics of good governance, such as transparency, accountability, rule of law, and effectiveness and efficiency.

The findings show that Rwanda has successfully contained the pandemic, with a case fatality rate of less than 1%, a high percentage of recoveries, and effective vaccination campaigns. The Government's readiness to accommodate various COVID-19 vaccine conditions has also supported these efforts. The paper concludes that Rwanda's management of the pandemic could serve as a model for good governance for many other countries.

## 1. INTRODUCTION

Governance encompasses the system by which an organisation is controlled and operates, and the mechanisms by which it, and its people, are held to account. Ethics, risk management, compliance and administration are all elements of governance [1]. Good governance is defined as the transparent and accountable management of human, natural, economic and financial resources for the purposes of equitable and sustainable development [2]. Various authors define and associate a number of principles with good governance, four of which are of particular relevance to social security institutions: accountability, transparency, predictability and participation [3].

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Given that good governance is an approach to government that is committed to creating a system founded in justice and peace that protects individual's human rights and civil liberties; the United Nations extent good governance to eight principles or factors like participation, rule of law, transparency, responsiveness, consensus oriented, equity and inclusiveness, effectiveness and efficiency, and accountability [4].

Rwanda's governance can be defined as developmental with roots from traditional best practices or what can be called home grown Initiatives, thus Rwandan perspective in doing things. Rwanda has achieved impressive development progress since the 1994 Genocide against the Tutsi. Rwanda's success in development has been accredited to consolidating gains in social development and accelerating growth while ensuring that those efforts will aid in the endeavour to mitigate risks to eroding the country's hard-won political and social stability. In order to maintain social and political stability, the Government of Rwanda has taken on the task of ensuring that good governance practices exist throughout the country [5].

The Ibrahim Index of Governance in Africa (IIAG) which is carried out by Mo Ibrahim Foundation is a tool that measures and monitors governance performance in African countries. This institution defines governance as the provision of political, social and economic public goods and services that every citizen has the right to expect from their government, and that a government has the responsibility to deliver to its citizens [6]. In its 2020 edition, the Mo Ibrahim Index of Governance in Africa (IIAG) has ranked Rwanda at 11th place out of 54 selected in terms of good governance with a score of 60.5% of overall points [7].

On the other hand, epidemics of infectious diseases are occurring more often, and spreading faster and further than ever, in many different regions of the world. The background factors of this threat are biological, environmental and lifestyle changes, among others. A potentially fatal combination of newly-discovered diseases, and the re-emergence of many long-established ones, demands urgent responses in all countries. Planning and preparation for epidemic prevention and control are essential [8].

The objective of effective management of a pandemic is to intent of stopping, slowing or otherwise limiting the spread of it to the country; limiting the domestic spread of a pandemic, mitigating disease, suffering and death; and sustaining infrastructure and mitigating impact to the economy and the functioning of society [9].

Since the 30th January 2020 when the World Health Organization declared the novel coronavirus a Public Health Emergency of International Concern and the 11th February 2020 when it renamed the virus COVID-19, Rwanda as other many governments in world took measures for its management.

This paper aims to analyse deeply the management of the virus as a strong sign of good governance in Rwanda; and the analysis will use 8 principles of good governance as tools to filter and scrutinise every decision taken and every measure put in place by the government of Rwanda.

## **2. METHODS AND MATERIALS**

The method applied in this research is Secondary Data Analysis or Archival Study. This method consists to research information collected as a result of studies and similar efforts that can then be used by others as part of new research or simply information that already exists in someone else's files and originally generated for reporting or research purposes [10]. This research has covered data of one year, means from 15th March 2020 to 15th March 2021 with a small extension to 25th Mach 2021 in order to cover the first phase for the vaccination campaign.

Relating to the management of COVID-19, materials used are periodic bulletins published by Rwanda Biomedical Centre related to the management of COVID-19 in Rwanda, the daily publication statistics on it by the Ministry of Health in Rwanda, various statements on Rwandan Cabinet Resolutions during the period of covered by our research, national and international news outlets reporting, the constitution of Rwanda of 2003 revised in 2015, etc.

To measure the effectiveness of this management as sign of good governance, the UN publication of 8 principles of good governance served as an important material of measurement and it allowed us to filter every decision and measure taken by referring it to a practice of good governance.

In addition, some software like Microsoft Excel have been used for statistical analysis, demonstration and graphs design; and ArcGIS software have been used for spatial analysis on some components and cartographic illustration and presentation.

### 3. FINDINGS

#### 3.1 Testing and Treatment of People Contracted COVID-19

The first case of COVID-19 has been confirmed in Rwanda on 14th March 2020 and the following day additional 4 cases have been confirmed. The following table summarize the situation of daily statistics on the pandemic synthesised after every 3 months since the first case confirmed until the 15th March 2021, exactly one year into the management.

**Table1.** *Statistics on Main Indicators Recorded for the Management of Covid-19*

	Date	Starting	15/06/2020	15/09/2020	15/12/2020	15/03/2021
Main Measured Indicators						
Cumulative Tests			94059	466518	673517	1065729
Confirmed Cases	5	612	4624	6832	20302	
Recovered cases	0	338	2767	6036	18635	
Total Deaths	0	2	22	57	282	

**Source:** *Data from Ministry of Health and RBC, synthesised by the author*

At the beginning the number of tests have not been published by some days after, all 4 main indicators mentioned were published. During one year more than a million of tests have been made and from them around 20 thousand have been confirmed positive of whom 18 thousand recovered from the pandemic.

The last term from 15/12/2020 to 15/03/2021 marked an increase in figures where confirmed cases tripled and deaths quadrupled, fortunately recovered cases also tripled at the same time. The record has been registered on 14th January 2021 where 194 new confirmed COVID-19 cases were reported over the past 24 hours.



**Figure1.** *Reporting formats of Ministry of Health on COVID-19*

**Source:** *Rwanda Biomedical Centre (Rbc)*

The first death caused by COVID-19 occurred on 30th May 2020 and was a 65 years old Rwandan truck driver residing in neighbouring country and who opted to return home in Rwanda after a serious illness [11].

### 3.2 Campaign of Vaccination against COVID-19

#### 3.2.1. Preparedness

After adhering to international cooperation for acquiring vaccines against COVID-19 like COVAX program of WHO and African Union framework, Rwanda set necessary preparations for being ready to acquire, store, distribute and administer COVID-19 vaccines. Note that the COVAX framework is a global initiative of WHO that aims to speedily and affordably secure doses of the COVID-19 vaccine for member countries.

In that framework, five new ultra-cold freezers were purchased while other equipment to be used to transport the vaccines to different parts of the country were also ready, because the government takes vaccine safety a priority to avoid any side effects on vaccinated people and have established a specialized and experienced team in charge of vaccine storage. These five freezers can store vaccines at temperature below minus 80 degrees Celsius and will continue to help Rwanda to accommodate any type of vaccine conditions [12].



**Figure2.** *Purchased equipment for storage of vaccines*

**Source:** *The New Times*

#### 3.2.4. Acquisition and Distribution of Vaccines

- On the **3<sup>rd</sup> March 2021 morning**, Rwanda received 240,000 doses of the AstraZeneca/Oxford vaccines licensed and manufactured by the Serum Institute of India and were delivered by UNICEF on behalf of the COVAX Facility [13]
- On the same day, at evening, the country received 102,960 Pfizer vaccine doses, becoming the first nation in Africa to use pharmaceutical company Pfizer's doses that require ultra-cold storage [14].
- On 5<sup>th</sup> March 2021, a gift of 50,000 doses of COVIDSHIELD Vaccine produced by the Serum Institute of India (SII), from India to Rwanda, arrived at the Kigali International Airport today. High Commissioner of India to Rwanda, H.E. Mr. Oscar Kerketta officially handed over the vaccines to the Hon'ble Minister of Foreign Affairs and International Cooperation of Rwanda, H.E. Mr. Vincent Biruta at the Airport [15].

For distribution, vaccines were picked up by district hospitals for distribution to 50 Hospitals and 508 health centres. All vaccine shots would be administered within 48 hours starting 5th March and all National organs were mobilised for the effective distribution of vaccines [16].

#### 3.2.5. General Vaccination

**Table2.** Daily vaccination by province and the City of Kigali

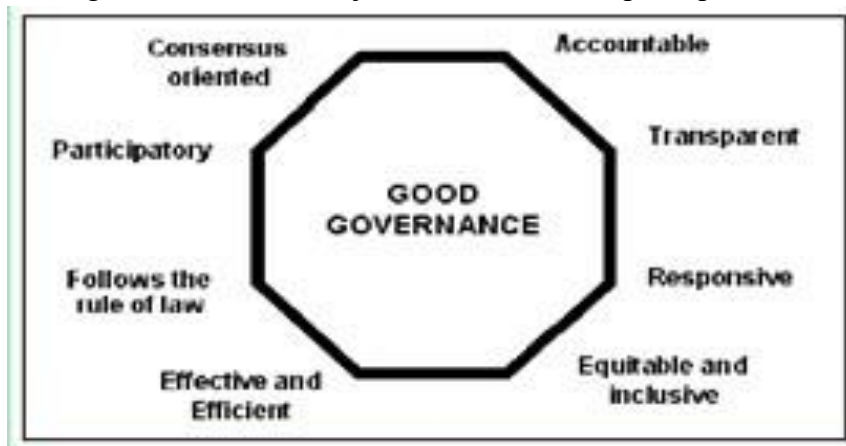
Date	City of Kigali	Northern Province	Southern Province	Eastern Province	Western Province
05/03/2021	2051	15007	21812	20072	16114
06/03/2021	6062	31286	42618	39499	39437
07/03/2021	10347	5142	3935	9747	8333
08/03/2021	3957	563	2042	732	2568
09/03/2021	9710	1291	0	270	100
10/03/2021	7874	57	191	337	447
11/03/2021	9891	0	97	0	0
12/03/2021	10027	105	0	0	0
13/03/2021	4464	0	0	0	0
14/03/2021	3911	0	0	0	0
15/03/2021	21434	5401	5700	19130	4901
16/03/2021	3693	0	0	0	0
17/03/2021	3990	0	0	0	0
18/03/2021	2046	0	0	0	0
19/03/2021	5666	0	0	0	0
20/03/2021	3945	0	0	0	0
21/03/2021	1183	0	0	0	0
22/03/2021	4006	0	0	0	0
23/03/2021	5179	0	0	0	0
24/03/2021	4906	0	0	0	0
25/03/2021	260	13	0	0	24
<b>Total</b>	<b>124602</b>	<b>58865</b>	<b>76395</b>	<b>89787</b>	<b>71924</b>

**Source:** RBC Public notice on Novel Coronavirus [17] and gathered by the author

The distribution of vaccines took just a single day due to means invested in and the general vaccination started the following day. The table 2 up presents how vaccines have been administered on daily basis by province and the City of Kigali.

### 3.2.6. Principles/ Characteristics of Good Governance

Good governance has 8 major characteristics or principles summarized on the following figure:

**Figure3.** Characteristics/ principles of good governance

**Source:** UN-ESCAP



**Participation:** By both men and women is a key cornerstone of good governance. Participation could be either direct or through legitimate intermediate institutions or representatives. It is important to point out that representative democracy does not necessarily mean that the concerns of the most vulnerable in society would be taken into consideration in decision making. Participation needs to be informed and organized.

**Rule of law:** good governance requires fair legal frameworks that are enforced impartially. It also requires full protection of human rights, particularly those of minorities. Impartial enforcement of laws requires an independent judiciary and an impartial and incorruptible police force.

**Transparency:** means that decisions taken and their enforcement are done in a manner that follows rules and regulations. It also means that information is freely available and directly accessible to those who will be affected by such decisions and their enforcement. It also means that enough information is provided and that it is provided in easily understandable forms and media.

**Responsiveness:** Good governance requires that institutions and processes try to serve all stakeholders within a reasonable timeframe.

**Consensus Oriented:** There are several actors and as many view points in a given society. Good governance requires mediation of the different interests in society to reach a broad consensus in society on what is in the best interest of the whole community and how this can be achieved. It also requires a broad and long-term perspective on what is needed for sustainable human development and how to achieve the goals of such development. This can only result from an understanding of the historical, cultural and social contexts of a given society or community.

**Equity and Inclusiveness:** A society's wellbeing depends on ensuring that all its members feel that they have a stake in it and do not feel excluded from the mainstream of society. This requires all groups, but particularly the most vulnerable, have opportunities to improve or maintain their wellbeing.

**Effectiveness and Efficiency:** Good governance means that processes and institutions produce results that meet the needs of society while making the best use of resources at their disposal. The concept of efficiency in the context of good governance also covers the sustainable use of natural resources and the protection of the environment.

**Accountability:** Accountability is a key requirement of good governance. Not only governmental institutions but also the private sector and civil society organizations must be accountable to the public and to their institutional stakeholders. Who is accountable to whom varies depending on whether decisions or actions taken are internal or external to an organization or institution. In general, an organization or an institution is accountable to those who will be affected by its decisions or actions. Accountability cannot be enforced without transparency and the rule of law.

#### 4. DISCUSSION

World Health Organisation (WHO) first learned of a new coronavirus called SARS-CoV-2, causing the disease we call now COVID-19, on 31<sup>st</sup> December 2019, following a report of a cluster of cases of viral pneumonia in Wuhan, China. Since then, Rwanda followed with attention the evolution of the pandemic and has always based its decision on evidences provide by WHO's scientists. This shows how the principle of rule of law started with the management of the pandemic before it reaches National land, here we refer to the law of evidence well known in the domain of law.

##### 4.1 Readiness of Rwanda for COVID-19

Before the pandemic reaches the National land, the Government of Rwanda have already set measures for containing its spread. The extraordinary Cabinet meeting took place on 6th March 2020, more than a week before the first confirmed case of COVID-19 in Rwanda, took a strong related resolution. It reaffirmed a strengthened

approach to contain the potential spread of the Coronavirus outbreak in Rwanda. The effort was led by the Office of the Prime Minister along with the Ministry of Health,

Ministry of Local Government and Security organs. In addition, the Cabinet meeting urged all Rwandans to take appropriate precautions and follow advice of health professionals and avoid unnecessary internal or international travels and large gatherings [18]. The principle of transparency in good governance is also here observed as the information is freely available and directly accessible to the public that would be affected by such decisions and their enforcement.

In order to protect against COVID-19, WHO announced measures to undertake like frequent handwashing or disinfection with alcohol based sanitizer, physical distancing of at least 1 metre and limiting unnecessary travel. For coping with these protective measures, the Government of Rwanda established required infrastructure at public places like markets, buses parks, public institutions working place, etc. and private sector with civil society have been also required to do the same at their respective working places.

The same prompt reaction has been done when WHO confirmed that face mask as an important protective measure, the Government of Rwanda recommended its citizens to wear face masks when they go out and even at home including when social distancing is not possible [19].



**Figure4.** Modern tapes for hand-washing at Nyanza and Rwamagana districts **Source:** Nyanza and Rwamagana districts Twitter handles

By these quick and timely interventions, the principle of **effectiveness and efficiency** was practised with excellence. On every decision, involved governmental institutions was taking immediate lead for the effective implementation, thereby the principle of **responsiveness in good governance here was effectively applied.**

#### **4.2 A Whole Year on the Battlefield Against COVID-19**

The first positive case of COVID-19 has been confirmed on 14<sup>th</sup> March 2020 and the lockdown been announced on the 21<sup>st</sup> of the same month while the total number of confirmed cases was 17 people; it lasted 2 months as it has been ended on 20<sup>th</sup> May 2020. This decision came as a result of lesson learnt from countries that have been affected by the pandemic and it facilitated an important operation of tracking contacts people with one confirmed positive. Many socio-economic activities have closed except essential services like healthcare, food shops, banks and farming activities, for the remaining the safe place was the home.

For some people, a such restrictions and measures would look like non democratic and sign of bad governance. In fact, the pandemic has prompted governments to introduce temporary restrictions that infringe on individual rights, such as freedom of movement, freedom of assembly and the right to practise religion in groups. Public health approaches are often utilitarian in essence, which means that they maximise the overall benefit for the population. Willingness to act for the benefit of society is subject to cultural differences and is more prominent in

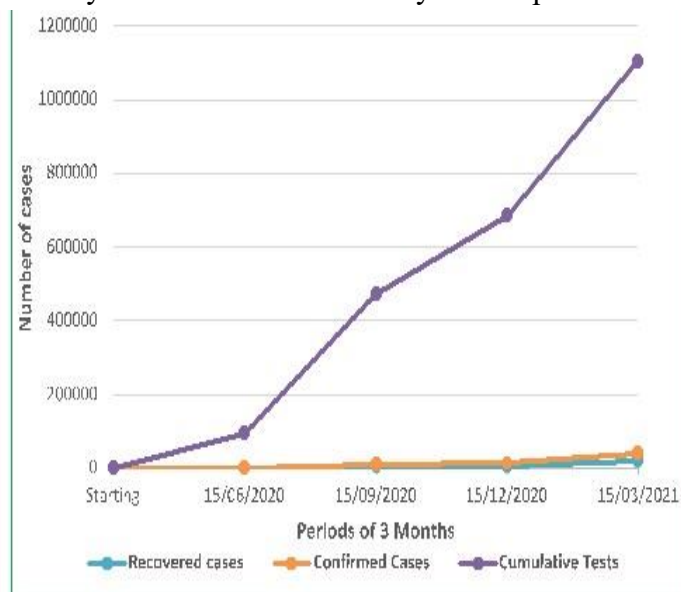
collectivist countries than in individualistic countries, where maximising individual benefit is prioritised. However, it is very important to balance individual rights with the social good [20].

In addition, the principle of **consensus oriented in good governance have been applied and well enforced as it requires** mediation of the different interests in society to reach a broad consensus in society on what is in the best interest of the whole community and how this can be achieved.

Thus, Rwanda's government and healthcare system has responded to the COVID-19 pandemic with innovative interventions to prevent and contain the virus. Importantly, the response has utilized adaptive and innovative technology and robust risk communication and community engagement to deliver an effective response to the COVID-19 pandemic. Innovative strategies include remote case identification, use of a toll-free hotline, a national WhatsApp™ number, drones for information dissemination, and robots for patient monitoring in hospitals. Robust risk communication and community engagement plans using social media platforms have also helped combat misinformation and increase public knowledge around COVID-19 [21]. This is a strong sign of transparency as one of principles of good governance.

It is very important to note the role of local government entities and other stakeholders that have been increasing public awareness for COVID-19 prevention using public and private media, as well as mobile sound systems via drones equipped with speakers that describe COVID-19 symptoms. Prevention measures, including hand washing and avoidance of handshake greetings, have been promoted through this approach as well. Communication as part of the pandemic management has been strengthened and controlled by the communication cell of the COVID-19 Joint Task Force Coordination responsible for awareness and community engagement, media management, rumours management [21].

This effort has been fruitful as shown by the following figure 4, where the general trend shows us tests exponentially increased but with a very low slope of confirmed cases, hence recovered cases.

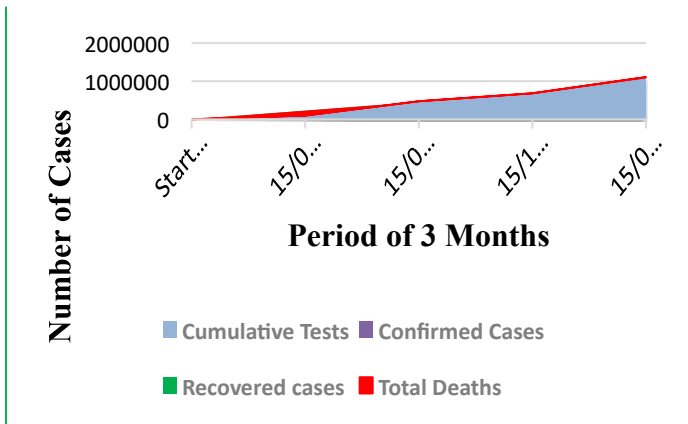


**Figure4.** Relation between tests and confirmed case

**Source:** Data from Ministry of Health and Rbc, Synthesis and Illustration by the Author

If the figure 4 shows the general trend from measures taken to contain the spread of COVID-19, the following highlights the volume of cases on aforementioned indicators and the success in preventive measures.





**Figure5.** *The success of preventive measures via the number of cases*

**Source:** *Data from Ministry of Health and RBC, illustration by the author*

Some thought that the management of COVID-19 has put the country in a state of siege and a state of emergency defined by the article 136 of the Constitution of the Republic of Rwanda of 2003 revised in 2015 [22]. However, measures were special for the management of a such pandemic that wasn't yet known, but also for those who could interpret the situation in terms of constitutionality, Cabinet decisions were renewed every 15 days and this is conform to the second paragraph of the aforementioned article of the constitution. And this shows that even during this hard situation the rule of law, as an indicator of good governance, prevailed in Rwanda.

Note that the renewal of measures was based on scientific that stated that the incubation period for COVID-19 is thought to extend to 14 days, with a median time of 4-5 days from exposure to symptoms onset. One study reported that 97.5% of people with COVID-19 who have symptoms would do so within 11.5 days of SARS-CoV-2 infection [23].

#### 4.3 Vulnerable Families Supported During this Lockdown

Since the beginning the only way to defeat the virus was through combined efforts between national authorities, the local authorities and the population at large. The principle of participation as one of those constitute the good governance came out early on this level. In fact, as reported by The New Times, citizens in most parts of Kigali have started voluntarily putting together money and other essential items such as food to families that need help during this COVID-19 lockdown [24].

By after, in his address to the Nation of 27<sup>th</sup> March, President Paul Kagame had highlighted that the Government would do everything possible to support vulnerable Rwandans during the coronavirus containment period which is characterised by social and economic challenges. The following day the Government has on Saturday, March 28, inaugurated a support initiative to vulnerable families who have been affected by lockdown aimed to curb the spread of COVID-19 [25].

Beneficiaries were those that had jobs that provided a daily income but were finding it difficult to get a subsistence during that time of a lockdown because they can't work. These included mainly casual labourers, masons, hair salon employees, those who worked in bars and generally those were working in the informal sector who had no other source of income. Then there are those that were already under the government's social protection schemes like Direct Support, VUP public works, FARG. Food distributed was made by maize flour, rice and beans; and was coming from the National Strategic Grains Reserve in the Ministry of Agriculture [26]. The same support has been provided when the City of Kigali has gone under lockdown in the beginning of 2021.

At this level, almost all principles of good governance have been applied and mostly **equity and inclusiveness** where a society's wellbeing depends on ensuring that all its members feel that they have a stake in it and do not

feel excluded from the mainstream of society. This requires all groups, but particularly the most vulnerable, have opportunities to improve or maintain their wellbeing. But also participation, transparency, accountability and others are implicated at large.

Corona virus is not only a health problem, but also a socio-economic challenge, this is why the Economic Recovery Fund (ERF) was established by the Government of Rwanda to support the recovery of businesses hardest hit by COVID19 so that they can survive, resume operations and safeguard employment, thereby cushioning the economic effects of the pandemic. National Bank of Rwanda was appointed as the Fund Manager [27]. The funding was initially set with an allocation of approximately Rwf100 billion (\$100 million) for two years, targeting tourism and hospitality, manufacturing, transport and logistics as well as small and medium enterprises linked to domestic and global supply chains. By after, the government put an additional Rwf350 billion (\$350 million) stimulus plan for its economy to support businesses hard hit by the pandemic, boost jobs and reduce poverty [28].

#### **4.4 Vaccination: Other Success of the Management of COVID-19**

On 14<sup>th</sup> February 2021, the Government of Rwanda has kicked off the national vaccination programme for Covid-19 with vaccines approved by the World Health Organisation (WHO) acquired through international partnerships and vaccination was starting with health care staff as part of the highrisk groups [29]. However, the general campaign for vaccination started with the acquisition of vaccines from the COVAX framework.

##### *4.4.1 Efficiency in Vaccines Distribution*

Even before receiving vaccines, vaccination teams were on standby in District hospitals including staff in charge of vaccine administration, data entry, logistics as well as monitoring of immediate and longterm side effects. Experts who were trained to conduct the vaccination exercise were also dispatched on the field.



**Figure6.** *Appropriate small kits vaccines transport*

**Source:** *Ministry of Health*

To optimise synchronisation of actors and activities, the government of Rwanda established a coordinating mechanism at the national level that brought together decision-makers from each of the relevant offices. Months before the arrival of the first vaccines, the Scientific Advisory Group and National Task Force for Covid-19 vaccination began meeting weekly to establish a rollout strategy, identify gaps and mitigate risks in the delivery chain, and make key decisions. From these decisions, activities were organised across ministries and regional and local authorities. The committee reports regularly to the head of state on the status of planning and delivery [30]. Rwanda's whole-of-government approach was instrumental in the successful transport of vaccines from the central distribution hub in Kigali to remote areas of the country within 24 hours on 4 March and with little advance notice [30]. In Kigali, the Ministry of Health organised the allocation of vaccines, which were then transferred to hospital vehicles and Ministry of Defence helicopters. The Ministry of Defence helicopters transported the

vaccines to the district hospitals. From there, with the support of the Rwanda police, the vaccines were distributed to area health centres. The effective cross-government coordination ensured that Rwanda would be ready to begin administering vaccinations across the country the next day.



**Figure7.** *All means invested for a timely delivery*

**Source:** *Ministry of Health*

As the Ministry of Defence helicopters have been used for the transport of vaccines to remote areas, from where they deposited vaccines districts vehicles were ready and they also have been used for hospitals that are easily accessible as shown by the following image.



**Figure8.** *Logistics for the distribution of vaccines was on point*

**Source:** *Ministry of Health*

This distribution gathers almost all principles of good governance aforementioned, especially the **effectiveness and efficiency with transparency**.

#### *4.4.2 A well planned vaccination*

The government of Rwanda is committed to vaccinating at least 60 per cent of its population within the next two years and, like most countries, it has established a tiered prioritisation list that provides vaccines to those at highest risk first: frontline health-care workers, the elderly and people with underlying chronic conditions. In order to calculate how many vaccines would be needed in each community according to this prioritisation, the government conducted a mass, rapid national screening process. Recognising that in more remote village settings, village leaders would have the most up-to-date information on community members and household structures, over the course of two months a cross-government operation was undertaken to survey communities and collect this information from local leaders. With updated population demographics and an up-to date non-communicable diseases screening, the government of Rwanda can now accurately procure [30].

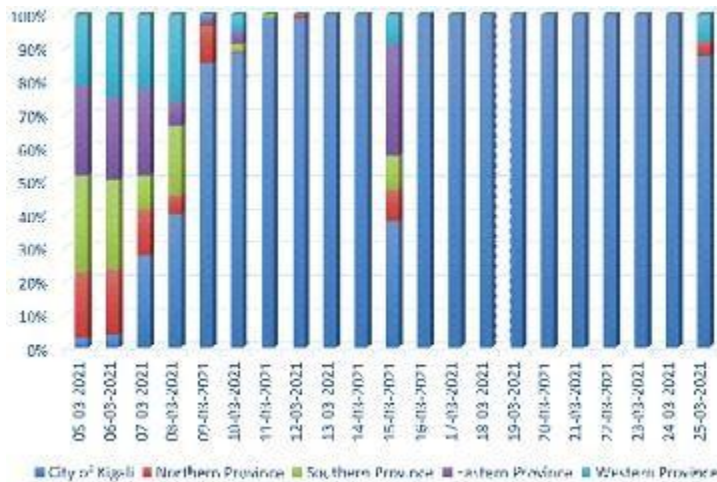
The vaccination started just the day following the distribution and reported where the vast majority of vaccinations were tracked in real-time in a digital database that makes data available to decision-makers and citizens. Eliminating paper records is enhancing the ability of health teams and government to track health indicators in real-time and to digitally certify the status of those who have been vaccinated. In general, vaccinations were reported multiple times a day by health centres and districts to give the National Covid-19 Task Force, command post, head of state and cabinet a picture of the rollout [30].



**Figure9.** The first day of vaccination, all vaccinated have been reported

**Source:** Ministry of Health

During 21 days, 421573 people have been vaccinated around the country and the following figure show how the activity was daily conducted in all province and the City of Kigali



**Figure10.** Image of a daily vaccination reporting by province and the City of Kigali

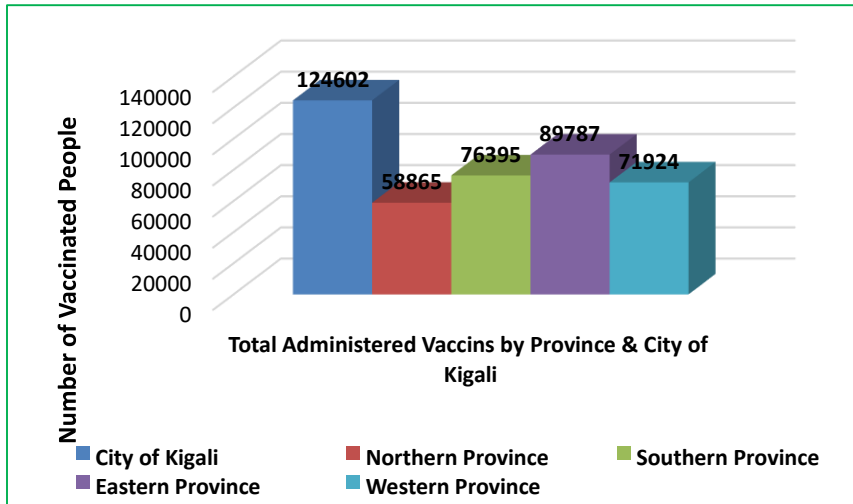
**Source:** Data from Ministry of Health and Rbc, Illustration by the Author

Since the first COVAX shipment arrived on 3 March, the government of Rwanda has kept the public informed of the progress of deployment. Daily updates from the Ministry of Health and government of Rwanda on Twitter, TV and radio have allowed every citizen a window into the rollout operations. A key element included in the updates is the identification of the priority groups getting vaccinated that day with photos. For example, a tweet posted in both English and Kinyarwanda from the Ministry of Health on 9 March explained which essential frontline workers and high-risk community members had received vaccinations and was accompanied by photos of those participants and the process.

Regular newspaper articles and nightly radio interviews also track updates. Trusted community leaders have also been utilised to help those invited for vaccination know where to go and to understand the benefits of vaccination on their collective community [30]. After 21 days, the following is the image of how vaccines have been administered in total by province and the City of Kigali.

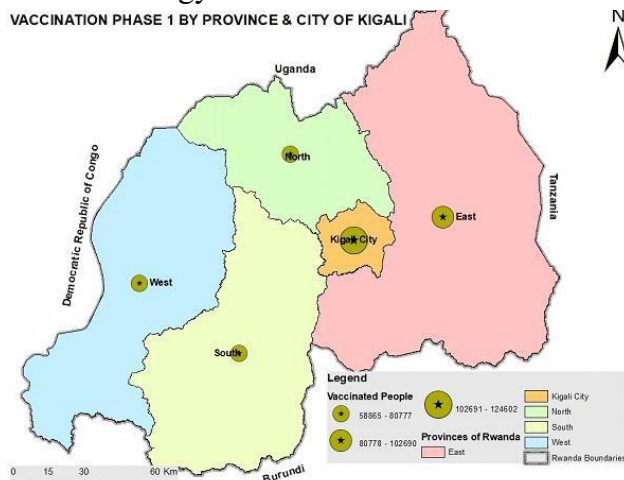


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**Figure11.** Total number of people vaccinated by province and the City of Kigali. **Source:** Data from Ministry of Health and Rbc, Illustration by the Author

It is very important to highlight Rwanda's four pillars of success in management of COVID-19 : leadership and collaboration across government, agile last-mile delivery approaches, proactive communications strategies that are tailored to the context of the communities being served, and the acceleration of digital record-keeping and new technology infrastructure.



**Source:** Various sources of data; visualisation by the author

Experience around the world has demonstrated that attention to governance is important to the ability of health systems to fulfil essential public health functions. Health governance concerns the institutions and linkages that affect the interactions among citizens/service users, government officials and health service providers. There is general agreement that good health governance is characterized by responsiveness and accountability; an open and transparent policy process; participatory engagement of citizens; and operational capacity of government to plan, manage, and regulate policy and service delivery [31].

Observing Rwanda today, it is easy to forget that only 27 years ago, the country had suffered a genocide against Tutsi that left its infrastructure destroyed, institutions damaged and discredited, service delivery capacity close to non-existent, and citizens dispersed and traumatized.



## 5. CONCLUSION

Participation, rule of law, transparency, responsiveness, consensus oriented, equity and inclusiveness, effectiveness and efficiency, and accountability as principles or characteristics of good governance have applied at each level of decisions taken by the Government of Rwanda while managing the pandemic of COVID-19.

In fact, the government based its decision always on available information from national and international scientists and has placed its population security and wellbeing into the center of decisions. In beginning the government advised on preventive measure and established necessary infrastructure for complying with hygienic measures. Once the pandemic arrived into the country, measures have been strengthened up to the total lockdown but with supportive actions to vulnerable families where the government provided food.

The treatment and isolation of contaminated was free of charge from the patient and all charges was to be taken by the government, this was high commitment of the government to the protection of its citizens. All the process of managing the pandemic was transparent with a daily updated digital information and a well-coordinated synergy of all national and local institution.

The country adhered to international frameworks that could facilitate acquisition of vaccines, once available and new infrastructure adapted to the storage of vaccines has been into place as quick as possible. Once the vaccine available and approved by institutions that have ability, Rwanda was more than ready to the process of vaccination. The same coordination has made the vaccination process a success by a quick distribution of vaccines and their rapid administration to the population.

Given the meticulous management of COVI-19 pandemic and resulting outcomes as presented; and given the definition of good governance, we conclude this work by confirming that Rwanda could be a model for many countries in good governance, once measured on the efficient management of the world pandemic.

## REFERENCES

Governance Institute of Australia. What is governance? [Online] Governance Institute of Australia, 2021. [Cited: April 2, 2021.] <https://www.governanceinstitute.com.au/>.

Austrian Development Cooperation. Good Governance. Vienna: Federal Ministry for European and International Affairs, 2006. Policy document.

ISSA. ISSA Guidelines: Good Governance. [Online] [Cited: April 1, 2021.] <https://ww1.issa.int/>. [4] UNESCAP. What is Good Governance? Bangkok: United Nations, 2009.

MUTESI, Florence. A viewpoint of Rwanda's Governance. Kigali: Rwanda Governance Board (RGB), 2014.

Mo Ibrahim Foundation. Ibrahim Index of African Governance (IIAG). [Online] Mo Ibrahim Foundation, 2006. [Cited: April 2, 2021.] <https://mo.ibrahim.foundation/iiag>.

Mo Ibrahim Foundation. 2020 Ibrahim Index of African Governance. London: Mo Ibrahim Foundation, 2020.

World Health Organization. Managing epidemics: Key facts about major deadly diseases. Geneva: World Health Organization (WHO), 2018.

USA Homeland Security Council. National Strategy for Pandemic Influenza. Washington DC: Centers for Disease Control and Prevention, 2005.

Rabinowitz, Phil. Collecting and Using Archival Data. Kansas: The University of Kansas, 2008.

Republic of Rwanda: Ministry of Health. Update on COVID19 on 30.05.2020. Kigali: MoH, 2020.

XINHUANET. Rwanda improves capacity for COVID-19 vaccine storage. [Online] Xinhua, January 15, 2021. [Cited: April 4, 2021.] [http://www.xinhuanet.com/english/2021-01/15/c\\_139669922.htm](http://www.xinhuanet.com/english/2021-01/15/c_139669922.htm).

UNICEF Rwanda. 340,000 doses of COVAX vaccines due in Rwanda today. [Online] UNICEF Rwanda, March 3, 2021. [Cited: April 4, 2021.] <https://www.unicef.org>.

News24.com. Rwanda becomes first African nation to use Pfizer COVID-19 vaccine. [Online] News24.com, March 5, 2021. [Cited: April 4, 2021.] <https://www.news24.com>.

High Commission of India in Kigali. PRESS RELEASE - High Commission of India, Kigali Rwanda. [Online] March 5, 2021. [Cited: April 4, 2021.] <https://hcikigali.gov.in>.

Writer, Staff. Rwanda Military Distributing Covid-19 Vaccines. [Online] Taarifa, March 4, 2021. [Cited: April 4, 2021.] <https://taarifa.rw/rwanda-military-distributing-covid-19-vaccines/>.

Rwanda Biomedical Centre. Public Notice on Novel Coronavirus. [Online] RBC, 2020 & 2021. [Cited: March 30, 2021.] <https://www.rbc.gov.rw/index.php?id=717>.

Republic of Rwanda. Cabinet communiqué – 06/03/2020. Kigali: Ministry in charge of Cabinet Affairs, 2020.

Sabiiti, Daniel. Rwanda Recommends Use of Face Mask. [Online] KT Press, April 19, 2020. [Cited: April 5, 2021.] <https://www.ktpress.rw/2020/04/rwanda-recommends-use-face-mask/>.

Katrine, Habersaat Bach, et al. Ten considerations for effectively managing the COVID-19 transition. Nature Human Behavior VOL 4. June 24, 2021, pp. 677–687.

Naz, Karim, et al. Lessons Learned from Rwanda: Innovative Strategies for Prevention and Containment of COVID-19. Annals of Global Health. February 25, 2021, pp. 1–9.

Republic of Rwanda. The Constitution of the Republic of Rwanda of 2003 revised in 2015. Kigali: Republic of Rwanda, 2015.

USA Centers of Disease Control and Prevention. Interim Clinical Guidance for Management of Patients with Confirmed Coronavirus Disease (COVID-19). Atlanta: CDC, 2021.

Karuhanga, James. COVID-19: Rwandans support needy families during lockdown. [Online] The New Times, March 28, 2020. [Cited: April 6, 2021.] <https://www.newtimes.co.rw/news/covid-19-rwandanssupport-needy-families-during-lockdown>.

Mutanganshuro, Lavie. Govt begins distribution of essential goods to citizens affected by COVID-19 lockdown. [Online] The New Times, March 28, 2020. [Cited: April 6, 2021.]

<https://www.newtimes.co.rw/news/govt-begins-distribution-essential-goods-citizens-affected-covid-19lockdown>.

Bishumba, Nasra. 8 things you need to know about gov't food distribution programme. [Online] The New Times, April 4, 2020. [Cited: April 6, 2021.] <https://www.newtimes.co.rw/news/8-things-you-need-knowabout-govt-food-distribution-programme>.

National Bank of Rwanda. Economic Recovery Fund. [Online] BNR, June 9, 2020. [Cited: April 6, 2021.] <https://www.bnr.rw/browse-in/economic-recovery-fund/>.

Namata, Berna. Rwanda cushions ailing businesses with \$350m economic recovery fund. [Online] The East African, March 31, 2021. [Cited: April 6, 2021.] <https://www.theeastafrican.co.ke/tea/business/rwandacushions-ailing-businesses-3343020>.

Ashimwe, Edwin. Rwanda rolls out Covid vaccination to high-risk groups. [Online] The New Times, February 14, 2021. [Cited: April 4, 2021.] <https://www.newtimes.co.rw/news/rwanda-rolls-out-covidvaccination-high-risk-groups>.

HAYLEY, ANDERSEN and ANSTES, AGNEW. Vaccinating Africa: What governments can learn from Rwanda's effective rollout. London: Tony Blair Institute for Global Change, 2021.

Derick W., Brinkerhoff, Catherine, Fort and Sara, Stratton. Good Governance and Health: Assessing Progress in Rwanda. Kigali: USAID, 2009.