Building resilience and improving health in communities in the COVID-19 Pandemic: Experiences of Environmental and Public Health Officers in Kenya

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COVID-19 in Kenya

• As at 18 October 2020, Kenya had **44,196 reported cases** of COVID-19 and **825 deaths**.

![Graph showing daily new confirmed COVID-19 cases and total deaths due to COVID-19 in Kenya.]

Source: European CDC – Situation Update Worldwide – Last updated 18 October, 10:05 (London time), Official data collated by Our World in Data
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Impact of COVID-19 Pandemic on Communities in Kenya

• Escalated living costs and loss of livelihoods - 90% of Kenyans reported loss of income monthly since May 2020. Impact greatest among low income urban families.

• High rates of teenage pregnancies (school closures) & GBV - In August 2020, approx. 7 in 10 (69%) of Kenyans reported experienced domestic conflicts the preceding 2 months vs. 40% in May 2020. 78% of which were violent & physical (Kantar Study, 2020).

• Lack of access to sanitation and menstrual health products previously availed through school systems. Biggest reported concern among Kenyan adults is education for their children, 81% “very worried” (Kantar Study, 2020).

• Inadequate access to clean, safe water for domestic needs.

• Heightened social stresses (increased crime rates, missing children)

• Increased environmental pollution and degradation (ill disposal of used masks)

• Unfavorable pandemic work conditions for health workers (PHOs/EHOs among the most vulnerable and neglected).

• Other health services neglected eg. NCDs, some maternal and child health services etc.
Preventive measures enforced: Kenya

• Handwashing
• Physical distancing
• Use of face masks
• Community level interventions (re-focus on community strategy approaches)

Missteps in Community COVID-19 prevention measures: Kenya

• Predominantly top-down approaches through internal security measures
  - Focus on internal security first rather than public health first
• Neglect of role of PHO/EHOs in public & environmental health monitoring for many years reduced health system preparedness
• Initial heavy focus on clinical management strategies: quarantine and isolation
• Low-key youth engagement in prevention efforts
Emerging concerns in community pandemic spread containment

• A generally relaxed attitude among community members with regard to preventive measures

• Re-opening of bars where physical distancing may not be guaranteed

• Re-opening of schools without adequate capacity building for school management teams and adequate preventive measures

• General suspicion/mistrust towards GoK’s handling of COVID-19 pandemic. Approval rating of govt. response ↓ from 49% in May to 37% in August 2020. Level of trust in govt. for future ↓ from 50% in May to 41% in August 2020 (Kantar Group, 2020).

• Stigmatization of suspected or recovering community cases
Community Engagement for Pandemic Mitigation

- Provision of accurate information (engaging key community stakeholders; counter the myths & stigma)
- Recognition of the role of community members as key actors in the pandemic mitigation
- Utilization of contextualized two-way dialogue
- Focus on lower-level community representatives (as close to the ordinary community member as possible)
- Interventions for the most vulnerable members of the community
- Incorporating sustainability considerations at intervention design
Building Resilience for improved health in communities: Role of EHOs/PHOs in Kenya

- Moving from the response and recovery to resilience will require a central role for communities
- Health system set up:
  - Curative healthcare services
  - Preventive healthcare services (EH/PHO)

(Diagram source: WHO, 2017)

Key: CO=clinical officer; MO=medical officer; Lab tech= laboratory technologist/technician; pharm tech= pharmacy technician; CHEW ~ EH/PHO=Environmental/Public Health Officer
Building Resilience for improved health in communities: Role of EHOs/PHOs in Kenya (COVID-19)

• PHO/EHOs: qualified persons in council approved training (BSc. level) in environmental health; public health
• Enforcement of various health acts (CAP 242)
• Formulation, implementation, interpretation and review of public health policies, guidelines, standards and procedures
• Planning and implementing promotive and preventive health programmes in liaison with other departments and stakeholders.
• Key first responders as well as custodians of the community health strategy in Kenya.
Building Resilience for improved health in communities: Nakuru County & Trans Nzoia County

Interventions

- Intensified testing & risk communication activities especially for most at risk groups
- Home based care interventions
- **Nakuru** - Joint county government/NGOs co-created WASH recovery and resilience program
  - Increased access to safe water for communities
  - Specific focus on disability inclusion & youth
- **Trans Nzoia** - County government dept. of Public Health working with NGOs such as Rotary Club and Health Promotion Alliance of Kenya (HPAK) to train CHEWs on HBIC & improve community health literacy respectively.

Gaps

- Need for sustainability considerations for programs (Nakuru)
- Low private partner support for the public health programmes (Trans Nzoia)
Conclusion: Key Messages

In Kenya, taking forward the empowerment message of health promotion requires:

1. **Re-conceptualization of health promotion approaches locally** using culturally sensitive, contextualized and simplified strategies that encourage ownership among individuals, communities and beyond.
2. **Reorientation of the health system** to not only recognize the role of health promotion in pandemic preparedness and response, but also to be resiliently health promotive.
3. **Recognition and re-affirmation of the unique role of the EH/PHOs** as stewards of health promotion and its application in both intersectoral (within health system) and multi-sectoral (outside health system) response to health emergencies.
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Thank you!