



Your REF: TBA

Our REF: C/KELIN/2020

Date: 06/April/2020

Hon. Mutahi Kagwe
 Cabinet Secretary for Health &
 Chairperson, National Emergency Response Committee on Coronavirus
ps@health.go.ke; pshealthke@gmail.com

**Advance copy via email*

Dear Sir,

REF: OPEN LETTER ON IMPLEMENTATION OF MANDATORY QUARANTINE IN THE COVID-19 RESPONSE IN KENYA & REQUEST FOR INFORMATION

We, the undersigned, individuals, individuals under mandatory quarantine, family members of individuals under quarantine, organizations and associations, are representatives of health and human rights civil society and non-governmental organizations, community-based organizations and governance experts. We make reference to our previous advisory dated 28th March 2020 "[Advisory Note on Ensuring a Rights-Based Response to Curb the Spread of COVID-19: People - not Messaging - Bring Change](#)" whose issues raised remains unaddressed.

Our previous [advisory](#) had, among other concerns, noted that the implementation of the government's directive of mandatory quarantine and isolation of people affected by COVID-19 was uncoordinated, unplanned and not guided by any policy or guidelines.

We issue this open letter and formal request for information in light of concerns raised by individuals currently in mandatory quarantine, their family members and media reports. The [media have documented](#) poor management of individuals from the time they landed at Jomo Kenyatta International Airport, their transportation, up to the time they were admitted to various mandatory quarantine facilities. This exposed them to risk of infection, defeating the very essence of safeguarding the greater public and avoiding co-infection.

People in mandatory quarantine have also brought to our direct attention and through [open letters](#)¹ and personal [videos](#) clear cases of [recklessness in their handling](#), exorbitant costs they have been forced to incur to pay for the quarantine facilities, [deplorable living conditions in most quarantine centers](#), lack of information on any quarantine protocols, and [a general lack of any regard to their health, safety and well-being](#).² For the general public, it is not clear how many people are in mandatory quarantine, whether they have all been tested while in quarantine, how many have tested negative or positive and whether the results have been communicated to them. Similar information is unavailable to those in quarantine.

We take note of the fact that quarantine as a public health measure involves the restriction of movement, or separation from the rest of the population, of healthy persons who may have been exposed to the virus, *with the objective of monitoring their symptoms and ensuring early detection of cases*.³ The World Health Organization (WHO) recommends that mandatory quarantine should be implemented as part of a comprehensive package of public health response and containment measures and, in accordance with Article 3 of the International Health Regulations (2005), be fully respectful of the dignity, human rights and fundamental freedoms of persons. Further, that if a decision to implement quarantine is taken, the authorities should ensure that:

- the quarantine setting is appropriate and that adequate food, water, and hygiene provisions can be made for the quarantine period;
- minimum Infection Prevention and Control (IPC) measures can be implemented; and
- minimum requirements for monitoring the health of quarantined persons can be met during the quarantine period.

We are therefore appalled by the manner in which mandatory quarantine is being implemented which is putting those in quarantine, all health care workers attending to them and, by extension, the entire nation at risk. From the time the decision to enforce mandatory quarantine was made on 22nd March 2020, the public has had several concerns:

- There has been no public information on any guidelines on the mandatory quarantine process, save for [draft protocols dated 27th March 2020](#) and published on the Ministry of Health website on or about 3rd April 2020;
- There has never been information, within the public domain, or to those quarantined, on what to expect at the quarantine facilities, the period, costs, health information etc; There has never been information within the public domain, or to those quarantined on measures put in place to protect the workers at such quarantine facilities from infection including the provisions of personal protective equipment to the health care workers and others attending to them such as hotel workers. For instance, were all the health care workers and hotel staff tested and offered training on managing persons with COVID-19 before they received the people in mandatory quarantine?

As the nation continues struggling with the above, our attention is now drawn to a circular by Acting Director General for Health ([Ref: MOH/ADM/1/3/Vol.1](#)) communicating a decision to extend the quarantine period beyond 14 days for occupants of all facilities in which positive cases are identified. As expected, the circular raises further concerns:

- **The risk of co infection for those who are negative:** The Ministry of Health is already handling the quarantine process poorly, putting those in quarantine at risk and contributing to increased infections. What will extension of the quarantine period, of such poorly managed quarantine facilities,⁴ achieve other than increase chances of co infection for those who are COVID-19 negative?

1. Open letter by people quarantined at Pride Inn Azure Hotel dated 5th April 2020, REF: Directive to extend quarantine period beyond 14 days.

2. See Angela Okech, et. al "Covid-19: Kenyans reveal poor state of isolation centres"; John Allan-Namu "Inside the Quarantine: Fears of Further Spreading the Virus Haunt the Confined."

3. WHO, 19 March 2020, Considerations for quarantine of individuals in the context of containment for coronavirus disease (COVID-19) available at [https://www.who.int/publications-detail/considerations-for-quarantine-of-individuals-in-the-context-of-containment-for-coronavirus-disease-\(covid-19\)](https://www.who.int/publications-detail/considerations-for-quarantine-of-individuals-in-the-context-of-containment-for-coronavirus-disease-(covid-19))

4. For example, the Kenya Medical Training Centre, Moi Girls High School Nairobi, Lenana School

- **Lack of information to the people under quarantine of the extension:** Who does the circular apply to? At whose cost is the extension? Why a blanket circular to all, yet the Ministry admits that some centers were managed better? Was this circular communicated to those in the mandatory quarantine facilities before it was made public? Do the health care workers and other personnel (e.g. hotel staff) in these facilities have personal protective equipment? Why is it that people who have tested positive appear to learn of their status from the media? Is this not a breach of medical ethics?
- **Poor quarantine facilities:** It is evident that most quarantine facilities are in deplorable conditions. WHO recommends that those who are in quarantine must be placed in adequately ventilated, spacious single rooms with en suite facilities (that is, hand hygiene and toilet facilities). If single rooms are not available, beds should be placed at least one meter apart. Those in quarantine report otherwise, and publicly available video evidence confirms this.
- **Psychosocial Effects of Prolonged Isolation:** How will the Ministry of Health ensure that the mental health of those in quarantine is well taken care of?
- **Proof of Contact:** WHO recommends that contacts of patients with laboratory-confirmed COVID-19 be quarantined for 14 days from the last time they were exposed to the patient. This is also reflected in the [draft protocols dated 27th March 2020](#). What happens to those people who have adhered to quarantine conditions, including social distancing, and have tested negative?
- **Turnaround times for testing:** Per the Ministry's Draft Protocols, test results are to be availed within 24 hours. What is the Ministry doing to ensure results are availed within a reasonable time, to allay unnecessary anxiety and strengthen the quarantine regime overall?

From the foregoing, we now demand that the Ministry of Health, and the National Emergency Response Committee on Coronavirus, urgently makes the following information public in compliance with Article 35 of the Constitution of Kenya and the Right to Access Information Act:

1. Provide an explanation as to why the Ministry of Health is not adhering to its own guidelines relating to managing the designated mandatory quarantine facilities. For instance, why are people who have first tested negative test not released into self-quarantine as per the self-quarantine protocols?
2. Does the circular extending the quarantine period apply to all quarantine facilities? Why? At whose cost?
3. The total number of designated quarantine facilities as at 6th April 2020 and the number of occupants in each? The number of health care workers and their cadres that have been deployed to these quarantine facilities? How many people are currently in quarantine who have been tested and received their results?
4. What measures are being taken to safeguard the health of people in quarantine facilities who have pre-existing medical conditions?
5. What is the time period taken when one tests positive in a quarantine facility before they are transferred to medical facility for isolation?
6. Have the healthcare workers and hotel attendants who have come into contact with the persons who have tested positive been tested and provided with PPE?

As per Section 27 of the Public Health Act, the government has the responsibility of isolating persons who have been exposed to infectious diseases. In the public health emergency occasioned by COVID-19 pandemic, we urge the government to diligently undertake this obligation by, among others, providing safe, clean and hygienic quarantine facilities; meeting the costs of such facilities; and above all monitoring the health including mental health of those in quarantine and promptly discharging those who test negative.

Signed by the following individuals:

1. Allan Maleche
2. Ashok Rajput
3. Atieno Odenyo
4. Benson Maina
5. Bridget Kanini
6. Bonface Ombui
7. Caroline Jerop Morogo
8. Catherine Murugi
9. Christine Nkonge
10. Eugene Ligale
11. Evaline Kibuchi
12. Evelyne Wanjiru Karanja
13. Etta Ligale
14. Francis Aywa
15. Francis Mwangi
16. Grace Macharia
17. Hallima Nyota
18. Huzefa Amirali Mohamedbhai
19. Jamie Nyamongo
20. Jasmine Lemelin
21. Karishma Bhagani
22. Margaret Kalekye
23. Mark Gitau
24. Melanie Ligale
25. Maureen Ouma
26. Naiya Anil Haria
27. Nicholas Mwenda
28. Nickitah Mckena
29. Patricia Asero
30. Peter Owiti
31. Rahul Ponda
32. Rashmi Shah
33. Reggie Ann
34. Sarah Mburu
35. Sajan Thakar
36. Sarah Mwangi
37. Samson Onditi
38. Shanay Sirju Patel
39. Sheila Masinde
40. Sirju Shashikant Patel
41. Sophia Muchiri
42. Soukhya Ankala
43. Tanika Dodhia
44. Twinkle Pethad
45. Vaishali Sirju Patel
46. Vivian Washiko
47. William Mburu

Organisations:

1. Amnesty International
2. CADAMIC
3. COFAS
4. Community Initiative Action Group – Kenya
5. EMAC Kenya
6. FIDA Kenya
7. GALCK
8. Happy Life for Development CBO
9. HENNET
10. HERAF
11. International Community of Women Living with HIV – Kenya Chapter
12. ICJ – Kenyan Section
13. Katiba Institute
14. Kenya Legal & Ethical Issues Network on HIV & AIDS (KELIN)
15. KANCO
16. Lean on Me Foundation
17. Next Generation of Kenya Lawyers Project
18. Nelson Mandela TB-HIV Resource Centre Nyalenda
19. People’s Health Movement – Kenya
20. PEMA Kenya
21. Rising to Greatness
22. SWOP Ambassadors
23. The Network on Food and Nutrition Security
24. TICAH
25. TISA
26. Transparency International Kenya
27. Wote Youth Development Projects

cc:

Hon. Wycliffe Ambetsa Oparanya,
Chairperson, Council of Governors

Siddharth Chatterjee,
UN Resident Coordinator in Kenya

Bernard Mogesa
CEO, Kenya National Commission on Human Rights

Dr. Joyce Mwikali Mutinda
Chairperson, National Gender and Equality Commission (NGEC)

Hon. Florence Kajuju
Chairperson, Commission on Administrative Justice

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