



Mukuru Promotion Centre

Empowerment Step by Step

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Information VIII

8th September 2020 – 4th October 2020

An Update to our Supporters, Friends and Partners regarding the works of Mukuru Promotion Centre and the CoVid19 Pandemic

As at 3rd October 2020, Kenya had a total number of **39,184** CoVid19 confirmed cases, **725** deaths and **26, 426** recoveries since March 13th, 2020. The fatality rate is at 1.86% and the recovery rate is at 67.4%. Men seem to be more prone to the virus than women at 71.2% compared to 28.8% for women. *(Source: Ministry of Health Kenya and WHO).*

CoVid19 was present in Kenya before the first confirmed case on 13 March. There were 9 separate importations of the virus. A French national who arrived on 4th March, some from UK and Spain, and Kenyans who sat near infected people on the plane, had the virus already. It is thought that the virus peaked in Nairobi, Mombasa in August. However, it is just arriving in some other counties.

The debate on reopening of schools was ongoing during September. Private schools and early childhood centres, where the salaries depend on income from school fees want immediate reopening while public schools, whose teachers' salaries are paid by government, even when schools are closed, advise caution, and say schools are not ready. In fact, public schools will not be able to satisfy the stringent requirements of the Ministry of Health due to the lack of classroom space and the teacher pupil ratio.

Technology is helping with the preparedness of schools in that various ways of taking temperatures without close contact with pupils have been developed. There is a cost factor involved, as well as personnel to see that everyone entering schools does not have a fever. As 90 % of Kenyans are asymptomatic, this system prevents only those with fever symptoms. As the majority of Kenyans who develop symptoms have underlying health conditions, school staff want to exclude those children with epilepsy, leukemia, tuberculosis, HIV positive and sickle cell. How will we cope with these children? What protection can they be given against real risks and against growing stigma?

On the 15 September, the CS Education, Professor Magoha announced that schools would open on 5th of October. It was planned to have a staggered return beginning with the examination classes. Double shift has been proposed for schools which have numbers of children that are too many for the fulfilment of Ministry directives. The double shift will reduce congestion in classes and toilets. Still many public schools lack washing facilities and sanitizers which are awfully expensive when used for big numbers and for a long time. The schools have not received their Government funds, so they do not have the resources to reopen. Support staff such as secretaries, security, cleaners, and cooks are not being paid as the school boards usually ask parents to contribute for such expenses. The government has promised to provide funding so schools can be reopened. As the CS Education

keeps changing plans, the public are accusing him of causing confusion. When he said schools would not reopen until January 2021, parents who lost their jobs committed scarce resources elsewhere and do not have the means of sending children back to school with the necessary fees and funds. The CS changes the school opening dates again to 19th October. Teachers raised concern about filthy public schools which have not been cleaned since March. Workers who have not been paid since April are expected to clean while teachers who have been called to prepare for opening feel it is not their job.

Kenyans who have lost their businesses such as those who normally supplied schools, are in great distress as they have debts, they are unable to pay. Some of them have to close as they cannot pay rent, staff, and other costs. The confusing information is still being given out by Education CS. Children will repeat a whole year, then children will not have to repeat a whole year; schools will open, schools will not open; will open on 4th then will open on the 19th. This is ridiculously hard on schools and parents. Now people are beginning to disregard any direction.

Due to CoVid19 most Kenyans are spending more time at home with many working from home. Power bills are soaring. Kenya Power has raised the costs for home consumption by about 50%. This is a strain on those working from home, whose transport costs decreased but power costs increased. In slums there are repeated blocking of power to homes due to illegal provision mostly by the employees of the power company, who charge the slum dwellers for power, but open personal accounts into which the charges are paid. When they are found out whole villages of thousands are cut off. Thus, those slum dwellers who got connected to Wi-Fi are unable to study online from home. For those who try to use their smart phones the cost of 'airtime' for downloading is unaffordable for the majority. The children of the slums are thus adversely affected.

There were 19 tycoons named among those who siphoned off CoVid19 funds; they had close connections to various officials in the Ministry of Health and Kenya Medical Research Institute (KEMRI) and the agency dealing with flu and viruses used inflated procurements prices. According to Dr Agutu from the Network Action Against Corruption (NAAC) "the cartels tendered to supply face masks allegedly at Sh1,800 then sold to KEMSA for 4,000. The actual price could be Sh600".

In an earlier update it was mentioned that all Counties were to 150 ICU beds. So far only 30 counties have ICU beds leaving 17 counties without them. Those who become critically ill cannot access necessary treatment. The community health workers and volunteers give great assistance to the Government and counties in identifying clusters and containing contagion.

The bulk of the population keeps to the restrictions. It is a concern that a big percentage of Kenyans ignore directives from the Ministry of Health concerning the spread of the virus. Unfortunately, the politicians hold rallies which lead to the spread of the virus due to huge crowds in close proximity to each other and without adhering to health directives. Over 600 companies have closed completely due to the effect of the lockdown. There was no economic rescue package here for them like in UK, US, and Europe. Women and girls are most affected by loss of employment. Domestic workers were mostly laid off when adults went home from work and have not been re-engaged.



Many hospitals in Kenya do not have oxygen. It is estimated that 20% of those who get seriously ill from CoVid19 need oxygen and need isolation. One patient, a French national, needed 15 cylinders of oxygen without which he would not have survived. Counties without oxygen need

millions to put in piping and then purchase the oxygen. Health staff in a number of Counties have not been paid for months. They will strike if not paid soon. The Counties lack the means to pay them as the senators did not manage to agree on how to divide the budget among the 47 Counties. The purchase of poor and often faulty CoVid kits is the cause of many rows. Millions have been spent on protective gear and tests which do not work. The rise of contagion in parts of Mombasa and Turkana is a big cause of concern. Men are catching CoVid19 much more than women. It would seem that their social habits, smoking, and drinking are thought to be the big contributing factors.

Ministry of Health officials and other Government officials are accused of setting up new companies to siphon off the CoVid funds. The domestic violence incident reports are rising since the lockdown.



President Uhuru Kenyatta addresses a crowd in Nairobi recently

On 18th September, the Government announced that the CoVid Curve was flattening and beginning to fall and some restrictions such as curfew times have been adjusted to reflect the change. WHO and other bodies questioned the fewer tests being carried out and whether the perceived fall is due to lack of enough tests. Mbagathi Hospital has received huge supplies of oxygen for treatment of patients. Mbagathi is our local referral hospital. The county revenue sharing deal has been agreed in Senate so Counties can now receive their share. This will be a great relief as medical staff can now be paid.

Vaccine Trials are taking place with 40 Kenyan volunteers participating. The Kenya Medical Research Institute (KEMRI) is carrying out the trials. Concern is raised over 200,000 infants who have not received their vaccinations due to hospitals and health centres stopping the exercise and parents not turning up due to fear of contagion from health staff or other patients. At the MPC clinic over the last few months the vaccination numbers have increased.

Amongst the heaviness of CoVid19 there are some positive effects. The online services are rapidly improving due to demand. Many hospitals now have ICU facilities that they did not have a few months, ago. Treatment for CoVid has improved in hospitals in some areas. There is an acute shortage of low end lap-tops in the country.

A plea is made to expand social protection for vulnerable groups. The government did give funds for youth employment and empowerment by Counties. However, families in the informal settlements and a big number of jobless single mothers are in dire need. Many elderly people are also very vulnerable. The burial protocols for funerals have now been relaxed. This is a relief for those Kenyans who have strong burial traditions and who have suffered agony over hasty burial without fulfilling tribal obligations towards the dead and taking respectful leave of the dead. It is believed that a vaccine will be available to Kenyans in 2021.

Many Kenyans are stuck abroad especially in India, including those who went for medical treatment and those caring for them. They are in great financial hardship. The Government has been encouraged to make arrangements for their return. The complicating factors are the number of districts in India which are in lockdown. Also, some Kenyans abroad are testing positive for the virus.

Many Kenyans from all walks of life, donated masks, soap, water, food stuff to residents of Mukuru, Kibera and other slums knowing that the unemployed people do not have resources to get for themselves. On the 28th September, the economy further opened. Hotels and restaurants can now serve alcohol. Bars can open. The curfew remains from 11pm to 4 am. The skies have been further opened with internal and international flights taking place to and from all locations. The museums and monuments have opened to the public since 14th September.

Many Kenyans abroad suffer a lot of hardship after job losses and great hardship in returning home. The private sector has given great expertise in dealing with CoVid19. Unfortunately, only the well-off or those who have good health insurance can afford the services.

There are great fears of a second wave of CoVid19. Tertiary colleges will reopen on 4th October, but not schools. CoVid tests are expensive, in that a person can pay up to 13,000khs (\$13US) to have a test when travelling abroad. There are plans to lower the costs.

The following article appeared in the Daily Nation Newspaper last week

Kenya

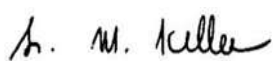
The government had predicted that some 10,000 people would be infected by the virus in the first month. However, only 197 infections were reported. The scientists at the University of Nairobi's Institute of Clinical Research and Kenya Medical Research Institute (KEMRI) also projected between 300 and 400 deaths, compared with the 8 eventually reported.

Again on May 30, when Kenya had 1,888 cases and 63 deaths, the Ministry of Health Acting Director General said that according to the model the government was using, 4,000 to 5,000 people would have been infected and 160 to 180 people killed by Covid-19 by August.

In July, the Ministry directed the Kenya Medical Supplies Authority (KEMSA) to procure 100,000 body bags, in preparation for a "worst-case scenario" as the country was headed towards the peak. Then, it was projected that, at worst, 450,000 people would be infected with the virus, leading to 45,000 deaths before the curve flattened. But there were 34,201 cases and 205 deaths by the end of August, now seen as the peak of the first wave, rendering the two forecasts as other big misses.

In September, the Ministry and the KEMRI scientists projected that less than 1,000 people will have died of CoVid19 in the country by the end of December. The government had projected 5,000 deaths by the end of the year, said Dr Amoth on Thursday 30th September, adding that it is the interventions put in place that will see the number remain at under 1,000.

We will continue to keep you updated. Thank you for your support.



Sr Mary Killeen