



## Can Virtual Leadership Work in Tanzanian Healthcare? Examining SME and Large Provider Practices

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### Abstract

**Background:** The COVID-19 pandemic forced healthcare organisations to adapt rapidly, propelling them into a virtual work environment.

**Objective:** This study delves into the experiences of three hospitals in Dar es Salaam, Tanzania, showcasing how leaders and their teams navigated this shift in diverse settings: two small and one large private hospital.

**Method:** All 30 interviews generated insightful responses, but this small-scale study draws upon the 19 answers that best captured the core themes and findings from the conducted research.

**Results:** Our results show that transitioning teams to the digital space presents challenges different from those of face-to-face teams, requiring leaders and followers to show agility. However, the research also suggests that virtual team members become more productive under the right conditions.

**Conclusion:** Highlighting a gap in the literature, this study offers critical insights that deliver a glimpse of virtual work in Tanzanian hospitals from two small and one large public hospital.

**Keywords:** COVID-19; Virtual work; Tanzanian SME Healthcare leadership; Tanzanian Large firm Healthcare Leadership; Team dynamics.

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## 1. Introduction

Technology is changing work. Global communications systems, including Zoom and Slack, allow virtual teams (VTs) and hybrid leadership styles. The hegemony of the one-size-fits-all leadership style

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for virtually all teams is now possible with a combination of task, charismatic, and transformational variations, even for teams geographically spread. Can leadership be effective without face-to-face interactions? Comparatively, little research has examined this new form of leadership in SMEs (small and medium-sized enterprises) and large firms. However, based on documented findings, there is circumstantial evidence that remote leadership can be effective, even more so than face-to-face leadership (management can be toxically petty), and reduce political manoeuvring focus on the task at hand (Alvesson, 2019; Bell & Kozlowski, 2020; Wigert & Agrawal, 2022).

The COVID-19 pandemic created sudden pressure on SMEs and large firms (Cordova-Buiza et al., 2022; Goulet, 2019; Sandberg et al., 2022; Thambusamy & Bekirogullari, 2020) to shift rapidly to a digital context, and although many resorted to simply using off-the-shelf products to carry out remote work possibilities and add digital channels to interact with customers, a true digital transformation involves more profound learning (Byrd, 2019; Dulebohn & Hoch, 2017).

One crucial pillar of online resilience emerged as effective virtual team leadership. While the substantive goals of inspiring and motivating team members towards task accomplishment remain constant, virtual team leadership presents opportunities and constraints due to digitalising the communications media that threads team members together. (Mehtab, Rehman, Ishfaq, & Jamil, 2018). Building on the core competencies of good in-person leadership, leaders needed to sharpen their virtual communications skills and master the various affordances of mobile collaboration technologies and tools while simultaneously building trust and engaging team members across the digital divide (Zigurs, 2003).

The main body of research on VTs has been conducted on already established virtual teams, focusing on studying the effects of physical proximity on leadership and communication. (Alexandra, 2021; Neufeld et al., 2010) Alternatively, examining barriers to VT effectiveness, best practices for their formation and interaction, team coordination and development, and improved communication and collaboration within them (Marlow, Lace, et al.). Other pertinent research has focused on understanding how features of VTs affect how they are formed and developed (Bell & Kozlowski, 2020; Dulebohn & Hoch, 2017; Malhotra, 2002). However, most of this research has focused on VTs in already established organisations, leaving a gap in exploring how VTs in developing countries operate differently in times of crisis.

## **2. Literature Review**

The term “transactional leadership” was popularised by the German sociologist Max Weber in the late 1940s in a book titled “The Theory of Social and Economic Organization (1947) – although a version of this model of leadership can be traced back much further (Bokhari et al., 2017). In a transactional organisation, processes are grounded in a managerial model with high levels of checks and balances, where people are set to clear short- and long-term goals, with close supervision and a robust rulebook. Performance is the currency of this system, so a satisfactory act or decision is rewarded with praise and money, while a failure to deliver prompts sharp criticism. This process is more likely to produce good results in societies with a robust value system that tolerates checks and balances and where discipline and order reign supreme (Jensen et al., 2019; Richards, 2020). It can also motivate employees who are not naturally creative or cannot thrive in situations without rigid boundaries. Bokhari et al. (2017) argue that organising employees around objective-setting and clear remuneration benchmarks provides employees with both an incentive and a sense of security about income stability. This system describes organisational structures as “left-brain”: they are strictly ordered, rules-based, and happy to stick to the norm. The same scholar contrasts this style with its opposite: “right-brain” leadership, which emerges from organisational structures that are less fixed, more flexible, and responsive to employee feedback (Northouse, 2021). In addition, transactional leadership often emerges from corporate policies handed down from solidifying the manager/subordinate hierarchy. This might encourage consistency

and efficiency in completing tasks, but it can also quash diversity, creativity, and opportunities for employee autonomy (Axtell et al., 2022).

While transactional leadership has been widely used in business contexts, this form of leadership has been criticised for generating short-term, transactional, impersonal relationships with followers (Burns, 1978). It provides limited relevance when considering critical contextual factors in leadership development (Bokhari et al., 2017). How capable is transactional leadership in stepping up to the task of leading unique VTs formed directly because of a crisis? Since effective communication and trust in VTs have been argued to be crucial to VT performance (Garro-Abarca et al., 2021), co-location at work before VT formation facilitates these two factors. However, more reasons exist as to why transformation c for why transformation can be challenging in VTs: VTs tend to generate increased workload and work-life balance issues (Garro-Abarca et al., 2021).

Although overall research on virtual healthcare adoption has increased globally (Kennel et al., 2021), what needs more attention is the lived experience of SMEs compared to large healthcare firms. Considering that SMEs are the backbone of the Tanzanian economy (United Republic of Tanzania, 2023), almost always under-resourced and often lagging behind larger firms (Association of Private Health Facilities in Tanzania, 2022), looking at the experience of employees within these firms in response to the COVID-19 pandemic becomes imperative. Lastly, the research will assess how leadership in these two groups – SME owners and more prominent firm employees, which differ sharply in sizes, staffing, and operational volume – adapted using formal and informal approaches in their teams during this period to ensure that their businesses succeeded and remained resilient as they moved their practice online.

The COVID-19 pandemic created the most demanding requirements leaders have ever faced; keeping their businesses operational during the crisis has become a matter of good leadership. Leaders had to find a way to keep their firms afloat financially, protect their workers, and comply with health control measures (Thambusamy & Bekirogullari, 2020). As people were asked or forced to stay home, many businesses had no alternative but to move to virtual work quickly. Leaders suddenly found themselves directing teams remotely, sometimes over thousands of miles, across time zones, and multiple organisational units. Large enterprises might have been able to provide employees with the equipment required to work remotely immediately, but this has posed a more significant challenge for many SMEs. The ability to work remotely depends on access to technology, such as computers and decent internet connectivity, which are only available to some employees of a smaller business. The idea of being virtual becomes untenable for those with staff in rural or otherwise isolated areas with little or no internet access (Gutierrez, 2022).

### 3. Method

The data collection for the study was done between January and March 2023, where we concentrated on the private health sector in Dar es Salaam, Tanzania, and explored how private health care SMEs, as well as a giant private hospital firm, adapted to the new policy change allowing healthcare workers to work remotely due to the COVID-19 pandemic. The chosen timeframe of the study allowed individuals to recall their experiences and the adaptations they had initiated following the recent policy change. We used the Tanzanian government's official policy defining SMEs based on the United Republic of Tanzania's SME policy (United Republic of Tanzania, 2023), which defines SMEs as employees. In our study, we concentrated on smaller organisations (1 to 99 employees) per the official definition to understand smaller organisations' unique challenges. To explore and understand general organisational experiences from a larger firm perspective, we included the Aga Khan Medical Centre, a 4-star hospital in Dar es Salaam, consisting of 8 participants. We also included Madonna Hospital Ltd (5 respondents) and Morella Polyclinic (5 respondents) to represent the experiences of two SMEs of varying sizes and technical capacities. Using purposive sampling (Douglas, 2022), by targeting innovation and technology departments, we deeply understood the challenges technology officials face at the heart of implementing the policy to effectively work remotely. In-depth semi-structured interviews conducted

face-to-face and remotely – using phone calls or Zoom – created an opportunity to address unique experiences flexibly and adaptively. This allowed us to gain exceptional and deep insights (Lahiri, 2023) into the role of hospital managers, supervisors, data managers, experts, and staff –all with different experiences that would be unique for other stakeholders involved in ensuring the success of the remote work implementation process in the health sector of Tanzania. This data provided a multi-dimensional view of the challenges and opportunities that arose while private healthcare firms implemented this policy change and adapted to the COVID-19 pandemic. The analysis of the 30 interview responses from our respondents revealed several themes and findings. For brevity, this paper focuses on the specific reactions of 19 stakeholders who best illustrate these core themes and findings. The quotes from individuals support the emergent themes and help the reader understand this phenomenon (Margarete, 1994).

#### 4. Results

##### CASE A: Morella Polyclinic

The study team interviewed R1, the group data manager at Morella Polyclinic, who was responsible for “The strategic direction and all of the data that maneuver through our many sites. I also manage a small team of 10 data professionals who largely support the foundational operations of the company, so I am a dual operator.” R1 has been a member of the existing team since 2014 and within the existing configuration for just a year. R7 is a data professional on the staff. He is responsible for: “The accounting information that Morella introduces to the health market. I have served on staff for 2.5 years and worked at the hospital for four years.”

Experiences of VTs: Employees (R1, R7) reported that feeling powerless about the future of the workplace due to a lack of real options and defined terms was a significant anxiety. They spoke of being there for colleagues in these difficult times. Daily check-ins in each team and designated “virtual breaks” provided space for discussion of concerns and provided leaders with at least an approximate assessment of team functioning, given that, as managers, they did not have complete knowledge of individual circumstances. Interestingly, a lack of social contact beyond the formal, public-facing elements of the changed working environment was explicitly highlighted by employees, who reported that “knowledge transfer was slow,” “decisions took much longer to make,” and that “Task completion times increased dramatically.” This was associated with a sense of “acceptance” and accompanying “performance monitoring through the backdoor,” which amounted to “if you have trouble, we are there for you, but we are watching you.”

Perception of Leadership: In the view of R1, leadership is characterised by the qualities of “modelling by leading by example, sincerity, and responsibility.” R1 views leadership as reflected in parenting, mentoring, coaching, etc. R1 clarified that creating consensus among the team was a priority because, once everyone knows the ultimate destination, a leader can empower each team member to figure out the ‘next best step’ without micromanaging them. Let people know what needs to be accomplished, but allow them the freedom and autonomy to get it done – this leadership style fosters ownership of the result. R1 points out that because leadership takes place in specific circumstances, what is appropriate in one situation is inappropriate in another. Leadership strives toward results, not behold to structures, time constraints, or other arbitrary considerations. R9 adds to this portrait of the leader’s task to emphasise the multiple hats a leader must wear: ‘Grandmother, psychologist, and teacher.’ The metaphor suggests that the leader is supposed to provide her team members with direction and guidance, emotional support, and the tools to make their way through treacherous interpersonal (team) dynamics. If we put R1 (collaboration and empowerment) together with R9 (shared multiplicity), we can see a fuller picture of what it can mean to be a leader. This is a leader who brings people together in an

egalitarian collaboration but who also has the shared multiplicity of skills required to deliver to the different issues that arise for the team.

Leadership in VTs: Barriers to transitioning to a remote working environment transpired. R6 feels that more meetings, especially on an individual basis, are needed but that communication needs to be more quickly done over text, though the option is there. R1 agrees, adding that some things can easily be misconstrued without using nonverbal cues. To prevent this from happening, team members have incorporated an experiment to see how things would go by having bi-weekly surveys to assess team effectiveness. R1 adds that they fear the team no longer sees R6 as a good leader and that there is a drop in team morale. R1 further adds that they are spending more time coaching and intervening in a potential conflict that arises in video calls. They are curious if it is because the team is socially inept or if they need to improve their early interventions with the team. Despite the difficulties, R7 says she appreciates the attempts to keep the community alive: “I am still grateful because we do have the daily video call, and we started doing it five times a week instead of three, while before we only had it once a week.” For the solo workers, that sense of community is fundamental. “I sometimes feel like it is beneficial not to be alone. It can be pretty isolating ... The calls have helped quite a bit,” she says. She also feels well-supported: “Everyone on this team is pretty aware of their weaknesses and what they want on their teams, so that helps, too.” Morella’s official communication also recognises that things are ambiguous: R7 says they get helpful updates through official channels, and R1 appears to agree that the ‘communication is working’. The team keeps up their daily stand-ups and a monthly dedicated meeting. Most importantly for R7, they can reach a team member on the phone when needed and know that if they cannot solve it, someone further up the chain can.

Challenges and Possibilities: One of the benefits of VT, R6 tells us, is that now everyone is forced to learn to operate the virtual tool; only a few were chosen in the past to use it, which increased the level of technicality. “Working at home is good,” and, he adds, “commuting saves everyone a truckload of time. Not being able to control both the benefits and the labour space in people’s homes. Specifically the lack of contacts, is a limitation”. R6 sits down on his response to this. He thinks everyone is pleased: “How could we not be? All of my people are perfectly comfortable”. R6 agrees that it is highly impossible to promise six months from now with any certainty. “Depression will not happen to you because of your career or because of your back. It has been four weeks, and we have been labouring this.” R7 states, “It is better for my co-workers since I was relocated.” The statistics expert feels that for these people to take screens from their desks at the Morella Clinic is quite thoughtful of them. However, she cannot have what she needs because she does not have a driver’s license or access to a vehicle. R7 thinks working at home is like living in a workspace because it constantly reminds you of work: “I had a co-worker. I walked home to him one day, and he was perfectly content. He even placed shoeboxes under his laptop to help it stay high. You cannot remove that. You have shifted it, so it is that way”.

#### CASE B: Madonna Hospital

The team at Madonna Hospital employs six people in addition to the team leader. To slow down the virus, the team splits into smaller groups of about four or five individuals, working virtually on different days, while the Madonna team works from home for shift one and purely at the office for five days. Routing two very different teams of people is part of being a manager for R11. There is an immediate supervisor in the group who responds to R11. The other team keeps “stock,” and the first team treats patients. R10 needs to be and wants to turn the wheel autonomously, telling the research team this is the best way of working and stating how much it frustrates her staff and makes them very happy. She adapts her repertoires of intentional leadership force to the team, the individuals as people, and the big changing complex. A leader learns she will say, to adjust because other organisations’ persons are not safe: R10 is the boss of operations, meaning her job includes procurements and contact with transporters. R15 needs to work alone. She “freaks” when people keep telling her what to do.

Experience in VTs: Every year, they have an in-person progress meeting with the employees, usually two hours. With COVID-19, the team leader (R11) had to stop the meetings halfway through because there was not enough time to complete all the progress meetings. This situation caused the first-ever virtual assessment meeting. The call began with a reminder that people needed to keep their webcams on. Looking back at past meetings, one learned that communicating is hard when people need to remember cameras. Not being able to read people with their nonverbal body language, the leader admitted that it felt like being on the phone: “It is like I said a screen is a screen. It just feels less connected in a little bit like a phone way.” Not being comfortable seeing their faces “outside of their normal work, what I call a work environment,” the leader also admitted that they had not taken a break in a month. The leader attributed this to their heavy workloads and focus on efficiency. They did not take breaks and had no social time together because they knew the time limitation. The leader concluded by calling for a group break but quickly realised that everyone was disappearing, reminding them of the social connection and breaking for tea.

Leadership in VTs: The various tools that R11 uses to try to keep everything as close to normal as possible are reported by the Madonna Team, which has been using the new timetables for about a month. The leader notes that although routines help one to “feel at home,” there is also the danger of a “decline in energy.” She says she “feels that she ought to start preparing to deal with the situation so that things do not get too cosy.” “Since nothing is secure,” says R13, “one needs to be adaptable. If a lot of one’s energy – which he defines as both time and exertion – is at an extraordinarily high level, this makes it harder to lead your group successfully and also affects their level of attention to soft values”. R12 suggests that the change to online working has affected the autonomy of the Madonna team. He says that “because the crew was together – work at the laboratory, gym at the club, toilet nearby – I could talk to R15 about the minor things”. He is now trying to do more of this “now that I need to deal with more of these things”. He feels that “some of the minor things are so minor that nothing can be achieved using phone calls or emails”. R13 says that he is not against this type of work entirely since “colleagues will develop because they take on this kind of responsibility”. However, he remarks that this use of the system reduces his sense of belonging. R15 states that “the ambiguity of what we’re facing has not actually been discussed in the team”, and that “these issues are only recently starting to occur to me”. The supervisor of R13 gives formal information and tells worried employees to get in touch with their line manager. R16 says she thinks “she is capable of doing this if necessary; however, these are not things I’d like to discuss in virtual tools and will prefer chatting about them merrily in the coffee shop or before a meeting”. R13 claims that “if the present style of working continues, I will need to increase deadlines and report more into myself. Typically, I set deadlines for myself but need more from R9 (management) now”.

Challenges and Possibilities: The most challenging aspect of a virtual team might be the learning curve of soft skills: How do you build rapport, show empathy, and keep a team together over a screen (R12)? Granted that some people revel in the flexibility of remote work, others can find it challenging to stay organised and maintain focus and structure with little oversight. Moving to an online environment is also affected by commitments and context. Some team members are happy that a shift to working remotely allows them to pursue a hobby simultaneously as working, while others might find that increased commitments are often demanding. R12 appreciated the move to virtual work. She described how it gave her a new appreciation for colleagues: “You notice aspects about them without realising before.” For her, the change was heartening and more than just an appreciation of the inner lives of others. It gave her a greater connection to her teammates as she delved more deeply into their work and relationships. She also noticed that the virtual space invited more autonomous problem-solving as there were fewer occasions to bounce ideas off others readily. This might only sometimes be the most efficient way to work, but it could also be that managers needed to nurture resilience and resourcefulness, so it had certain benefits. However, the freedom to work autonomously could create problems equally well. Another aspect that worried the same team member was that members gradually developed an individual

working style that might not be compatible with others” styles or very hard for others to make sense of. Confusion would be complicated to iron out. Many of these problems arise not from the task but from team members' general life commitments and relational contexts.

#### CASE C: Aga Khan Medical Centre

Experience in VTs: Since the Aga Khan Team delivers medical services, not everyone can work from home; some must be physically on-site in case of a new situation. R23 said that the Aga Khan Team worked daily to keep output up. “That works,” he says, although most people become bored and anxious when working from home. He also gets twice as tired on days he works from home. R23 claims to be “very old” and “uninterested in IT systems,” saying things have gone as well as they could have hoped. His attitudinal change has much to do with his new working method. He assumes the difficulties would be about the same if you lived on an island here – you would have to make connections. R24 said that people used to sing Happy Birthday to one another on special occasions. People might use “Zoom” and other video-chatting tools over the days when they used to use them informally. The absence of the other people around them is what R24 says is most missed. “One of the fellows almost lost his mind working from home one week before the daily shifts were established,” he told me. “I think that is better than working long hours there.” “Since showing you something on a computer is simpler than trying to reach out with a cell phone, I think help would come more quickly,” R19 said. She does not want the social involvement that business might provide, but she misses having off-the-cuff conversations with people about her ideas, not calling and waiting for them to answer. “I think working from home has drawbacks,” she said because she could not get to the clinic to look for improvements. R28 stated that she does not find her motivation any different online than when she was in the field – and she was looking forward to the following assignments because she had less to do. “When somebody calls to ask for help, it is almost like you get excited.”

Leadership in VTs: R22 felt little difference at home, though he says he knows “we have to have a more regular meeting with the team.” He added: “In fact, because of the communication, I have become more social than before, even if I am at work less.” The team went virtual, after all. R22 called his teammates at home to see if they were making it work and if everything was OK. “I know exactly what happens when they are in the office. They approach me [with a problem],” R22 says. “But I have had conversations with some teammates – about how they value work-life balance while also reminding them that it is often essential to log out at the end of the workday.” The autonomy of the Aga Khan team has not significantly been overwhelmed, and R26 rarely needs to get in the way. Still, “from the time we went online,” R26 says, “the team might be much more autonomous today.” “I prefer it when people come to the office and chat about things casually.” “It was working well before.

Moreover, it” ‘s working well now. However, the thing is, when everything was typical, we have to see how things are working in the long run.” He says that it is essential to be cognizant and to be able to refer questions from participants to the public health department. “I think we did show [our seriousness]. Because at the beginning of the emergency, like for the first few weeks, none of the team participants had laptops, but this was addressed immediately.”

Challenges and Possibilities: Weekly meetings, including those scheduled by the Aga Khan Team and other groups, are now conducted via “Team Viewer,” as R27 reports, which would help spur development to succeed. R27 believes that the managerial team might continue with the software discussed above for meetings instead of going back to face-to-face meetings in the future. Productivity will rise because staff members will not have to travel for managerial meetings. In his words: “If we do, general people will not be able to attend meetings, fewer meetings will be had, and this will make people more productive as many meetings are held.” R25 remarks that they are also more productive in virtual meetings because silence can be heard so well. He tells us that regular meetings in the office take much

longer to complete; this does not occur when doing them in a virtual context: “I have experience of this.” R20 notes, “I work at home, and therefore I linked to a remote system. It does not help to finish doing my things quickly, gets very slow.” In addition, whenever anyone there needs help, he tells us that the clinic contacts him on the video-mediated apparatus, and the physical screen in India is fogged up. This might result from parts that do not fit correctly or possible measurement issues. He explains his predicament to us thus: “I have to determine whether the part is this or that; I designed it, and we measure things differently.” When several respondents are engaged in virtual meetings, R25 (who often witnesses it) tells us that the lack of eye contact occurs even with the cameras on. Meetings also aid him, as he can do his things or make phone calls rather than pay attention to some, in his words, “people talking about issues not relevant to themselves.” In his words: “He claims that there is more sense of being upbeat in online meetings held in conference rooms.” Additionally, scheduled virtual meetings start and end on time, according to R25. “For myself, I think that even when the coronavirus crisis ends, our ways of working will be very different; in some cases, I can understand why working at home helps as this saves time and the environment.” Although all teams faced difficulties, their experiences pointed to common tactics used and, at times, variations in the manner of leadership styles and team.

## 5. Discussion

This study contributes to the literature on leading VTs, particularly during times of crisis. In our exploration of three teams, we provide three new insights into the research on VTs: (a) the multiple ways of understanding motivation in VTs, (b) what we know so far about autonomy in VTs (and what might be left unknown); and (c) the contrasting experiences of transitioning VTs. Below, we provide further details.

In all three cases, however, the focus on the well-being of team members was common: having regular check-ins in place (Cases A and C) and encouraging formal times for the team to interact socially (Cases A and B). This aligns with the situational leadership angle promoted by (Northouse, 2021). whereby encouraging styles are recommended when ambiguity is high. All teams began deploying communication strategies to combat isolation and work as a team. This is particularly important for VTs, where limited nonverbal cues can hinder communication effectiveness, as supported by (Malhotra & Reserved, 2002).

Differences surfaced in the motivation cues that team members perceived. In this case, motivation in Case C was mainly fuelled by workload. It went down due to working remotely for activities that required lots of face-to-face interaction. Motivational cues in Cases A and B were stalked more by leadership initiatives and team effervescence. A third divergence was autonomy. Members of Case C perceived their work as largely autonomous, perhaps because of the nature of their work or because of daily routines established over time. Members of Case A reported mixed perceptions of their work situation, with some citing minimal to no change in workload, while one citing increased workload.

Cases A and B, who were already functioning as a group before the VT experience, had a unique challenge: they lost the social connection that we take for granted in a co-located team, as we discussed earlier, adding to the problems identified by (Dulebohn & Hoch, 2017). This highlights the difference when teams transition to VTs during a crisis and indicates that the experience can present different opportunities. Participants said improved technological skills were beneficial because they relied even more heavily on communication tools. This speaks to the degree of flexibility needed. The research also points to the need for clear communication by leadership, which is even more critical when working virtually.

While VTs caused problems, teams that had to pivot online quickly had specific challenges, such as keeping up the workplace culture and addressing social isolation. At the same time, the experience of working online increased familiarity with technology and demanded better communication and more flexible leadership from team members. Our analysis shows many shared approaches for co-located teams transitioning to VTs during crises. These teams had almost equal opportunities and challenges for



long-term success. Exploring the needs and challenges of co-located teams during VTs in more detail during crises and beyond is necessary. By providing a tailored solution and conducting more research, we expect that teams will be better equipped with the tools and strategies that will enable them to cope with the new realities of virtual work.

## 6. Conclusions

Although leaders attempted to coalesce around efforts to enhance well-being and communication, regardless of the cases, adjusting to the reality of VT reflected differing leadership styles, as attention-regulating and self-monitoring processes among leaders created different team outcomes and levels of motivation and autonomy within the teams. Pre-VT co-located teams experienced the loss of social connection but also learned how to master digital skills. Leaders' adaptive efforts emphasised the need to enable new forms of leadership within VT and developed more nuanced approaches to help team members adjust to VT while highlighting team members' levels of motivation and autonomy among themselves and their teams. While this research offers valuable insights from a small sample of leaders and teams, its relevance to a broader population facing virtual work transitions is limited. Most importantly, this study's findings indicate an impetus for increased research into effective leadership during times of crisis and provide researchers with a view into the long-term and adaptive journey of people and teams who continue to work in VT environments.

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