



### **HORN POLICY BRIEF**

# Winning Kenyans' Hearts and Minds in the Fight Against COVID-19

### **Executive Summary**

In the six months since Kenya confirmed her first COVID-19 case, the country has instituted several measures and allocated at least 84 billion shillings to contain the disease. Despite these, Kenya's caseload has increased from one case on March 13, 2020 to 35,603 by September 10, 2020, and the virus has spread to all 47 counties. On August 12, 2020, the World Health Organization offered its explanation for this reality; Kenya has become "complacent" about COVID-19. This policy brief argues that apathy has replaced the country's initial enthusiasm and confidence in forestalling community spread primarily because citizens are generally working at cross-purposes with the government. It discusses how the government's contradictory messaging, and its selective enforcement of COVID-19 measures have confused and alienated citizens, and how citizens' disregard for the measures has frustrated the government. It finds, among other things, that citizens have become weak links in the fight against COVID-19 even as the government's approach to the spread of Coronavirus has evolved. To roll back COVID-19 effectively and sustainably, the government must bring citizens to its side using a combination of 'soft' and 'hard' approaches.

### **Background**

The emergence of COVID-19 in China in 2019 was unexpected. By the time it arrived

on Kenya's shores in March 2020, there was near consensus that its impact on lives and livelihoods, in Kenya and around the world, would be unrivaled because neither Kenya nor the world has experienced anything quite like this before. World Health Organization declared it a 'global pandemic.' However, thanks to the globalized nature of the modern world, its entry into Kenya was anticipated. Kenya's Health Cabinet Secretary, Mutahi Kagwe, warned that it was not a matter of if but rather one of when a case would be confirmed in the country. This happened on March 13, 2020, catalyzing several actions: creation of National Response Committee of corona virus, establishment of quarantine centers, launching of COVID-19 campaigns, beginning of daily briefings, closure of international borders, educational institutions, entertainment venues and places of worship. Further, President Uhuru Kenyatta directed closure of all non-essential services, encouraged employees of public and private sector firms to work from home where possible, and introduced a nationwide night curfew.

To roll back COVID-19 effectively and sustainably, the government must bring citizens to its side using a combination of 'soft' and 'hard' approaches

Despite these, and other efforts, Coronavirus has continued to spread. By September 10, 2020, Kenya had confirmed 35,603 cases, and 612 deaths, and reported cases throughout the country (Ministry of Health [MoH], 2020). Some Western powers have taken note; the European Union has restricted Kenyans' travel to its region, while the United States (US) has issued a travel advisory against Kenya. So have Kenyans.

It has emerged that Kenya's economy is stagnating. According to the Kenya National Bureau of Statistics, 435,369 more individuals become gainfully unemployed in the first quarter of 2020 compared to the same period last year (5.1 per cent increase). The Central Bank of Kenya has revised the country's projected economic growth to below three per cent. This mix of an unexpected medical event and worsening economic prospects frustrates both the Kenyan government and citizens. Not surprisingly, the two parties have blamed each other for Kenya's current COVID-19 outcomes. What has become clear is that winning the hearts and minds of Kenyans is critical to pushing back COVID-19 in Kenya effectively and sustainably.

### **Key Findings**

- Kenya's COVID-19 caseload has increased gradually despite efforts to control community spread, from one to 35,603 (as of September 10, 2020) positive cases in six months. Between March and June, Kenya's reported cases were relatively few, and increased, on average, by single and then by double digits. In June, the number of cases begun to rise by three digits (MoH, 2020). This remains the case.
- Government's approaches to the spread of Coronavirus in Kenya have evolved. Before March 13, 2020, Kenya proactively prepared for the worst-case scenario the confirmation of COVID-19 in the country. Since then, the government has exhibited a mix of proactive, experimental, and reactive responses and some resignation (MoH, 2020; IPSOS, 2020).

- Citizens' attitudes to COVID-19 have remained largely unchanged. Before March 13, 2020, citizens were anxious and skeptical about the confirmation of Coronavirus in Kenya, and impact that the disease would have on them and the country. Since then, citizens receive COVID-19 guidelines with simultaneous trust and doubt (IPSOS, 2020).
- Kenya's 'soft' approach to COVID-19 management is useful but not sufficient. Since March 2020, the government has initiated, among other measures, media campaigns to educate the masses about Coronavirus; its origin, symptoms, prevention, and management. Additionally, it has urged citizens to observe MoH and World Health Organization (WHO) guidelines to prevent infection and minimize community spread. However, the number of cases has continued to rise (WHO, 2020; MoH, 2020).

### **Analysis**

### Increased Effort, Increasing Caseload

Kenya's Coronavirus mitigation efforts and the increasing COVID-19 cases are mismatched. This discrepancy could be the result of the government and the citizens reading from different scripts. Citizens expect, on the basis of Kenya's Constitution, the government to guarantee their rights, including those to life and access to good health, and to protect them from external threats such as Coronavirus. Some of the measures to minimize the spread of the disease in the country have resulted in loss of livelihoods and threatened such rights. To cope, some citizens have flouted COVID-19 guidelines. This has frustrated the



What has become clear is that winning the hearts and minds of Kenyans is critical to pushing back COVID-19 in Kenya effectively and sustainably

government that has argued that such breaches allow the disease to spread, placing the wider community at risk of infection and/or death. It also undermines the fight, which means that more resources than may be necessary are spent to contain the disease. The government may be mandated to ensure the safety and security of Kenyans, but achieving this is dependent on citizens taking responsibility for their own lives, and on the extent to which citizens can relate to and accommodate the proposed measures.

### The Evolution of Government's Coronavirus Approach

In addition to exemplifying the government-citizen schism, the shift from government's approach from proactivity in the period around March 13, 2020, to one that oscillated between proactivity, experimentation, and reactionary in the April to July period, to one of seeming resignation since July reflects the COVID-19 landscape. Before the confirmation of Kenya's first case, the country's COVID-19 preparedness relied on lessons learned from other countries. After that, the country had to deal with the nuances and complexities of Kenya's socio-economic fabric for which there is no existing template. As the disease took hold, the country acted on the expected (quarantine of infected persons, for example), and reacted to the unexpected (uproar against mandatory quarantine at citizens' cost, ignorance about Coronavirus, the soaring cost of managing the disease, for example). Without the full support of citizens or an end to COVID-19 in sight, the government's current posture appears to be one of resignation.

### Citizens' Unchanging Coronavirus Attitudes

There are several explanations for the simultaneous trust and doubt that citizens have exhibited throughout the past five months - bearing in mind that there are two main COVID-19 camps: doubters, and 'believers.' Chief among these is the contradictory messaging in the management of COVID-19. For instance, while the government has spoken about strict adherence to Coronavirus guidelines, it has, at the same time, remained largely mum about

## The appearance of double standards and the resultant loss of moral authority have created some doubt about the seriousness of the COVID-19 threat

breaches to the same, especially those committed by its public officials.

The appearance of double standards and the resultant loss of moral authority have created some doubt about the seriousness of the COVID-19 threat, and government's commitment to respond to the threat consistently and decisively. Not surprisingly, some citizens now view the disease as government propaganda. A ploy to benefit from the 134 billion shillings - according to National Treasury Cabinet Secretary, Ukur Yatani - that donors such as Denmark's development cooperation (DANIDA) have advanced to fight the 'global pandemic' in Kenya. The lack of transparency and accountability for COVID-19 funds by both Afya House and the Kenya Medical Supplies Authority (KEMSA) is worsening the situation. Others, who were convinced about the reality of COVID-19 have, going by social media posts and the increasing number of citizens who are flouting COVID-19 guidelines, have since changed minds.Consequently, government's COVID-19 messaging is not translating into the behavior change required to contain the disease.

### The Useful but Insufficient 'Soft' Approach

The 'soft' approach to COVID-19 compliance is useful but insufficient as it assumes that both COVID-19 doubters and 'believers' will comply with Coronavirus guidelines. In reality, it is easier for the 'believers' to observe the regulations compared to doubters. In other words, some coercion is required for full adherence by both camps. Still, citizens will need to be encouraged to continue supporting the government by, for instance, the reprimanding of individuals who flouting the measures.

### Conclusion

Kenya's anti-COVID-19 measures are yet to reduce the country's caseload. On the contrary, the number of cases has risen in the past six months. In that time, a wedge has developed between the government and citizens with both parties blaming each other for the current situation. Some citizens distrust the government, while the government decries the lack of citizen support in the battle against the disease. At the same time, Coronavirus is turning out to be an expensive affair that cannot be sustained for an extended period, particularly because the spread of the virus has stagnated economic growth and a safe and effective vaccine is still being developed. The government must win and retain citizens' trust so that the two actors can work together to defeat COVID-19 in Kenya.

### Recommendations

### • Stay Focused on the Threat

COVID-19 is a costly disease whose sustained mitigation over an extended period is untenable, particularly for struggling economies such as Kenya's. The government must remain focused on minimizing its impact on the lives and livelihoods of Kenyans even if doing this will require coercion, within reason and without trampling on the rights of citizens.

#### Avoid Contradictory Messaging

This will rebuild the trust that some Kenyanshave lost in the ability of the government to manage COVID-19 in Kenya. This trust can then be leveraged to enhance government's COVID-19 communication campaigns.

### • Enhance COVID-19 Messaging

This will ensure that those who doubt the existence of the disease simply because they do not understand it sufficiently are reached. Messaging should be in languages that are targeted and specific to communities in particular localities.

### Complement the 'Soft' Approach with 'Hard' Approaches

While presidential directives are not laws in the strict sense of the word, such pronouncements - when backed with legislations such as the Public Health Act - are enforceable. Those who flout COVID-19 measures, contributing to community spread, should be held liable for the breaches. The liability, preferably in the form of hefty instant fines, will generate revenue for such purposes as compensating the efforts of frontline medical workers.