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Introduction

On December 31\textsuperscript{st} 2019, the Chinese authorities alerted the World Health Organization of pneumonia cases in Wuhan City, China, with an unknown cause. The mystery disease was first referred to as 2019-nCoV and then named COVID-19.\textsuperscript{1} The virus started to spread to other countries from 13\textsuperscript{th} January with Thailand reporting its first case then Japan followed by South Korea. All these cases being reported as imported cases. On January 21\textsuperscript{st}, WHO confirms that the virus transmits through human to human contact. On January 25\textsuperscript{th} the virus had spread to more counties as Australia, France, Malaysia, Europe and Canada report their first cases.

In Africa, Egypt was the first country in the continent to report its first case on February 14\textsuperscript{th} 2020. The African Union Commission held an emergency meeting on the COVID-19 outbreak with health ministers from across the continent of February 22\textsuperscript{nd} and on 25\textsuperscript{th} February Algeria reported its first case. The first cases in Africa were all imported cases by travelers coming in from other affected continents. On February 28\textsuperscript{th} WHO raises the global risk of the spread of COVID-19 to very high and released and updated guidance on travel restrictions on 29\textsuperscript{th} February.\textsuperscript{2}

On 12\textsuperscript{th} March 2020 the Government of Kenya (GOK) through the Ministry of Health (MOH), confirmed the first case of Covid-19 in Nairobi, Kenya\textsuperscript{3}. The suspected patient had returned to Kenya from the United States on 5\textsuperscript{th} March via London, UK. After a test was conducted at the National Influenza Centre Laboratory of the National Public Health Laboratories, the case was confirmed. Further tracking and testing of 27 other individuals who had come into contact with the patient were done. Subsequently, the Ministry of Health issued a warning stating that cases would rise exponentially in the coming days, while urging Kenyans to remain calm and follow the established guidelines.


\textsuperscript{2} Updated WHO recommendations for international traffic in relation to COVID-19 outbreak from https://www.who.int/news-room/articles-detail/updated-who-recommendations-for-international-traffic-in-relation-to-covid-19-outbreak/

\textsuperscript{3} First case of Corona Virus Disease Confirmed in Kenya from https://www.health.go.ke/first-case-of-coronavirus-disease-confirmed-in-kenya/
According to the Ministry of Health, Kenya has a 1.8% Fatality rate and a 64.6% Recovery rate. These are calculated according to the total number of cases in the county which is at 37,079 cases.

POLICIES AND FRAMEWORKS AND PROGRAMS ON COVID

Travel and Movement restrictions
On 16th March, the Government is suspended travel for all persons coming into Kenya from any country with reported Coronavirus cases. Only Kenyan Citizens, and any foreigners with valid residence permits were allowed to come in provided they proceed on self-quarantine or to a government designated quarantine facility. All persons who had travelled to Kenya had to self-quarantine and if any person exhibited symptoms such as cough, or fever, they should present themselves to the nearest health facility for testing.

The National Security Council, on 25th March, sanctioned and caused the issuance of public order Number 1 on the pandemic as follows; a daily curfew from 7pm to 5am in the territory of the Republic of Kenya with all movements by persons not authorized except the essential service workers.

On 6th April, cessation of movement by road, rail or air in and out of the Nairobi metropolitan area from 6th April and the Kilifi, Kwale and Mombasa counties from the 8th of April. Movement within the Nairobi metropolitan area and the counties was allowed subject to the nationwide curfew. Any person carrying bicycles, motorcycles, automobiles, vehicles, railway wagons or aircrafts were not allowed in or out of Nairobi, Kilifi, Kwale and Mombasa. Movement of cargo and food supplies continued as normal during the declared containment period through road, railway and air. Any cargo carrying vehicle was charged to a single driver and designated assistant designated in writing by the owner of the vehicle with reference to the vehicle.

WHO guidelines on COVID-19
The World Health Organization released guidelines to help in curbing the spread of the virus. After discovering that the virus spreads through

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4 WorldOmeter [https://www.worldometers.info/coronavirus/country/kenya/](https://www.worldometers.info/coronavirus/country/kenya/)

human to human contact, they advised individuals to ensure to keep a 1.5-meter distance from one another, avoid crowded areas, to always wear masks, to wash their hand with soap and water for at least 20 seconds and sanitize. They also came up with guidelines on how patients should be treated, travel restrictions, home care, protecting self and others from getting sick, homecare, how to stay healthy at home, how to cope with stress during the pandemic and they even came up with guidelines for pregnancy and breastfeeding. All the guidelines can be found here

President Uhuru Kenyatta always encouraged the citizens to follow the guidelines that were provided by World Health Organization and the Ministry of Health through various platforms like advertisements in radio and television, social media platforms and the leaflets and banners that have been put in various government institutions, hospitals and buildings. The citizens of Kenya were urged to avoid congregating in crowded places like the places of worship, shopping malls, public transport, entertainment premises and to minimize the attendance to social gatherings like weddings and funerals. Hospitals were advised to limit visitation of patients both in public and private facilities. Shopping malls and hospitals were directed to provide soap, water and sanitizers for individuals and ensure that the premises are regularly cleaned and disinfected. He asked the citizens to come up with new interventions towards hand washing and sanitization.

**Education and Work flow**

The president ordered that learning in all education institutions to be suspended and schools were given up to 20th March to release students back home. He advised the learning institutions to use up the opportunity to introduce new forms of learning through live internet studies for all students in all levels of education. Online studies worked only for a short period of time because it was later on discovered that it is not covering all the students in school because of different financial status and the ability of the students to access the internet, computers, smart mobile phones ,radio or television.

Further to the guidelines issued encouraging State Agencies to establish and implement frameworks for staff to work from home; he ordered and

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directed that all State and Public Officers with pre-existing medical conditions and/or aged 58 years and above, serving in Job Group S and below or their equivalents to take leave or work from home, excluding personnel in the security sector and other essential services as outlined in the circular issued to the Public Service on 16th March, 2020.

On 23rd March, President Uhuru Kenyatta announced the approval of Google loon services to enable universal 4G data coverage in the country. This was to foster communication and enable the citizens retain and enhance remote access to the offices and enterprises.

**Economic and taxation policies**

On 25th March, the president addressed the county on the new policy measures and behavioral protocols that the COVID Response team had come up with as follows:

1. The national treasury was ordered to; relieve 100% tax for persons earning a gross monthly income of up to Ksh.24000, reduce the Income tax rate and the resident income tax to 25%, reduce the turnover tax rate to 1% for all MSMEs, to provide an additional 10billion to the elderly, orphans and vulnerable members of the society through cash transfers by the Ministry of Labor and Social Protection, to suspend the CRB listings of any person MSMEs and corporate entities with loans in arrears and to reduce the VAT to 14% effective 1st April, 2020.

2. Ministries and Departments were ordered to pay at least Ksh. 13 Billion of the verified pending bills. Corporates and the private sector were also encouraged to clear all outstanding payments within three weeks.

3. The Kenya Revenue Authority was ordered to expedite the payment of all verified VAT refund claims amounting to KSH.10billion within 3weeks.

4. KSh. 10billion from the Universal Health Coverage to be appropriated towards recruitment of additional health workers to support management of the spread of COVID-19. He ordered the ministry of health, county governments and the public service commission to expedite the process.

5. He informed the nation that his administration had offered voluntary reduction of salaries as follows;
   - the president and deputy president- 80%
   - cabinet secretaries-30%

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- chief administrative secretaries- 30%
- and principal secretaries 20%.

He urged other arms of Government to join in the national endeavor by making similar reductions to free up money to combat the pandemic.

6. The Central Bank rolled out measures as follows; the central bank rates were lowered to 7.25% which prompted commercial banks to lower interest rates to their borrowers, the cash reserve ratio was lowered to 4.25% to provide liquidity of KSH. 35billion to commercial banks to directly support borrowers.

7. On 6th April 2020, the president announced that the Ministry of ICT, Innovation and Youth Affairs in collaboration with Kenya Copyright Board, Collective Management Organizations established a framework to ensure full transparency for artists’ earnings. A total of Ksh.200m was projected every month to be paid to musicians through the system. He further directed the ministry of Sports, Culture and Heritage to avail additional support of Ksh. 100million from the sports fund towards the artists, actors and musicians.

On April 25th, the President assented to the tax laws amendment bill 2020 which was published on 30th March. The amended tax related laws include; Income Tax Act (CAP 470), the Value Added Tax Act of 2013, the Excise Duty Act (2015), the Tax Procedures Act (2015), Miscellaneous Levies and Fees Act (2016) and the Retirement Benefits Act (1997). It mainly targeted low income earners. The new Act amended Section 38 of the Retirement Benefits Act to allow access of retirement benefits for the purpose of purchase of a residential house. This is aimed at increasing home ownership in the country as envisaged in the housing pillar under Big 4 Agenda.

The president asked banks and businesses to encourage cashless transactions to avoid the spread of the virus through the exchange of cash. Safaricom doubled their daily transaction limit to 300,000 shillings and this was extended for an extra 6 months from June. Banks offering mobile banking also cut their transaction charges to make it easy for the citizens to do cashless transfers.

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11 The big four agenda https://www.president.go.ke/
12 Kenya's central bank extends mobile payments relief by six months https://www.reuters.com/article/healthcoronavirus-kenya-idUSL8N2E14I0
BUDGETS RELEASED TOWARDS COVID

All funds donated towards efforts to combat the COVID-19 pandemic are recorded [here](http://actionfortransparency.org/covid-19/aid/page/2/). So far the country has received a total of 194 billion Kenyan shillings in kind and as cash. These funding was received from the Kenyan National treasury, The National Government, Foreign countries, international and local organizations.

On April 1st the President of the Republic of Kenya held a virtual meeting with the taskforce that was formed to marshal funds for COVID Response. This taskforce was chaired by the East African Breweries Managing Director Jane Karuku. The taskforce was put together by the president to rally Kenyans together in raising resources to support the government’s effort to mitigate the effects of the pandemic.

The National Government

On 6th April, the president directed the national treasury to utilize the KSh. 2Billion recovered corruption proceeds to support the most vulnerable members of the society. The national government has earmarked a total of Ksh. 40 billion, in the 2020/21 financial year, for Covid-19 related expenditure for programs including: health and healthcare, social protection programs, and cash transfer projects for the vulnerable.

The National Treasury set aside Ksh. 2.66 Billion for the Ministry of Health as a measure of combating the Covid-19 pandemic, marking an increase of 10.3% as compared to the 2019/20 financial year. The ministry has received a welfare package of Ksh. 3.9 billion; 1 billion for healthcare workers, Sh. 300 million for operations, and 2.6 billion under development.

- 635 Million - Increased allocation to Moi Teaching and referral Hospital.
- 142 Million - Increased allotment to KEMRI (Kenya Medical Research institute)
- 500 Million - People with disabilities

This also includes a 56.6 billion endowments for the economic stimulus package which includes youth employment schemes, credit guarantees, payment of VAT refunds, among several other initiatives. Besides, the labor ministry has been allocated KSH. 8.5 billion for the elderly and the

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poor; this cash will be disseminated through cash transfer programs run by the ministry.

**The Kenya Covid-19 Emergency Response Fund**

As per July 3rd 2020, the fund raised more than 2.8 billion KSH. from corporates, religious entities, foundations, multinationals, and Kenyans of good will. Some of the organizations which contributed to the fund include: Safaricom (200 million), KCB (150 M), National Treasury (150 m), the Cooperative Bank and NCBA (100 m), ABSA bank (50 m), First Chartered Securities (Sh25 million), Citi Bank Kenya (Sh21.3 million), Devki Group (Sh20 million), UBA Bank (Sh15 million), Kenya Civil Aviation Authority (Sh15 million), BAT Kenya PLC (Sh10.6 million), Chandaria Foundation (Sh10 million), Eco Bank (Sh10 million), Sanlam Investments East Africa Ltd (Sh8 million) and WPP Scan group Limited (Sh5 million).

Donations in kind and other forms of donations were received from The Media Owners Association gave airtime worth Sh150 million, the Hindu Council gave food supplies worth Sh100 million, Devki Group gave oxygen supply worth Sh80 million, Capwel gave food supply worth Sh20 million as did Naivas Supermarket.

According to the fund Chair, Jane Karuku, the funds would be spent in the following way:

1. 500 Million- To be disbursed via M-Pesa to the most vulnerable communities. This includes residents of alums like Mukuru, Kibera, Mathare and Ngara.
2. 237 Million- To be spent towards purchasing PPE (Personal Protective Equipment) for health workers.
3. 95 Million- Supporting the Mental Health of Medical and Health Workers.
4. 1.3 Billion- Towards the purchase and distribution of face masks among vulnerable community members including *Jua Kali* workers and *mama mbogas* in towns all over the country.

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Audit firms, Price Waterhouse Coopers and EU also offered to conduct an audit of all funds disseminated and used in the emergency response fund.

Foreign Donations, Loans and Grants

In addition to local donations, the fight against the Covid-19 pandemic was aided by the support of international donations, grants and loans.

World Bank Group.

On April 2nd 2020, the World Bank Group Board of Directors approved 50 million dollars to support Kenya’s response to the global COVID-19 pandemic under an operation called the ‘Kenya COVID-19 Emergency Response Project’. The project’s aim was to provide emergency funding for medical diagnostic services, surveillance and response, capacity building, quarantine, isolation and treatment centers, medical waste disposal, risk communications and community engagement as well as for strengthening of the country’s capacity to provide safe blood services. 10 million dollars of the funding was aimed towards


strengthening Kenya’s capacity of the Kenya National Blood Transfusion Service to provide safe blood and blood products.
On May 20th 2020, the World Bank Group Board of Directors approved a 1 billion dollars budget to support operation for Kenya18. The financing was aimed at addressing the COVID-19 financing gap, while supporting reforms that help advance the government’s inclusive growth agenda including in affordable housing and supporting farmers’ incomes.

United States of America
The US Government on April 15th announced that it will support the government’s effort to mitigate the spread of COVID-19 through a 500-thousand-dollar investment bringing the total to 1 million dollars. The U.S Centers for Disease Control and Prevention committed 6.6 million dollars for activities in Kenya to support prevention, preparedness and response. These resources were meant to be used for surveillance, laboratory supplies and strengthening and surge staffing costs19.
On July 1st 2020, the US government granted Kenya 53 million dollars to support Kenya’s Covid-19 response and recovery efforts20. It was made through the US Agency for International Development. Part of these funds, 610 thousand dollars, were aimed to boost distance learning among school going learners while supporting creation in emerging areas and support for citizen responsive governance.
The US Government also donated facemasks, border security training materials, personal protective and hospital equipment’s and PPE and ICT equipment to the Ministry of Interior. Information on all data on the US Government here21.

International Monetary Fund.
IMF approved22 a disbursement of 739 million USD to Kenya to address the impacts of Covid-19 pandemic on May 6th 2020 that was drawn

21 News and Events https://ke.usembassy.gov/news-events/page/10/
under the Rapid Credit Facility. These funds were to help Kenya meet urgent balance of payments that were streaming in from the outbreak.

**UK Government**

The United Kingdom offered Ksh. 717 million 23 towards supporting 50,000 vulnerable families in Nairobi and Mombasa living in informal settlements through cash transfers. This funds were delivered through UK aid funded Hunger Safety Net Programme (HSNP) which has helped deliver timely and predictable cash transfers to up to 600,000 people in vulnerable households in four northern Kenya counties.

**Jack Ma**

![](image)

24 Ethiopia’s Ambassador to Kenya Meles Alem KAA Staff Alex Gitari and Director of Public Health Dr Patrick Amoth at JKIA

Jack Ma foundation and Alibaba Foundation donated medical equipment to all African Union Member states through the Africa Centers for Disease Control and Prevention which arrived in Addis Ababa on 27th April 202025. These included 4.6 million masks, 500,000 swabs and test kits, 300 ventilators, 200,000 sets of protective clothing, 200,000 face shields, 2000 temperature guns, 100 body temperature scanners and 500,000 pairs of gloves. His first contribution through the African Union was distributed to 54 African countries. Each country received 20,000

COVID-19 Pandemic

23 UK Offers Sh717mn To Support Vulnerable Families Through Cash Transfers

24 Kenya receives coronavirus test kits donation from Jack Ma

testing kits, 100,000 masks and 1000 medical use protective suits and face shields\textsuperscript{26}.

**European Union**

On April 29\textsuperscript{th}, the European Union provided 65 million Euros to address the socio economic impact of COVID-19 pandemic helping Kenyans who were at risk of hunger and towards strengthening measures to prevent the spread of the virus\textsuperscript{27}. These funds were divided in packages as follows; Ksh.3.6 billion to mobilize resources towards containing the spread and impact of COVID-19, Kshs.1.2 billion of direct support to vulnerable families and individuals, Kshs. 2.4-3 billion for Kenya SMEs Access Finance and Kshs.600 million for the safe trade emergency facility.

The EU provided EUR 105.5 million, Germany EUR 20 million, France EUR 6.5 million, Sweden EUR 4.2 million, the Netherlands EUR 3.25 million, Denmark 1.3 million and Belgium EUR 1 million to this effort in the region\textsuperscript{28}. This support is part of Team Europe’s collective efforts to help Kenya and its neighbours tackle the pandemic. This included help for farmers and agricultural entrepreneurs, assistance in the fight against locusts, humanitarian aid and epidemic control measures. The EU itself had contributed Ksh 35 billion to Kenya’s response to COVID-19 whilst EU Member States had already provided Ksh 3.3 billion (EUR 28.2 million) - that figure continued to increase. This collective support by Team Europe is a statement of Europe’s friendship and partnership with Kenya in these difficult global times.

**Other major donations.**

Find the full list of donations here\textsuperscript{29}.

1. 320 Million Ksh. Donation from Denmark
2. 10.6 Million Donated by British American Tobacco
3. 50 million from World vision


\textsuperscript{28} The EU, Germany, the Netherlands, Belgium, France, Sweden and Denmark are bolstering food security in Kenya and the region with over Ksh 16 billion (EUR 140 million) at a time of crisis due to COVID-19 [https://eeas.europa.eu/delegations/kenya/79500/eu-germany-netherlands-belgium-france-sweden-and-denmark-are-bolstering-food-security-kenya_en](https://eeas.europa.eu/delegations/kenya/79500/eu-germany-netherlands-belgium-france-sweden-and-denmark-are-bolstering-food-security-kenya_en)

\textsuperscript{29} COVID-19 Aid list [https://actionfortransparency.org/covid-19/aid-list/](https://actionfortransparency.org/covid-19/aid-list/)
Most of the funding went towards helping the government to sustain its citizens by donating food stuff and money, buying new equipment for county hospitals, hiring more teachers and medical service practitioners.

**YOUTH ENGAGEMENT DURING THE COVID-19 PANDEMIC**

UNHCR recommend that one tactic to combat the spread of the virus in vulnerable communities must be to engage local youth and youth networks.

**Distributing soap in slums and vulnerable communities**

The youth came up with ways to distribute soap and sanitizers to the Kenyan population especially those living in vulnerable communities and households. Isaac 'Kaka' Muasa of Mathare Environmental One Stop in Kenya teamed up with the UN-Habitat\(^{30}\), the Norwegian Embassy and the Canadian High Commission to support residents of Mathare slums to stop spread of coronavirus in the poor neighborhood. The group begun a hand-washing program meant to protect Mathare residents from COVID-19. As a result of the initiative, children and young people make up the majority of the people who are washing their hands.

Mike Oyola who lives in the Kawangware Slum in Nairobi, Kenya, where access to safe water, sanitation, and safe housing puts members of his densely populated community at a high risk of contracting the virus. Mike, who holds a degree in community health and development, started distributing soap and water to households. He bought the soap and water with his own funds. The reason behind this was because it is very difficult to follow the new regulations of keeping distance and avoiding over crowded places since Nairobi slums are over populated therefore he decide it is best to focus on sanitation\(^ {31}\).

In vulnerable communities like the Kawangware, Kibera, Kayole, Dandora, Baba Ndogo, Huruma and Mathare where healthcare services are weak and stretched thin, prevention and inclusion must have been at the heart of the response. Unstable supply chains, healthcare worker

\(^{30}\) Facilities set up by Kenyan youth group to protect against COVID-19 top 8000 hand washes


\(^{31}\) Here’s how youth in Africa are creating rapid responses to COVID-19 [https://www.dotrust.org/africa-youth-covid-19/](https://www.dotrust.org/africa-youth-covid-19/)
shortages, a lack of space, shelter, soap, and clean water prevented people from accessing diagnostic testing, medical care, and adequate sanitation.

Creating support networks for women in crisis
Catherine Kamau in Nairobi, Kenya created an initiative called Vijana Tustawi ("Youth Thrive" in Swahili) where she and three of her peers created a mental health support networks through Facebook for young women who are struggling to cope with stress and uncertainty in this time of crisis. Quarantine is a challenge for women, especially pregnant women and new mums. It was not easy to get the support they need with quarantine measures, and going to hospital for essential checkups and immunizations for children was a challenge. Through the digital networks they created for women, Catherine and her team are finding ways to counsel and support women through their fears and anxieties. This was especially important during a pandemic since COVID-19 is a gendered international crisis. UN Women stated that the economic impacts of COVID-19 will hit women harder, as more women work in low-paying, insecure, and informal jobs. Disruptions, self-isolation, quarantine, and movement restrictions are likely to compromise women’s ability to make a living and meet their families’ basic needs; it also meant that the risks of domestic violence will increase, access to education decreases and access to sexual and reproductive health will be limited.

Inclusive education or out of school students
UNESCO estimated that 87% of the world’s student population will be affected by school closures\(^\text{32}\). This meant that the world will see unequal access to digital learning opportunities and interrupted learning – particularly for under-privileged learners who tend to have fewer educational opportunities beyond school. As the world was scaling up distance learning practices, UNESCO called for coordinated and innovative action to focus on inclusion and equity to make sure that students with limited internet access, diverse language skills, and accessibility needs are not left behind.

Kelvin Guma who runs the SAIDE Community Library in Vihiga, Kenya which provides free learning to local children. Working with 15 schools,

\(^{32}\text{UNESCO rallies international organizations, civil society and private sector partners in a broad Coalition to ensure #LearningNeverStops https://en.unesco.org/news/unesco-rallies-international-organizations-civil-society-and-private-sector-partners-broad} \)
Kevin provides reading hours, digital literacy programs, and community outreach. With schools in Kenya closed for quarantine, Kelvin has set up a makeshift video recording studio at the library, so now teachers can come to the library to deliver lessons on Facebook Live and YouTube for students. Kelvin and his team have reached out to more than 400 families to ensure they’re aware of this resource, and currently three teachers are livestreaming daily mathematics, chemistry, and English classes.

**Distributing contraceptives to women in the community**

According to the United Nations Population Fund (UNFPA), one in every five girls between the ages of 15 and 19 years became pregnant or gave birth in Kenya in 2019, resulting in 380,000 teenage pregnancies. The reproductive health needs of adolescents in Kenya cannot be ignored, especially during the COVID-19 pandemic. The need for quality contraceptive services for young people was even greater considering the challenges they were already facing in accessing reproductive health information and services at health facilities and pharmacies.

Gideon Obuya – or ‘half cast’ as he is popularly known among his peers – focused on the needs of adolescents and youth in his community in Dagoretti Sub-County. Being a young adult himself, he understood the reproductive health knowledge and information gaps among the youth within his community. In his role as the media coordinator for the Nairobi chapter of the Youth Advisory Council (YAC), he helps overcome the gaps. He described the dire situation faced by youth as a result of COVID-19 saying that with the COVID-19 challenges, adolescents and youth have too much time on their hands and no constructive activities to engage in. When the national government announced stay-at-home orders, daily lives for many youths changed. Youth in his community needed more education and awareness on health issues affecting them, such as teenage pregnancy and drug abuse.

The Challenge Initiative (TCI), also known as Tupange Pamoja in East Africa, encourages meaningful youth engagement in the design and management of adolescent and youth sexual reproductive health (AYSRH) programs. In collaboration with the Ministry of Health (MoH) team in Nairobi County, TCI works through youth champions and advocates, like Gideon, to enhance access to and uptake of

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33 Kenyan Youth Advocate Sees Greater Need for AYSRH Information and Services During COVID-19
contraceptive commodities by adolescents and youths within the community, especially during COVID-19. More than 150 youth advocates from the 10 sub-counties, including Dagoretti, were oriented to be able to reach out to adolescents and youth with accurate information on contraceptives as well as other SRH issues.

**Journalism**

James Smart and Kizito Gamba in Nairobi, who are leading a team of young journalists under Tazama World Media. They are putting their lives on the line to bring out compelling stories on the effect of coronavirus among the extreme poor in Kenya and detailing why quick, robust and well-thought responses are required. This team focuses on the stories that are not told about the Kenyan population especially those living in vulnerable communities and from vulnerable households. Read some of their articles here[^34]

**Supporting the most vulnerable in the community**

That is why Emmie Kemper, through Miss Koch Kenya not-for-profit youth empowerment organization, is leading young people in her neighborhood to support the most vulnerable in the sprawling slums of Korogocho. They have supported hundreds of families whose livelihoods have been disrupted[^35].

[^34]: Tazama World Media [https://tazamaafrica.org/](https://tazamaafrica.org/)
EMERGING ISSUES.

With the pandemic affecting the normal way of life a lot of programs, businesses and livelihoods had to come to a standstill. Due to the pandemic all learning institutions closed down, people were forced to work from home, some people even lost their jobs, a lot of violence and thievery was reported, a lot of rape, gender based violence and teenage pregnancies were reported. The pandemic also caused some people to lose their homes and security. The aid received from around the world and locally also faced issues when it came to transparency and corruption reports. The issues that emerged are as follows;

Corruption and Transparency

From the very beginning of this crisis, a lot of countries, international organizations, local organizations and well-wishers came forward to support Kenya in Kind and monetarily. The president went ahead and formed a committee of experienced people to track these funds and distribute them as it is required to help the citizens of Kenya. The problem came in when the citizens and some of the political leaders started inquiring on how these funds were spent. This exposed the lack of transparency that the committees were practicing and some Kenyans even held a peaceful demonstration.

The first scandal was the disappearance of Jack Ma’s donation to the country. The Health Director General Patrick Amoth acknowledged that the government was experiencing a shortage of test kits 36. Investigations on the donations were ongoing but the officials remained tight lipped about the progress they had made.

The Health Cabinet Secretary was under scrutiny over manipulating COVID-19 tender award to Kenya Medical Supplies Authority and he denied any part in it. He told the parliamentary committee investigating the management of funds that he never issued any instructions to anyone in KEMSA but admits issuing policy guidelines 37.

A leaked memo on the breakdown of Ksh1.3 billion spent in the fight against the Covid-19 pandemic showed that Sh42 million had been spent on leasing ambulances, Ksh4 million for tea and snacks, and Ksh2 million on airtime. The expenditure was part of the Ksh1 billion donated

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by the World Bank for an emergency response that was to cater for the procurement of personal protective equipment, medicines and the setting up of isolation facilities. But even with the few funds available, counties have been under the spotlight, suspected of extravagance and embezzlement. In early May, four senior Kilifi county officials were arrested over tenders for the construction of a Kilifi Covid-19 Complex Centre and the repair and maintenance of equipment in county hospitals worth millions of shillings. Meanwhile, Bungoma County Governor Wycliffe Wangamati is under investigation by the Ethics and Anti-Corruption Commission over the inflation of prices of sanitary items for combating coronavirus.

These corruption cases have brought so much doubt among the citizens to the point that some citizens don’t even believe that the pandemic even exists.

Teenage pregnancies

Teenage pregnancies are a major challenge for socioeconomic development because they deprive young women the opportunity to further their education and achieve their career goals. It also exposes them and their children to major health risks. According to World Health Organization, “pregnancy and childbirth complications are the leading cause of death among girls aged 15–19 years globally.”

The recent reports on the spike in teenage pregnancies across the country during the COVID-19 pandemic has left many in shock and agitated. African Institute for Development Policy sought to validate and compare the number of teenagers presenting with pregnancies from the Kenya Information Management System in 2020 to 2019.

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</thead>
<tbody>
<tr>
<td></td>
<td>36257</td>
<td>29197</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>175,488</td>
<td>151,433</td>
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Source: Data Extract from Kenya Health Information System as at June 19th 2020.

According to the data extracted from KHIS, the rate of teenage pregnancies actually went down. This data only considered the teenagers who had reported to hospitals for pre-natal and post-natal care. It did not consider the unreported cases which might make these statistics shoot up. Nairobi county reported the highest rise in the numbers in January from 2412 to 3651 and February from 1813 to 3090. The main reasons for the numbers of teenage pregnancies include; rape, lack of knowledge on contraception, myths on contraception, parents not advising their children on abstinence and how to avoid pregnancy and also peer pressure.

Unemployment

With the measures put in place to control the spread of COVID-19, a lot of organizations advised their employees to work from home. Some organizations also let go of some of their employees because with businesses down it was hard to maintain employees. A lot of projects and businesses had to take a pause. With the unemployment rate high, a lot of people even lost their houses and were left homeless with families to take care of and no jobs.

Corona had a negative impact on the employment rate in Kenya. The level of unemployment rose sharply for the youth between the ages of 20 to 29 years. The unemployment rate doubled within the two months of the first case in the country rising from 5.2% to 10.4%. According to labor report by the Kenya National Bureau of statistics, these rose because most employers rushed to cut operation costs.34

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34 [Kenya’s unemployment rate doubles as 1.7M lose jobs between April and June-KNBS](https://citizentv.co.ke/business/kenyas-unemployment-rate-doubles-1-7-million-lose-jobs-april-june-knbs-343843/)
People in search of jobs

This crisis has undoubtedly exposed the vulnerability and lack of social safety net for gig workers in the country — although government bodies, nongovernmental organizations and corporate companies nationwide are going above and beyond to implement policies to cushion the economic impact of the COVID-19 pandemic, little attention is being paid to the needs of workers in the informal sector. Gig or Temporary workers including the plumbers, uber and bolt drivers, construction workers, electricians, beauty specialists, office cleaners and even the housekeepers. Temporary workers depend on being called in to work for certain hours and a lot of Kenyan citizens depend on this kind of self-employment and with the lockdown a lot of people were not open to letting in people to their homes without being very sure about their COVID status. There was also a lot of stigma in regards to the pandemic therefore even the temporary workers would avoid areas they knew had cases of the virus.

In Kenya, online platforms have been put to place temporary workers like Lynk which connects task-based service providers to customers and has provided workers with personal protective equipment, disinfectant, sanitizers, gloves and masks. They also offer training to help the workers to protect themselves.

Gender Based Violence

1 in 3 women have experienced physical or sexual violence. With the strict measures put in place by the government to counter the COVID-

41 https://lh3.googleusercontent.com/P07QAuvwFNjt2ROXg08dMWS7k5uvl-VF4HFB6e0bkey5lQjeYlkA-2CQdssNjvATzU9JPYYmrsKLEFKDejB0K88cEmBg=s1200

Virus, there has been a rise in gender based violence. According to the Kenyan government data, 45 percent of women and girls aged 15 to 49 have experienced physical violence and 14 percent have experienced sexual violence. Many cases are not even reported to the authorities and very few women get justice and receive medical care. The restrictions imposed made it harder for survivors to report abuse and seek help and for service providers to respond efficiently.

Source: control arms

On July 6th Thomson Reuters Foundation president ordered an investigation into the rising reports of violence against women and girls including rape, domestic violence, female genital mutilation and child marriages. The president ordered the National Crime Research Center to investigate the escalating cases of gender based violence and the cases of the girl child being disempowered.

The United Nations and the Government of Kenya launched a flash appeal seeking 267 million dollars to respond to the most immediate need for the people. 4.2 million was put towards lifesaving medical treatment, psycho-social and legal representation in relation to violence against children and GBV.

The increase in reported cases of GBV and violence against children since the start of the COVID19 crisis was driven by several factors. Financial hardship due to restriction of movement and curfew affected livelihoods, especially for those working in the informal sector. Confinement at home, under heightened levels of

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44 Kenya orders probe into rise in violence against women and girls during pandemic [https://news.trust.org/item/20200706165923-pey3m/](https://news.trust.org/item/20200706165923-pey3m/)

stress, uncertainty and fear, can produce stressful environments that precipitate violence. Children were at heightened risk of all forms of violence, including violent discipline by family members and emotional abuse. Families in highly pressured situations may have also resorted to child labor, transactional sex, FGM and child marriage. Removing children from a protective environment such as school, exacerbates these risks.

Other Emerging Issues

According to the situation report by UNOCHA on 10th September46:

1. The food security situation in the Arid and Semi-Arid Lands (ASAL) counties has significantly improved after two consecutive seasons of above-average rains, with approximately 739,000 people currently facing severe food insecurity (IPC Phase 3 and above), according to the Kenya Food Security Steering Group 2020 Long Rains Food and Security Assessment (LRA). The decline is attributed to the cumulative good performance of the 2019 short rains and 2020 long rains. The situation is predicted to remain stable till October 2020.

2. In urban areas, approximately 1.7 million people are projected to be facing food insecurity in the informal settlements, due to including, the impact of the COVID-19 pandemic on the economy, increased food prices and a decrease in income or the loss of a job.

3. Despite the general improvement in food security and nutrition outcomes, malnutrition levels remain high across the ASAL counties, indicative of the multiple and complex underlying causes beyond food security. Nearly 1.17 million children and women require treatment for acute malnutrition, including about 135,500 of them for severe acute malnutrition (SAM), according to the LRA.


5. The Ministry of Health confirmed that the cholera outbreak that affected Garissa, Wajir, Turkana, Murang’a and Marsabit countries this year is now under control, including the fourth wave that was reported in Turkana since June.

6. Outbreaks of measles are still active in five counties: West Pokot, Garissa, Wajir, Tana River and Kilifi, with a cumulative 512 cases

reported, including 49 confirmed and two deaths (CFR 0.4 per cent), according to MoH. At least 65 new cases have been reported since 6 August. Interventions by the County Health Departments in the affected counties include contact tracing, stocking of adequate doses of measles – rubella vaccines and vitamin A, maintenance of cold chain equipment, sensitization of the public and health workers and treatment of the cases.