

KENYA:

PHASES OF THE COVID-19 PANDEMIC

Containing the Spread and Reducing the Impact

Background

In December 2019, a new strain of coronavirus – now COVID-19 – originating from Wuhan City, China was discovered. COVID-19 infections have since spread all over the world. Stretching of medical and health resources, economic shocks, social upheavals, and insecurity will become the inevitable consequences of this pandemic that may disproportionately affect poorer nations especially in the global south. Many vulnerable countries, Kenya included, may not be sufficiently prepared. They should understand the various phases of COVID-19 in order to respond effectively with the limited resources in hand.

THE COVID-19 PHASES IN KENYA

PHASE 1: Latent Phase

- COVID-19 still out of the country, threat still remote.
- Usual measures, mostly public health and surveillance at border entry points, are taken to ensure COVID-19 does not enter the country.
- National Epidemic threat perception still low.
- Country still largely unprepared, population largely ignorant of the epidemic

(Kenya was in this Phase before and including March 3rd 2020).

PHASE 2: Germinal Phase

- COVID-19 enters the country.
- First known case is identified, quarantined, isolated and treated
- Those infected by the first known case identified, tracked, quarantined and tested.
- A few more individuals carrying COVID-19 jet in. Spreads in few locations as they travel home or check-in hotels as tourists.
- Initial containment measures instituted.

- Additional measures are put in place to prevent more carriers entering the country from spreading the virus.

(Kenya entered this Phase on 4th March 2020 and lasted till 23rd to 25th March 2020)

PHASE 3: Incipient Phase

- Coronavirus spreads to specific localities within a country such as Nairobi, Mombasa, and Kisumu. More cases identified.
- Numbers of tested and asymptomatic cases of COVID-19 basically between 20 and 1,000
- Tracing and isolation of contacts using all available tools including phone and credit card records of locations.
- Stricter measures are put in place, with partial lock-down, dusk to dawn curfews.
- Mandatory quarantine required for travelers from outside country.
- Non-essential services are disrupted.

Critical Action Points

- ❑ This phase is most critical for effective intervention in flattening the curve.
- ❑ Soft (partial) lockdowns and curfews initiated
- ❑ Massive rapid testing needed in strategic 'chokepoints'
- ❑ Community participation, sensitization within target-cluster settings critical.
- ❑ Media, opinion shapers, religious leaders, youth leaders, CBO leaders, and emergency fund mobilized
- ❑ Medical capacity enhanced and expanded.
- ❑ Multiple testing centers across country critical at this phase.
- ❑ Normal hospital bed capacities upgraded for COVID-19 cases.
- ❑ Some public spaces re-purposed for healthcare centers.
- ❑ Unemployed medical professionals recruited in preparation for Phase 4
- ❑ Military and National Youth Service prepared to assist in providing certain critical services.
- ❑ Industries required and supported to produce protective gear and other COVID-19 related materials.
- ❑ Economic slowdown begins occasioned by disruption in local and global supply chains, low exports, delayed or reduced foreign direct investment, and a significant decline in economic activity.

a. Kenya entered PHASE 3 on or around March 23rd – 26th 2020.

b. Initial stages of community transmission noted, meaning stage set for Phase 4.

PHASE 4: Metastatic Phase

Early Stage Metastatic Phase

- COVID-19 cases continue to rise, breaks away from few counties to cover at least 10 – 20 counties in Kenya in the early stages of the Metastatic phase.
- Mild community transmission

Middle Stage Metastatic Phase

- COVID-19 cases continue rise in pockets within counties, across counties and an intensifies in the a few hot-spot location
- Affects between 20 – 30 Counties
- Transmission gains momentum, more cases pop up in more counties and localities previously not affected.
- Economic slowdown is accelerated, joblessness and desperation rise among vulnerable populations.
- Incidents of crime and public disorder in chokepoints (informal settlements and slums) rise.
- Initial pressure on the health system. Rise in hospital admissions. Initial surge begins to stretch the capacity of government services

Critical Action Points

- ❑ Enhanced soft lockdown and curfews, tightened measures by government, implemented by police as a major security measure to prevent it moving to advanced stage, one stop from the most critical.
- ❑ Curve can still be flattened, but with additional and more aggressive measures from authorities
- ❑ Localities with rapid transmissions locked down,

Advanced Stage Metastatic Phase

- Rapid rise in counties and localities with earlier phases and stages of transmissions
- Considerable 'jump' in cases, spreading fast, with daily reports surging
- Counties affected jump to between 30 and 40
- Hard (full) lockdown for specific counties and pockets that are most affected introduced

Critical Action Points

- ❑ Within counties affected, full lockdowns put in place
- ❑ Clusters exhibiting advanced *metastatic* stage placed on hard lockdown
- ❑ Immediate and medium-term political calendars such as by-elections, others suspended.
- ❑ Basic supplies to critical chokepoints (informal settlements and slums) necessary for sustainable lockdowns.
- ❑ Provision of basic services and aid done by NYS and police in liaison with the provincial administration.
- ❑ Community participation, sensitization critical.
- ❑ Within the classified information rubric of the State, information begins to be rolled out systematically to prepare the national mindset for a likely Emergency Situation ahead.
- ❑ At the National Security Council level, more consultations and intensified actions in anticipation of a likely Emergency ahead.
- ❑ Proper arrangements for management of physical security for critical infrastructure, borders and community-specific security.

PHASE 5: Emergency Phase

- COVID-19 infection spreads freely to communities (full-scale community spread established).
- Number of cases substantially higher, spreads to whole or most of the country.
- Hard lockdown in place across the country for a specific period of time, perhaps 2 – 3 weeks.
- Country's social safety net stretched beyond limit.
- Economy is in critical stage.
- National security in danger.

Critical Action Points

- ❑ Situation critical, Military called in.
- ❑ Security fragile across the country.
- ❑ Last efforts to contain spread.
- ❑ State of Emergency declared.
- ❑ Positive 'Social Propaganda' purposed for building resilience in the national mindset in order to re-direct national psyche to a common course of survival and victory over COVID-19 (and deflect anti-government blame-game).

PHASE 6: Resignation Phase

- COVID-19 now spreads freely.
- Hospitals and all public services overwhelmed; Government and authorities unable to do much about it.
- Only identified pockets, communities secured, isolated and protected.
- Those that survive, live, those that die, die. Pandemic takes natural course with very high mortality rates.
- Herd immunity from high infection rates takes shape leading to natural flattening, then downward curve and ultimately a reversal, at great cost. Nation at its weakest point

PHASE 7: Recovery Phase

- Those that survived work on recovery. Traumatized. But live to tell the story.
- Government struggles to restore normalcy. Society still in shock.
- Country's systems still weak.
- State of emergency lifted. Law and order prioritized.
- Long road to social and economic recovery ahead.

PHASE 8: Reconstruction Phase

- Post-pandemic reconstruction characterized by social disquiet resulting from economic slowdowns and societal breakdown.
- Expanded law and order enforcement still necessary
- Massive societal mobilization required combined with infusion of capital into businesses and the economy.
- This phase may last few years.