

Interpretative and Discursive Communication Strategies for Addressing Misinformation in State Communication: An Example of COVID-19

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Abstract

This study examined the interpretative and discursive strategies employed to deconstruct misinformation circulating in both physical and digital spaces during the COVID-19 pandemic in Tanzania. Drawing on van Leeuwen's (2008) framework of legitimation strategies, the study analysed five purposively selected speeches delivered by the late President John Pombe Magufuli, the current President Samia Suluhu Hassan, and the former Minister for Health, Dorothy Gwajima. The choice of speeches delivered by both presidents, each during their term, is influenced by their differing approaches to pandemic management. The speeches were obtained from the Tanzania Broadcasting Corporation (TBC). The findings reveal that the deconstruction of misinformation was achieved through the invocation of institutional authority to direct government institutions to address misinformation, appeals for the public to rely on scientifically credible sources of information, the engagement of specialized experts in disseminating pandemic-related information, the presentation of authoritative statistical data, and the emphasis on collective social experience as well as lessons drawn from other countries. Additional strategies included reinforcing spiritual values, promoting responsible citizenship, and framing mitigation measures in a positive light. These findings underscore the importance of fostering public trust in recommended health measures and minimising public panic during health crises. The study recommends that efforts to counter misinformation should be sensitive to prevailing social norms and values, grounded in established systems of knowledge, leverage institutional authority for decisive action, and foreground shared social experiences.

Keywords:

COVID-19 pandemic, misinformation, communicative strategies, Tanzania

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Introduction

The emergence of the COVID-19 pandemic in Wuhan, China, at the end of 2019 necessitated the dissemination of accurate and timely information to the public through various discursive channels. However, alongside verified information, misinformation also surged. Both accurate information and misinformation circulated extensively across digital and physical spaces (Chowdhury, Kabir, Abdulai, & Alam 2023; Khan, Khan, & Hussain 2022). Misinformation often involves deliberate attempts to spread false or misleading information through digital platforms, social networks, and physical spaces, thereby undermining efforts to manage and contain the pandemic (Khan et al. 2022). Previous studies indicate that certain mass media outlets, social media platforms, and health, political, and public discourses deliberately disseminated false information during the pandemic. Such misinformation included attributing blame to particular actors or groups for the pandemic, the circulation of fake news, and the strategic use of multiple or conflicting voices (Milutinović 2021; Mohamed, Solehan, Mohd Rani, Ithnin, & Che Isahak 2021; Y. Wang 2022). Other manifestations of misinformation included the stigmatisation of health facilities and healthcare workers, the underestimation of the pandemic's severity and consequences, and the dissemination of sensational or shocking narratives (De Rosa & Mannarini 2020; Wang, Zhou, Zhang, Evans, & Zhu 2020).

Scholars have also examined how undesirable actions or false information can be denied or deconstructed through processes of legitimation and delegitimation. According to van Leeuwen (2008), the rejection of undesirable actions can occur when power holders employ discourse to emphasise systems of social knowledge, prevailing social norms, collective social experience, and the instrumental means by which actions are carried out. Reyes (2011) further argues that power holders may draw on expert authority, rational argumentation, and emotional appeals to counteract undesirable behaviours within a social group. Reyes also notes that actors may invoke personal witness or involvement in events to refute false accusations propagated by misinformers.

From a discourse-analytic perspective, interlocutors may employ speech acts of denial to challenge accusations perceived as inaccurate or inappropriate (van Dijk 1997, 2013). Additionally, discursive strategies

often involve normative evaluations that frame actions or claims as acceptable or unacceptable, good or bad, ethical or unethical, and permitted or prohibited to delegitimise misinformation (van Dijk 2013; van Leeuwen 2008) Despite these scholarly insights into the deconstruction of undesirable actions and misinformation, the denial and management of ill-information during the COVID-19 pandemic in Tanzania remained a significant concern.

COVID-19 Contexts in Tanzania

Like many countries worldwide, Tanzania reported its first confirmed case of COVID-19 on 26 March 2020. The pandemic posed multiple public health threats, triggering social unrest and eliciting diverse social responses. In response, President John Pombe Magufuli initially welcomed World Health Organisation (WHO) experts to collaborate with the National Response Team (NRT) to address the crisis (Hamisi, Dai, & Ibrahim, 2023). During the early stages of the pandemic, President Magufuli adopted several WHO-recommended mitigation measures, including the closure of schools, universities, and public gathering places. However, his later response was characterised by inconsistencies with WHO-recommended interventions (Carlitz, Yamanis, & Mollel 2021; Kangwerema et al., 2021; Makoni 2020). Scholars argue that his emphasis on traditional remedies over WHO-endorsed measures contributed to weak coordination with the Africa Centres for Disease Control and Prevention (Africa CDC) and the WHO (Kangwerema et al. 2021).

Following his death on 17 March 2021, Samia Suluhu Hassan assumed the presidency and leadership of the national COVID-19 response. On 27 July 2021, she initiated nationwide vaccination and testing campaigns and underscored the seriousness of the pandemic, while promoting mask-wearing and other preventive measures (Robinson & Malima 2021). The contrasting approaches adopted by the two heads of state in managing the pandemic generated public confusion and contributed to the proliferation of misinformation regarding COVID-19 and its mitigation measures (Malima, Keya, & Rutechura 2024; Malima & Ngaiza 2023).

Additionally, scholars have documented inconsistencies in COVID-19-related discourses among government officials, social media platforms,

mass media, and high-risk individuals. Although public, political, health, and media discourses play a crucial role in shaping public responses during crises, their effectiveness has been questioned in the Tanzanian context and beyond. Consequently, these inconsistent discourses required systematic deconstruction, as they contributed to the circulation of misinformation during the pandemic.

Literature Review

The prevalence of misinformation flowing mainly from social media in Tanzania was driven by multiple factors, including limited access to timely information on ongoing risk management activities, unreliable risk communication characterised by mixed messages, a lack of shared understanding of response strategies among authorities, unclear guidance from key stakeholders, insufficient transparency in information sharing across ministries, and divergent approaches to managing the pandemic (Hamisi et al. 2023; World Health Organisation [WHO] 2022). These deficiencies in risk communication contributed to public confusion and facilitated the proliferation of COVID-19-related misinformation in the country. Existing studies further indicate that public, social media, and political discourses frequently frame mitigation measures negatively. In particular, such discourses underestimated the severity of the pandemic by comparing it to HIV or advanced influenza. In addition, some health experts have questioned or denied the recommended mitigation measures, often presenting multiple and conflicting voices.

Moreover, widespread fake news surrounding COVID-19 vaccines circulated during the pandemic. Vaccination was variously associated with death, reduced male sexual performance, the erosion of human personality, and alleged capitalist economic interests behind the pandemic (Kamazima, Kakoko, & Kazaura 2020; Kangwerema et al. 2021; Malima et al. 2024; Ngaiza & Malima 2023; Robinson & Malima 2021). Despite documenting the prevalence and effects of misinformation, these studies did not examine how misinformation was discursively deconstructed in Tanzania during the pandemic.

Beyond Tanzania, misinformation disseminated through health, political, and media discourses has been documented in countries such as the United States, China, Romania, and Italy (Allen & Ayalon, 2021; Cmeciu, Anton &

Nicola, 2022; De Rosa & Mannarini 2020; Kozłowska, 2020; Wang 2022). These studies report the widespread use of blame-oriented discourses, in which various actors were held responsible for the virus's emergence and spread. Governments were accused of failing to protect their populations, health experts were portrayed as deceptive or dangerously incompetent, and health facilities were polarised, particularly in relation to those in China. Other discursive patterns included underestimating the pandemic and the presence of conflicting expert voices. However, what these studies largely overlook are the specific communicative strategies employed to counter and manage misinformation about the pandemic and its mitigation measures.

In response to this gap, the present study analyses the communicative strategies employed in Tanzanian state discourse to counter misinformation during the COVID-19 pandemic, to propose more effective approaches to managing misinformation in future public health crises.

Materials and Method

Theoretical Framework

This study draws on van Leeuwen's (2008) legitimisation framework as an analytical tool for examining how power holders discursively construct, justify, and contest meanings in contexts of crisis. The framework is particularly suitable for analysing state communication during the COVID-19 pandemic because it accounts for how institutional actors use language to manage uncertainty, secure compliance, and shape public interpretations of contested actions and claims.

In this study, legitimisation and delegitimisation are not treated as theories of misinformation in themselves. Rather, they are understood as discursive mechanisms through which knowledge claims, actions, and sources of authority are rendered credible or non-credible in public communication. Misinformation is conceptualised as contested knowledge circulating in the public sphere. At the same time, legitimisation refers to the discursive processes through which state actors authorise particular interpretations as

valid, rational, moral, or socially appropriate. Delegitimation, conversely, involves the discrediting, rejection, or problematization of alternative or misleading claims. From this perspective, van Leeuwen's framework does not explain the origins of misinformation, but provides analytical tools for examining how misinformation is addressed, challenged, or neutralised through discourse.

Accordingly, the framework is applied instrumentally to analyse how state actors sought to restore epistemic authority and guide public interpretation during moments of heightened informational uncertainty, rather than to assume that all attempts to counter misinformation are inherently legitimate or effective. In crisis contexts marked by fear, ambiguity, and competing narratives, legitimation emerges as a central communicative resource through which authorities attempt to reassert credibility and rebuild public trust.

Van Leeuwen's typology further enables a fine-grained analysis of the specific discursive resources through which legitimacy is constructed. Authorisation captures appeals to institutional authority, expert knowledge, and legal or policy frameworks that underpin state efforts to counter misinformation. Rationalisation focuses on goal-oriented explanations, causal reasoning, and instrumental justifications used to explain mitigation measures and refute misleading claims. Moralization enables the examination of normative evaluations that frame actions or behaviours as socially responsible or irresponsible, ethical or unethical. In contrast, mythopoiesis highlights the role of narrative forms—such as cautionary tales, moral exemplars, and appeals to responsible citizenship—in legitimising official positions.

Overall, the framework aligns well with the study's focus on the deconstruction of misinformation because it foregrounds the discursive processes through which claims are rendered credible or illegitimate, rather than treating misinformation solely as a deficit of information. By integrating social norms, shared knowledge, institutional power, and narrative reasoning, van Leeuwen's model enables a contextualised analysis of the socio-cultural and ideological dimensions of misinformation management in Tanzania. Consequently, it provides a coherent lens for understanding how state actors mobilised discourse to challenge contested

claims, negotiate authority, and guide public behaviour during the COVID-19 pandemic.

Data Collection

The study was conducted in Tanzania and drew on five official speeches obtained from the archives of the Tanzania Broadcasting Corporation (TBC). Two of the speeches were delivered by the late President John Pombe Magufuli on 22 April 2020 and 3 May 2020. President Samia Suluhu Hassan delivered two additional speeches on 6 April 2021 and 28 July 2021. The fifth speech was delivered by the then Minister for Health, Dorothy Gwajima, on 28 July 2021.

A convenience sampling technique was employed to select the five speeches, as these were the only publicly available COVID-19-related speeches delivered by state officeholders during the pandemic. This sampling approach was deemed appropriate given the limited availability of relevant official texts and its adequacy in achieving sufficient internal validity to support analytical generalisation regarding state management of the pandemic (Golzar, Noor, & Tajik, 2022).

Data Analysis and Analysis

The study adopted Critical Discourse Analysis (CDA) as its overarching methodological approach. CDA enabled the researcher to examine the relationship between textual practices and broader social practices, uncovering how misinformation circulating during the COVID-19 pandemic was discursively addressed and countered in state communication. In particular, CDA facilitated the analysis of how texts are connected to material and institutional practices, as well as to power holders' socio-political ideologies, experiences, values, systems of knowledge, and normative frameworks. Through this lens, CDA illuminates how power, control, domination, and discrimination are discursively produced and reproduced (Fairclough, 2013; Gee, 2014; Stewart, 2006; Wodak, 1999).

Consistent with these theoretical perspectives, the study employed van Leeuwen's (2008) legitimisation framework as an analytical tool to examine state discourses and to uncover how misinformation about the pandemic

and its mitigation measures was discursively addressed and deconstructed. To ensure a systematic and transparent analytical process, the study followed the thematic network analysis procedures proposed by Attride-Stirling (2001).

The analysis proceeded through several stages. In the first stage, the researcher transcribed the data from the five state speeches, all originally delivered in Kiswahili. In the second stage, the transcribed texts were translated into English to enhance accessibility for a wider scholarly audience. To minimise the researcher's bias, only the excerpts selected for analysis were translated by independent English language experts (see Excerpts 1-17 in the analysis section). The third stage involved coding the raw data into meaningful analytical units. The coding process was guided by van Leeuwen's four legitimisation strategies—authorisation, rationalisation, moralization, and mythopoeia. The identification of each strategy and its sub-strategies was informed by the analytical questions outlined below.

i) **Authorisation: How did power holders employ institutional authority, invoke expert voices, refer to established social norms, draw on exemplars, and mobilise laws, regulations, and policy frameworks to debunk misinformation during the crisis?**

ii) **Rationalisation: How did power holders utilise instrumental rationality, experiential rationality, and scientific rationality to deconstruct misinformation during the crisis?**

iii) **Moralisation: How did power holders employ moral evaluation, analogy, and abstract value systems to delegitimise and debunk misinformation?**

iv) **Mythopoesis: How did power holders employ storytelling and narrative structures to debunk misinformation during the crisis?**

The fourth stage involved refining the themes to establish their coherence and interconnectedness with the raw data. At this stage, I consolidated similar themes and separated divergent ones to enhance the internal validity and trustworthiness of the findings. In the fifth stage, the findings were

presented, with each sub-strategy supported by translated excerpts from the speeches to ensure the credibility of the analysis further. The final stage involved interpreting and discussing the identified strategies. This stage drew on relevant theoretical frameworks, the underlying arguments derived from the findings, prior studies, and the crisis's socio-economic context to provide a comprehensive understanding.

To further strengthen the trustworthiness and transparency of the analysis, inter-coder reliability was employed. Two independent researchers were tasked with coding the data to generate consistent themes, thereby reducing subjectivity and enhancing the robustness of the findings (Harley & Langdon 2018; Saunders, Lewis, & Thornhill 2012).

3. Findings

This section analyses selected excerpts to identify and examine the linguistic strategies employed by power holders to deconstruct misinformation about COVID-19 in Tanzania. The findings are presented and discussed categorically according to the analytical framework.

Authorisation Strategy

The then-Minister of Health, Dorothy Gwajima, cited a prior statement by President John Pombe Magufuli to refute public claims that the late president opposed the use of COVID-19 vaccines. She employed this strategy by using the verb "said", thereby clarifying that President Magufuli did not reject vaccination outright, but rather emphasised the need for scientific approval before their use. This discursive manoeuvre deconstructed misinformation circulating among the public regarding the president's stance on vaccines. An illustration of this strategy is provided in Excerpt 1:

- (1) John Pombe Magufuli, who led the fifth government regime, presented the following issues while in Chato on 27th April 2021, saying, "The Ministry of Health should stop using vaccines without their approval". This is what he said. There have emerged pseudo-experts who have edited this speech to mislead [the public]. There have also emerged individuals who tend to mislead others instead of listening." Dorothy Gwajima here resorted to quoting the

authority [President Magufuli], insisting, 'that is what he said'. She did so to borrow power to make her argument sound credible to the general public.

It was also observed that Dorothy Gwajima urged Tanzanians to rely on credible sources of information. She achieved this communicative objective through the verbal construction "urge," which directed the public to consult reliable sources, including those accessible via Google. This strategy aimed to protect citizens from misinformation regarding COVID-19 mitigation measures. An illustration of this approach is provided in Excerpt 2:

- (2) "I urge the Tanzanians to search for credible information from credible online sources. Materials are fully available on Google. You Google the keyword, and then you can understand. You Google WHO, then it opens, then you can compare these things."

President Samia Suluhu Hassan emphasised her consultation with both domestic and international experts in the approval of COVID-19 vaccines. This communicative strategy aimed to refute claims that the vaccine rollout in Tanzania lacked expert or scientific involvement. The strategy was realised through the use of a targeting verb construction, specifically "thank", to acknowledge the efforts of the Health Ministry Special Committee, in collaboration with the Ministry of Foreign Affairs, in monitoring vaccines. This approach serves to legitimise the state's vaccine initiatives by demonstrating adherence to expert guidance and procedural oversight. An illustration of this strategy is provided in Excerpt 3, with the President stating:

- (3) "I thank the Ministry of Health and the Ministry of Foreign Affairs for their joint efforts. I left this work to the Ministry of Health Special Committee and Foreign Affairs to make the follow-up."

President John Pombe Magufuli invoked institutional authority to urge the public to remain cautious of rumours propagated by shortsighted individuals. He instructed citizens to disregard misinformation circulating on social media and called on users to refrain from producing or disseminating false information. This communicative strategy was realised

through imperative verb constructions, which asserted authority and regulated public behaviour. Excerpt 4 illustrates this strategy in practice:

- (4) “I ask Tanzanians not be driven by emotions from shortsighted individuals. I request that my fellow social media owners who have been using their platforms illegally stop disseminating false information. But I also request the public to ignore those social media which exaggerate to scare the Tanzanians.”

President John Pombe Magufuli was also found to invoke institutional authority to direct government institutions in addressing misinformation. He employed imperative verb constructions to instruct the Health Ministry, law enforcement agencies, the Tanzania Communications Regulatory Authority (TCRA), and other relevant institutions to raise public awareness about COVID-19 and to act against those disseminating false information. This strategy illustrates the use of formal authority to manage misinformation and coordinate institutional responses. An example of this approach is provided in Excerpt 5:

- (5) “For information that every death is a Covid-19 case, the Ministry of Health should make it clear. This is because a widespread misconception is being circulated to instil panic among the public. But I instruct the security agencies, AGP, you are here, deal with them. You should cooperate with TCRA and other security agencies to deal with these people who want to manipulate the normal situation.”

Therefore, the analysis of the findings indicates that authoritative strategies employed to deconstruct misinformation during the COVID-19 pandemic in Tanzania encompassed several key practices: referencing previous statements and consulting experts to validate claims; invoking institutional authority to urge the public to rely on credible sources, remain vigilant, and disregard misinformation; and directing government institutions to address and manage those spreading false information actively.

Rationalisation Strategy

With reference to the rationalisation strategy, Dorothy Gwajima appealed to it by drawing on scientific evidence to deconstruct the stigmatisation of COVID-19 vaccines. She employed circumstantial (means) elements within material/behavioural clauses to convey that public concerns and misinformation circulating on social media would be addressed scientifically, based on evidence, and with full professional judgment. This strategy reinforced the credibility of the state's response and countered false narratives surrounding the vaccines. An illustration of this strategy is provided in Excerpt 6:

- (6) "All the claims which have been flourishing in the social media and other unknown emerging claims will be answered scientifically with pieces of evidence, with wisdom from professionals. The target is that each one with a claim should be open and not miss this opportunity of making the right decision."

Moreover, Dorothy Gwajima employed instrumental rationality to highlight educational initiatives aimed at raising public awareness and countering falsehoods about COVID-19 vaccines. She used identification constructions to specify the type of education necessary to deconstruct misconceptions, such as the belief that vaccines contain magnetic materials. This strategy is exemplified in Excerpt 7, stating:

- (7) "This education will also remove the misconception that when one is vaccinated, their body can attract magnetic materials such as a silver coin."

Gwajima was also found to employ instrumental rationality to demonstrate the structured role of professors and other scientists in addressing public concerns through messages, emails, and televised discussions. The objective of this strategy was to systematically respond to misconceptions regarding COVID-19 mitigation measures, as illustrated in Excerpt 8:

- (8) "About the rumours that Covid-19 destroys one's personality, it is a lie, it is a falsehood. We shall make it clear. Our experts are there ready to explain. Every day, they will be sitting from nine to three P.M. Their main activity will be answering phone calls."

Professors will respond to emails and participate in television discussions. They will elaborate on this issue with love and with good intentions.”

Dorothy Gwajima was also found to emphasise scientific authority by highlighting the role of experts specialised in Physics, Chemistry, and Biology (PCB). She employed intensive identification constructions to convey that knowledge about COVID-19 vaccines resides with individuals who possess formal scientific expertise, distinguishing them from the general public, whose information lacks authoritative scientific grounding. This strategy served to reinforce credibility and to delegitimise misinformation circulating among non-expert sources. An illustration of this strategy is provided in Excerpt 9:

- (9) “So, my colleagues, these issues belong to scientific disciplines. They are matters of science – specifically, molecular biology and related fields. They are highly specialised and require expertise in areas such as PCB and CBG. Only with such scientific competence can one claim the authority to engage with these issues and speak credibly in the global arena, where they can be heard and taken seriously.”

John Pombe Magufuli was also found to emphasise the publication of reliable statistics, such as death tolls, new infection cases, and recoveries. The target was to deconstruct ill-information about wrong death cases, wrong spread cases, and the possibility of not recovering when one is a coronavirus case. This is exemplified below:

Then President Magufuli consistently opposed the publication of statistical data, including figures on deaths, new infections, and recoveries. This strategy aimed to **deconstruct misinformation** concerning exaggerated death tolls, incorrect reports on infection rates, and misconceptions about the likelihood of recovery among COVID-19 patients using his preferred domestic mitigation methods. By presenting verifiable statistics, the president sought to reinforce public trust in official information and counter false narratives circulating in the community. An illustration of this strategy is provided in the following excerpt:

- (10) “But also, our information should be realistic about the recovery cases. Those statistics about recovery cases should be published for the public to be aware of the possibilities of recovery when someone becomes a victim.”

On the other hand, Dorothy Gwajima drew on experiential truth by citing the experiences of Western countries with COVID-19 vaccines. This strategy aimed to refute claims that such vaccines were not administered in countries like the United States. She employed verbal constructions to explain that the same vaccines had been widely used in major nations, including the US and countries in Europe. By doing so, she leveraged comparative experience to legitimise vaccine use in Tanzania and counter misinformation about their safety and applicability.

On another occasion, Dorothy Gwajima employed experiential truth to highlight the use of COVID-19 vaccines in Western countries. This strategy aimed to counter claims that such vaccines were not administered in countries such as the United States. She used verbal constructions to explain that the same vaccines had been widely deployed in major countries, including the US and Europe. By referencing these international experiences, Gwajima sought to legitimise the use of the vaccines in Tanzania and to counter misinformation circulating among the public. This strategy is exemplified in Excerpt 11:

- (11) “The honourable President, I would like to say that to a large extent we have witnessed the big nations being vaccinated, like that of Europe and America. If you go there, you shall see the data. They have a big success, and life goes on.”

She also drew on experiential truth to refute misinformation claiming that COVID-19 vaccines could alter or destroy human DNA. She argued that such a claim was scientifically implausible, noting that even HIV, which has been present in the country for over thirty years, has not altered human DNA. She employed hedging constructions to carefully explain that vaccines do not disrupt human biology or personality. This strategy served to reassure the public and counter unfounded fears about vaccine safety. An illustration of this approach is provided in Excerpt 12:

- (12) “If it could be disturbing human personality, the HIV should have done the same. This is because we have lived with it for about thirty years. This virus could have disturbed the human personality because it lives in the DNA.”

President Samia Suluhu Hassan employed experiential rationality to deconstruct misinformation concerning the alleged adverse effects of COVID-19 vaccines, including claims about increased mortality, reduced sexual ability, and compromised immunity. She drew on her personal experience with vaccines since childhood to reinforce the credibility of her statements. Using cognitive mental process constructions, she explained how prior vaccinations had consistently contributed to her health and well-being, thereby assuring the safety and efficacy of the COVID-19 vaccines. On another occasion, President Samia Suluhu Hassan employed experiential rationality to refute misinformation claiming that COVID-19 vaccines caused death, reduced or weakened immunity. She drew on her personal experience with vaccines since childhood to lend credibility to her statements. Using cognitive constructs, she explained that previous vaccinations had consistently contributed to her health and well-being, thereby providing reassurance regarding the safety and effectiveness of COVID-19 vaccines. This strategy is exemplified in Excerpt 13:

- (13) “It reminds me of the 1960s when we were at primary school. We were vaccinated. I think in my body, there are about six vaccines. They gave me life until today. There were some slight side effects. Some individuals had swollen arms, and others still have scars. But we healed, and we are living.”

Samia Suluhu Hassan was also found to have experienced the widespread COVID-19 pandemic death cases in the country. The target was to deconstruct misinformation about the fake death cases associated with the pandemic. She emphasised the seriousness of the pandemic; the way it spread to big cities in the country, leading to massive death cases in Dar es Salaam, Moshi, Arusha, and Kagera. This is exemplified in Excerpt 14, where she says, “But if you go to Moshi, Arusha, Kagera, even Dar es Salaam to meet the victims, they will have something to tell you.”

Therefore, the analysis of state discourses indicates that the use of rationalization to deconstruct misinformation during the COVID-19 pandemic encompassed several key sub-strategies: reliance on scientific knowledge and evidence; emphasis on educational initiatives to raise public awareness; mobilization of scientific authority, including specialized experts, to disseminate accurate information; publication of reliable statistics on deaths, new cases, and recoveries; reference to experiences of other countries in implementing similar measures; utilization of personal or collective experience with vaccines; and highlighting the consequences of the pandemic to reinforce public understanding.

Moralisation Strategy

John Pombe Magufuli employed an analogy to compare the consequences of the COVID-19 pandemic in Tanzania with those in other countries. This approach aimed to refute rumours suggesting that Tanzania was experiencing disproportionately high COVID-19 death rates relative to other nations. By drawing on comparative examples, the president sought to contextualise the pandemic and deconstruct misleading claims about its severity in the country. An illustration of this strategy is provided in Excerpt 15:

(15) "For the three days past, we had sixteen COVID-19 death cases. Therefore, you can compare and compute the ratio with our neighbours. Take sixteen cases with sixty million people in Tanzania, in comparison with the death cases in other countries. You can determine where there are more deaths."

President Samia Suluhu Hassan emphasised the voluntary nature of COVID-19 vaccination in response to rumours claiming that vaccines were mandatory for all citizens. She highlighted the role of individual choice and faith in the vaccination process, as exemplified in Excerpt 16, where she states: "*My colleagues, this vaccine is a free consent for Tanzanians, but also it is all about one's faith.*"

Similarly, Dorothy Gwajima emphasised the importance of responsible citizenship and patriotism in discouraging the spread of misinformation among individuals engaging in risky behaviour. This strategy sought to foster

public accountability and adherence to official guidance, as illustrated in Excerpt 17:

- (17) “We are losing the nation, and you who destroy it will need services that will not be there during your old age. This is because during your youth, you used your effort to mislead people from building this nation.”

Subsequently, Dorothy Gwajima appealed to moral evaluation to highlight the positive attributes of the Johnson & Johnson vaccine in response to claims that it posed a danger to human health. She utilised an intensive attributive structure to emphasise that the vaccine is safe and effective, with only minor side effects. This strategy served to reassure the public and counter misinformation regarding the vaccine’s safety. An illustration of this approach is provided in Excerpt 20, where she states: *“Johnson & Johnson is good; it is friendly with slight side effects”*

Therefore, the analysis of the speeches indicates that power holders employed moralization to deconstruct misinformation in several ways, including: using analogy to demonstrate that the consequences of the pandemic in Tanzania were comparatively lower than in other countries; emphasizing the moral obligations of faith-based adherence; highlighting the voluntary nature of vaccination; promoting responsible citizenship to discourage the spread of false information; and offering positive evaluations of the vaccines to reinforce public confidence.

Discussion

This analysis does not assess audience reception or the effectiveness of these strategies; it is limited to identifying the discursive resources mobilised by state actors in their attempts to counter misinformation. The analysis revealed that power holders relied on three primary strategies: authorisation, rationalisation, and moralisation. The deployment of these strategies reflects how differently these power holders perceived the pandemic and shaped their communicative responses. For instance, former President John Pombe Magufuli appeared to view the pandemic as a form of social manipulation, which may explain his reliance on coercive measures to control social media, politicians, and individuals deemed to be spreading false information. President Samia Suluhu Hassan emphasised

the scientific quality and safety of COVID-19 vaccines to counter misinformation, suggesting that she perceived the pandemic as a natural calamity requiring evidence-based interventions. These findings align with Robinson and Malima (2021), who note that Samia Suluhu Hassan's communication strategies were guided by her view of the pandemic as a serious threat to public health, necessitating the promotion of vaccination as a life-saving measure.

The findings may also be interpreted in light of the Heads of State's intention to gain public trust and confidence in the adoption of either Western or traditional approaches, as advocated by Samia Suluhu Hassan and John Pombe Magufuli, respectively. In this context, Magufuli's emphasis on the publication of reliable statistics, the comparative consequences of the pandemic in Western countries, and the anchoring of COVID-19 to advanced flu (Malima & Ngaiza 2023) may have served to downplay the severity of the pandemic and to position local measures as more appropriate than Western interventions. Conversely, Samia Suluhu Hassan's focus on reliable sources of information, experiential knowledge from past vaccinations, the observed pandemic consequences in Tanzania, and the positive evaluation of COVID-19 vaccines appears to have been intended to encourage public acceptance of Western-recommended mitigation measures. These contrasting approaches reflect the leaders' differing perceptions of the pandemic and their strategic use of discourse to shape public behaviour.

Moreover, the findings suggest that the communicative strategies employed by state actors may have been intended to address public confusion arising from inconsistencies in the implementation of pandemic mitigation measures in Tanzania (Kangwerema et al. 2021; Mfinanga et al. 2021). Citizens were uncertain whether to adhere to John Pombe Magufuli's traditional approach or Samia Suluhu Hassan's Western-oriented measures. In this context, Dorothy Gwajima's references to Magufuli's prior statements clarified public doubts about his position on Western mitigation measures. She also urged the public to rely on scientific sources and the expertise of authoritative figures in disseminating COVID-19 information, aiming to reduce confusion around vaccines and other Western-recommended interventions.

The findings further indicate that the strategies were intended to mobilise social compliance and responsibility during the crisis. In response to public tension, unrest, and panic fueled by misinformation, power holders emphasised responsible citizenship. For instance, Dorothy Gwajima called on citizens to protect the nation by refraining from spreading false information. She appealed to religious believers not to spread rumours, framing such behaviour as inconsistent with their moral obligations. Similarly, John Pombe Magufuli engaged social institutions, including security agencies, to monitor and address ill-informed actors. These findings align with Wang (2022) in the context of U.S. presidential discourse and with De Rosa and Mannarini (2020) in Italy, both of which documented the mobilisation of individual and institutional responsibilities as a strategy to manage misinformation during COVID-19.

Conclusion

The study aimed to analyse the communicative strategies employed by power holders to deconstruct misinformation during the COVID-19 pandemic. Five state speeches were collected via convenience sampling from the Tanzania Broadcasting Corporation (TBC) and were analysed using van Leeuwens' (2008) Legitimation Strategies. The findings revealed several key strategies used to counter misinformation, including: (i) employing institutional authority to instruct government agencies in addressing misinformers; (ii) urging the public to rely on scientifically reliable sources of information; (iii) deploying specialized personnel and experts in the dissemination of pandemic information; (iv) publishing reliable statistics; (v) drawing on social and international experiences; (vi) emphasizing spiritual values and responsible citizenship; and (vii) providing positive reinforcement of mitigation measures. These strategies indicate the power holders' efforts to build public trust in recommended measures and to reduce confusion during the crisis. The study recommends that discursive strategies aimed at deconstructing misinformation should account for social norms, values, knowledge systems, and the dual role of power as both controlling and instructive, while incorporating the perceptions and experiences of the social group. Future research should consider additional discourses to provide a more comprehensive understanding of misinformation management during public health crises.

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