

## CONTESTATION OF BIOMEDICAL INFORMATION ON COVID-19 IN ALEGO-USONGA

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### ABSTRACT

**Purpose of the study:** The study examined community contestation of biomedical information and COVID-19 containment measures in Alego-Usonga, Kenya.

**Statement of the problem:** Although containment measures were introduced to reduce viral transmission, their implementation encountered resistance shaped by local social, cultural, and economic circumstances. Understanding these responses is important for strengthening public trust in future health emergencies.

**Research methodology:** The study adopted an ethnographic research design involving 35 purposively selected community members, key informant interviews, and focus group discussions. Data were documented through audio recordings, video recordings, and field notes and examined using thematic and discourse analysis.

**Findings:** Community members contested curfews, mask requirements, social distancing, hygiene protocols, vaccination campaigns, transport capacity limits, school closures, and restrictions on gatherings. The reported concerns included perceived infringements of civil liberties, livelihood disruption, weakened social relationships, cultural dissonance, misinformation, and distrust of public authorities. Resistance to vaccination also reflected uncertainty about vaccine safety and inconsistent messaging.

**Conclusion:** The study concludes that contestation reflected the interaction between biomedical interventions and community interpretations of their social consequences. Public health measures were more difficult to accept when they were perceived to disregard livelihoods, rights, and established social practices.

**Recommendations:** The study recommends that policymakers should design culturally responsive risk-communication strategies and engage communities early in emergency planning. Health authorities should communicate consistently, address misinformation, and explain the rationale for interventions. Future responses should balance disease control with civil liberties, economic security, and community resilience.

**Keywords:** *Sociocultural barriers, contestation, COVID-19, containment measures, risk communication*

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## INTRODUCTION

Society was considerably disrupted by the COVID-19 pandemic with various social institutions and structures ranging from education, economy, entertainment and recreational activities affected by the containment measures that were put in place to reduce the virus spread (Malik *et al.*, 2022; Redbird *et al.*, 2022). Educational institutions faced prolonged closures as many institutions resorted to virtual learning which further deepened inequalities for students from less privileged households (Piusi, 2024). Various social events such as burials and wedding ceremonies had restrictions in terms of the number of people that were allowed to attend such events. Businesses were also affected with interventions such as social distancing mandates as well as prohibition against social gatherings affecting businesses, especially those in hospitality leading to closures and by extension business losses (Qian *et al.*, 2022).

Against this backdrop, the rollout of COVID-19 vaccination was touted as helping society to return to normalcy (WHO, 2021; MOH, 2021). However, the rollout of the COVID-19 vaccine was met with mixed reactions ranging from vaccine resistance, hesitancy rooted in the socio-cultural outlook on the nature of the vaccine (Ochieng' & O'Mathuna, 2024). In addition, misinformation played a key role in determining the level of trust in health systems with culture and religious views shaping how people viewed the pandemic (Muinga *et al.*, 2022). Ultimately, vaccine acceptance was not uniform with varying acceptance based on fear of safety, side effects and perceived violation of private rights (Shah *et al.*, 2022).

## **RESEARCH OBJECTIVE**

The study was guided by the following research objective:

To analyse contestation of COVID-19 biomedical information and containment measures, including curfews, mask-wearing, social distancing, hand hygiene, vaccination campaigns, passenger limits, school closures, and restrictions on social gatherings.

## **RESEARCH METHODOLOGY**

The study employed an ethnographic design and purposively selected 35 community members, with recruitment informed by data saturation. Data were gathered through in-depth interviews, key informant interviews, and focus group discussions (FGDs). Audio recordings, video recordings, and handwritten field notes supported documentation of participants' accounts. Thematic and discourse analyses were used to explore how community members interpreted and contested COVID-19 measures within biomedical and ethnomedical understandings of health.

## **RESULTS AND DISCUSSION**

### **Contestation of Bio-medical Information on COVID-19**

The study examined how residents of Alego-Usonga contested different COVID-19 containment measures, highlighting the multifaceted nature of contestation that was influenced by a range of perceptions, including perceived civil liberties violations, economic disruptions, weakened social ties, and cultural conflict.

### **Contestation of Curfew**

The responses highlighted the various ways in which the dusk-to-dawn curfew had impacted the lives of people of Alego. The inconvenience triggered significant opposition from the locals who struggled to adapt to the stringent rules. The beliefs that curfew was a desocialization instrument, an economic destabiliser, and a violation of civil liberties served as the foundation for the curfew controversy.

### **Curfew as a Violation of Civil Liberties**

Curfew was contested in part because it was thought to constitute a grave violation of people's rights, as illustrated by the following excerpts:

*The government-imposed curfew really limited our freedom of movement. Police officers were always patrolling and, in many cases, harassed those they found outside during the curfew.* (Female, a 43-year-old peasant farmer)

*We felt that the implementation of the curfew ought not to have been done at the expense of individual rights. It (curfew) made our lives very difficult.* (Male, a 53-year-old teacher)

These excerpts illustrate the conflict between law enforcement and the population, who felt that the curfew violated their civil liberties. These accounts align with research by Aborisade (2021), who noted comparable abuses exhibited by Nigerian law enforcement during curfew enforcement, indicating a concerning propensity for civil rights violations. Similarly, curfew was contested in Alego-Usonga partly because it was believed to violate civil freedoms. Reported confrontation between law enforcement and the public could cause a strained relationship, which would make it challenging for health authorities to gain the support and dedication of the public they needed to fight the pandemic.

### **Curfew as an Economic Destabilizer**

Curfew contestation was also shaped by the belief that it was an economic destabiliser because of its detrimental effects on commercial operations as illustrated by the following excerpts:

*we witnessed how curfew affected business activities during the pandemic. In this neighborhood for example, by 7 pm the market centre was almost deserted.* (Female, 45-year-old- trader)

*Evenings are normally the peak of business activities yet we were prohibited from opening our business premises beyond curfew ours. My business almost collapsed resulting from the curfew measures* (Male, 38-year-old jua kali artisan)

These testimonies illustrate the financial concerns associated with curfew enforcement. In a study that sought to analyse how COVID-19 pandemic affected employment and small and medium-sized businesses (SMEs), Al-Fadly (2020) discovered that many SMEs found it difficult to adapt to the COVID-19 enforcement measures, which had an adverse effect on their cash flow and, consequently, on employment levels. Thus, this study's results align with those of Al-Fadly (2020), who found that contestation was largely motivated by worries about how the curfew would damage the livelihood and economy of traders who were impacted by the curfew restrictions.

### **Curfew as a Desocialization Tool**

Curfew was contested as a COVID-19 confinement method after it was perceived as a desocialization tool, as illustrated by the following excerpts.

*It (curfew) made us feel like prisoners in our homes. We were really affected psychologically as a result of the restrictions that were brought about by the curfew.* (Male, 44-year-old peasant farmer)

*It was so difficult to adjust to the government-imposed curfew guidelines. It really interfered with our social lives occasioning 'a cat and mouse' chase between non-compliant members of the community and law enforcers* (Male, 28-year-old youth)

According to Salman *et al.* (2021), Kuwaiti citizens' psychological well-being was significantly impacted by the curfew due to health-related limitations. The psychological toll curfews took on the population was also highlighted by Alghamdi *et al.* (2022), underscoring the necessity of reducing the pandemic's social and psychological effects. Their results align with the study's findings, which reported that the opposition to curfew restrictions was linked to the belief that it was a desocialization instrument bringing to focus the need to ensure that people's social and psychological well-being was not jeopardized in the course of designing and public health interventions.

### **Contestation of Wearing of Masks**

The use of masks as a COVID-19 intervention sparked considerable debate, revealing long-standing tensions between public health authorities and community members. The application of force to enforce public compliance was viewed as state subjugation. In addition, mask-wearing was seen as a departure from cultural norms bringing with it the complexity of stigma during the pandemic.

### **Mask as a Symbol of State Subjugation**

The following extracts highlight the alleged harassment and dominance of health and security authorities during the implementation of the guideline, which was at the centre of the debate around mask-wearing:

*People were often arrested for not wearing masks, there was conflict between the community and the health authorities who were perceived to be forceful in the implementation of the guidelines, punishing individuals without due regard to human dignity or understanding of their personal*

*circumstances. Thus, while face masks were important, community members initially perceived them as restrictive (Male, 58-year-old smallholder farmer)*

*We felt that the manner in which authorities enforced mask compliance was an infringement on our personal liberties. They should have allowed us to decide for ourselves what was in our best interest. To the contrary, we would be victimized even where one had inadvertently failed to wear a mask. (Male, 45-year-old smallholder farmer)*

Nyamnjoh (2021) examined how the socio-political environment that shaped the COVID-19 situation, observing that the pandemic mainly exposed underlying patterns of state actors' repression. According to the author, authorities tended to exploit the crisis and pursue an authoritarian agenda, which exacerbated vulnerabilities for various groups and continued violations of human rights. These results align with the study's findings, which also showed that rather than using a friendlier approach to ensure compliance, law enforcement personnel overly confronted residents for not using masks. The community views the enforcement as punishing and occasionally raises human rights issues, therefore the implementation of mask-wearing in such a repressive environment illustrates the context of contesting mask-wearing as a COVID-19 action.

### **Mask Wearing as a Deviation from Cultural Norms**

The narratives that viewed the mask as a departure from traditional standards also served as a catalyst for contestation as illustrated by the following accounts:

*The strict enforcement of mask-wearing during the pandemic felt quite odd. It clashed with our traditions which did not envisage the use of face mask outside areas like hospital facilities. We therefore found it difficult to adapt initially since we felt that the wearing of masks in all public gatherings was departure from usual way of doing things (Male, 59-year-old village elder)*

*People perceived it (the wearing of mask) as a deviation from cultural norms disrupting our ways of social interaction particularly where facial expressions were key. We felt socially awkward wearing masks especially at the beginning of the pandemic. Those who were compliant in some cases were stigmatized as they could be perceived as identifying themselves as COVID-19 patients (Vitalis Nonga, Cultural Leader)*

According to Zagury-Orly's (2020), public health attitudes toward masks as a COVID-19 health intervention were significantly shaped by individual philosophies, societal conventions, and culture. The author advocated for communication techniques that took into account the nuances of mask resistance that vary from culture to person. The results of the study, which reported that

cultural ideas underlie the contestation of mask-wearing, align with those of Zagury-Orly (2020). It is important to take into account how the social meaning attributed to objects like masks reinforced their contestation in the wake of the epidemic, as they unintentionally became the symbol of COVID-19 stigma rather than being viewed as protective gear.

### **Contestation of Social Distancing**

In Alego-Usonga, there was considerable opposition to the COVID-19 measure of maintaining social distance in public areas. Respondents recalled that social distancing policies had first been viewed with concern because they were thought to be a means of desocialization, economic instability, and stigma perpetuation.

### **Social Distance as a Tool for Desocialization**

According to the respondents, social connections were disturbed by the social distance rule since it caused restrictions during public gatherings like weddings and funerals:

*I vividly recall the moment social distancing as a COVID-19 containment measure was introduced. The introduction of social distancing guideline created a sense of anxiety here in Alego-Usonga. These guidelines certainly caused considerable disruption in how people related to one another in public spaces like restaurants and shopping centres and in social events such as weddings and funerals. People felt that social distancing was too restrictive to social interactions which had traditionally reinforced social connection among friends, relatives and colleagues.* (Female, 37-year-old smallholder farmer)

*We should have been granted the freedom to interact without restrictions. We felt that Government imposition of social distance infringed on our individual liberties.* (Female, 43-year-old smallholder farmer)

Richmond (2021) investigated how the COVID-19 pandemic affected people's life and found that social distancing and other measures had a significant impact on people's daily routines and social contacts, particularly for the elderly. The author observed that this had a major impact on people's mental and emotional health as well. These results align with those of the study, which reported that social distancing guidelines in Alego-Usonga were initially contested. Given that social distancing significantly strained communal ties and social norms, the findings indicate that it was very disruptive. This emphasizes the necessity for policymakers to create health regulations that are considerate of the cultural needs of the group they are trying to protect.

### **Social Distance as an Economic Destabilizer**

Additionally, respondents perceived the social distancing regulation as detrimental to the local economy and way of life:

*We were hesitant to embrace social distancing guidelines because we felt that these measures were driving our livelihoods into the ground. Our greatest concern was that the social distancing requirement meant that businesses such as restaurants were not able to operate optimally thus jeopardizing our growth* (Female, a 45-year-old- trader)

*Especially for those of us who sold goods in open-air markets, we found it hard adapting to the social distancing guidelines. There was a significant strain in our operations as social distancing guideline remained in force* (Male 37-year-old trader)

According to comparative research by Andersen *et al.* (2020), business activity significantly decreased in Denmark when social distancing was implemented, in contrast to Sweden, which had imposed fewer limits on social distancing. These results, which support the study's findings, highlight the economic difficulties caused by social distancing policies and people's resistance to following them, especially in the case of companies that heavily rely on interpersonal communication. These findings underscore the need for duty bearers to consider citizen's socio-economic well-being and means of subsistence when determining the best course of action for their health.

### **Social Distance as Perpetrating Stigma**

The idea that social distancing rules were fostering stigma was another reason why they were contested, as illustrated by the following excerpts:

*We felt that social distancing measures inadvertently perpetuated stigma, as individuals could link the keeping of social distance to distrust or fear of others, particularly those who physically appeared to be unwell.* (Female, 28-year-old youth)

*It (social distance) reinforced the sense of isolation, which by extension contributed to mental health challenges and in doing so, perpetuating existing prejudices against those perceived as riskier.* (Male, a 53-year-old teacher)

Tomczyk *et al.* (2020) found that stigmatization of people who were thought to be more likely to get COVID-19 and risk perception were related to the degree of compliance with social distance. Their research highlights the strong link between stigmatization and the application of social distancing imperatives. Similarly, in the study, it was evident that social distancing was contested

in response to what the community saw as stigma. This emphasizes the necessity of making sure that health precautions don't backfire by erecting social barriers that worsen the pandemic's effects.

### **Contestation of Hand Hygiene Promotion**

Health officials hailed the promotion of hand hygiene as a successful strategy to fight the COVID-19 outbreak. Hand washing is highly valued by Kenyan health officials, and Community Health Promoters are crucial in promoting good handwashing practices. Furthermore, according to health regulations, every office or commercial space had to include handwashing supplies at the entry. Strict adherence to handwashing as a COVID-19 intervention, however, was heavily contested, in part because it was perceived as an alien habit and because handwashing was perceived as draining.

### **Hand Sanitization as a Departure from Norms**

As seen in the following extracts, the opposition to hand sanitization in Alego Usonga was also typified by the fact that it went against people's customs:

*We viewed constant hand washing as radically in conflict with our usual behavior in the course of going about our fast-paced daily routines where hand hygiene is not given so much prominence. We had always operated freely with little consciousness around regular adherence to hand hygiene particularly in business settings. (Male, 44-year-old peasant farmer)*

*The strict hand washing mandates that we witnessed during COVID-19 pandemic were in conflict with our long- established society norms and behavior which never contemplated such interruptions occasioned by the rigors of high hygienic standards (Male, 38-year-old jua kali artisan)*

As part of the COVID-19 containment efforts, Muthuka *et al.* (2022) investigated the level of handwashing routine adherence among Nairobi's slum dwellers. According to their findings, there are significant obstacles to enforcing handwashing laws, chief among them being cultural norms that did not normalize the practice. Therefore, their results, which align with the study's findings, show how contestation was based on the incompatibility of handwashing with usual community practice underscoring the need to engage the community in adopting health practices that promote better hygiene.

### **Handwashing as Exhausting**

The community also contested handwashing as a COVID-19 intervention because they felt it was draining because the mandate required handwashing after comparatively brief periods of time spent going from one location to another:

*We found the washing of hands as a requirement for one to enter any business premise as exhausting. Sometimes you would get into a business premise and the security officer at the entrance would require that you wash your hands yet perhaps one's hands were already clean or one could be having their own sanitizer (Male, 45-year-old smallholder farmer)*

*Like here in Alego, we believe that anytime we wash our hands –it has to be when we want to have a meal. But COVID-19 brought a situation where we were forced to wash our hands all the time even if we are going not to have any meal. So, it contradicts what we believe in as people of Alego. (Male, 30-year business man)*

Dewi & Asmoro (2021) discovered that while encouraging hand hygiene was essential to keeping the COVID-19 pandemic under control, doing so repeatedly in quick spurts could be tiresome and lead to community members growing fatigued, which would ultimately lead to a drop in adherence. Their findings support those of the study and demonstrate the inconvenience of handwashing and the resultant contestation. This highlights the need for healthcare providers to reevaluate how to implement such requirements in a way that promotes adherence.

### **Contestation of Vaccination Campaigns**

Participants described how they were first uncomfortable with the vaccination campaigns, illustrating the wider delayed adoption of the COVID-19 vaccine in the general public. Vaccination as a COVID-19 measure elicited misapprehensions and hesitancy. Mistrust of authority, contradictory government claims, and feared negative side effects, were the main reasons why vaccination initiatives were contested.

### **Vaccine as a Source of Government Profiteering**

The study found that the public's lack of trust in the government fostered an atmosphere that allowed false information regarding COVID-19 to proliferate. The following excerpts demonstrate the widespread belief that COVID-19 was a scheme by a rogue government or other entities to achieve financial gain:

*What is causing people to have conflicting opinion is that the current government isn't truthful, this is because the government focused on COVID-19 at the expense other overarching needs like*

*education yet we haven't witnessed any notable impact of COVID-19 on humanity. The government is so preoccupied with it raising doubts on whether there is truly a good intention or vested interest particularly around funding (Male, 50-year-old shop keeper)*

*Some people thought that COVID-19 information was simply money-making propaganda by the government agents. The COVID-19 restrictions and all measures taken to prevent COVID-19 were all interpreted to be a conspiracy by some individuals (in government) to make money (Male, 37-year-old, smallholder farmer)*

In their study, Jennings *et al.* (2021) found that unwillingness to get the COVID-19 vaccine might have been occasioned by lack of faith in health authorities. Their research also revealed how social media contributes to the spread of conspiracy theories, which often cause vaccine hesitancy. Their results, which align with the study's findings, highlight the necessity of fostering public confidence and guaranteeing correct information distribution to combat vaccine reluctance.

### **Contestation Due to Vaccine Mis-information**

The respondents recalled that the existence of contradictory official reports was another factor contributing to public misinformation:

*Many people contested the COVID-19 vaccination because the government's messaging often seemed inconsistent and confusing. At first, there were strong assurances about safety, but later updates introduced doubts and shifting guidelines. This lack of clear, steady communication led to mistrust and hesitation within the community. (Male, 59-year-old village elder)*

*You realize that at times the health officials were giving contradicting information just like when some people died. The health officials were saying that most of them died because of COVID-19 unlike we the people of Alego, there are those who died and we knew what killed them unlike the Ministry officials. You realize somebody was suffering from malaria but the ministry officials assume that anyone who died then it was COVID-19 and nothing else. (Male, 30-year business man)*

Nagler *et al.* (2020) in their study examined the contestation of COVID-19 vaccination programs in the United States and discovered that people's exposure to false information was likely to affect their contestation of the vaccine's effectiveness. This highlights the obligation by authorities to promptly disseminate accurate information to the public to ensure that they are well-informed and can respond to the pandemic more effectively. Their results, which align with the findings of the study, show that inconsistencies in the official information that health authorities released during

the pandemic significantly contributed to the development of mistrust and, in turn, influenced vaccination hesitancy.

### **Vaccines as a Harmful Agent**

Additionally, the respondents reported that the narrative COVID-19 vaccines were ineffective and extremely painful. Some people had false beliefs regarding the COVID-19 vaccine's negative effects, thinking that the vaccine itself could cause them illnesses:

*False narratives that I have heard can be related to the initial affirmation that COVID-19 is harmful to one's health. Some people believed that the vaccines caused a lot of pain whereas this was an initiative by the government to help her citizens. Residents also mistrust that the doses that were administered could be different from what the Government had provided (Female, 37-year-old Smallholder farmer)*

*At first, I was quite uneasy with the vaccination. It took me quite some time to accept to be vaccinated. I was so concerned and was asking myself what was this vaccine and what side effects was it likely to present to the human body. (Female, 54 years old Smallholder farmer)*

*The sociocultural norms and beliefs on the adverse effects following immunizations have contributed to low acceptance of the COVID-19 vaccine. Some people experience mild side effects, others no side effects, others experience pain, redness, swelling of arms, headache, muscle pain, fever, chills in the body. All these show that the body is building protection. But the cultural beliefs that vaccines are associated with family planning, low libido for men, make women not to accept the vaccine, rumored effects that one could contract covid 19 illness from the vaccine caused low acceptance, therefore all these were addressed through health talks at facilities, FGDS to target PLHIV clients, the nurses upon administration of the vaccines monitored clients for 10 mins after vaccination to counter immediate side effects. Most clients who received care responded well to treatments and felt better quickly. (Margaret Ogude, COVID-19 Program Officer LVCT)*

Palmer (2022) examined the perceived negative effects of the COVID-19 vaccine and found that vaccine reluctance was significantly influenced by false information. In raising awareness of vaccine safety and real side effects, the author emphasized the importance of accurate information to help the community better understand the risks and benefits of vaccines and promote their acceptance for improved health outcomes. Similarly, the study demonstrated that community members' doubts about the safety and effectiveness of the immunizations were impacted by

misconceptions about the vaccine's negative consequences. This underscores the necessity of focused initiatives meant to restore community trust.

### **Vaccines as Cultural Dissonance**

The following excerpts highlight how deep-seated cultural mistrust led to the contestation of COVID-19 vaccinations.

*Traditional health practices clashed with the organized vaccination efforts, as local beliefs about illness and healing led to resistance against the vaccine. Elders and community leaders often advocated for their own methods of prevention, complicating outreach efforts. (Male, 46-year-old animal trader)*

*Before I got the vaccination, I encountered falsehoods with people claiming that the vaccine increased morbidity. There are three people who inflicted fear in me making me to believe that the vaccine was going to lead me into sickness as opposed to disease protection. So initially I made a decision not to be vaccinated and I had to be called several times to get the vaccine. (Female, 38-year-old Smallholder farmers)*

In their study, Hassen *et al.* (2022) examined the sociocultural elements that contributed to vaccine hesitancy. The authors found that a preference for traditional treatments over mainstream medicine was caused by cultural factors including religious beliefs and spiritual tendencies. These results, which align with the study's findings, emphasize the importance of culture in the debate over the COVID-19 vaccination and the necessity for health authorities to create culturally responsive policies to promote vaccine uptake.

### **Contestation of Motor Vehicle Capacity Limits**

One of the most important ways to improve passenger safety during the peak of the epidemic was to limit the number of people who may board the Public Service Vehicle (PSV). In order to enforce social separation within the cars, some seats were marked as unavailable to the passengers. Due to the inconvenience, disruption of economic activity, and propagation of social segregation, the guideline was first met with considerable resistance by both transport companies and passengers.

### **Capacity Limits as Inconveniencing**

Capacity limits were contested because they caused significant inconvenience, as evidenced by the following narratives:

*People were frustrated every time they sought for public transportation. While it was announced (by health authorities) that the capacity limits were meant to ensure safety of passengers using public transport. There was a lot of chaos in bus stations with so many passengers stranded as not all the motor vehicle operators had complied by the time the regulation had been put in place. There was considerable discontent among residents who found it difficult to get to their destinations following a nationwide crackdown on non-compliant vehicle. Thus, residents were caught in the crossfire between this COVID-19 containment measure and the need to go about their business without undue inconvenience. (Male, 36-year-old Jua Kali artisan)*

*We realize that limiting vehicle capacity is essential to curb the spread of COVID-19, but we urge officials to consider more flexible guidelines that acknowledge our community's unique needs and values. (Male, 65-year-old village elder)*

In their analysis of the COVID-19 pandemic's effects on transportation, Du *et al.* (2021) observed that although motor vehicle capacity restrictions were required to contain the disease, they also caused delays and inconvenience for passengers. Their results, which align with the study's findings, thus show that although people understood the significance of motor vehicle capacity limits, the mandate caused significant inconvenience, leaving many stranded and unable to strike a balance between safety and daily responsibilities.

### **Motor Vehicle Capacity Limits as an Economic destabilizer**

The study's participants additionally stated that their perception of motor vehicle capacity restrictions as an economic destabiliser was the driving force for their contestation:

*Reducing capacity on commercial vehicles directly affects our local businesses that rely on transportation, and we respectfully request adjustments to accommodate our economic recovery while still prioritizing health. (Male, a 46-year-old trader)*

*Restricting the number of passengers in matatus directly harms drivers' incomes. How can we expect our economy to recover when the rules make it harder for people to get to work? (Male, 44-year-old peasant farmer)*

In research conducted in Nigeria, Okeke *et al.* (2022) examined the COVID-19 regulations that were implemented in the transportation industry and noted the significant financial impact that these rules had on both passengers and transport companies. The operators, who were now compelled to transport fewer people, were under considerable financial duress. As a result, commuters were forced to shoulder more of the cost, which reduced the number of trips. Similar

to the results of the study, this scenario illustrates the financial difficulties brought on by the implementation of motor vehicle limits, which is why the community opposed the COVID-19 containment measures that included restrictions on passenger cars.

### **Motor Vehicle Capacity Limits as Exacerbating Social Exclusion**

The definition of social exclusion is "a multifaceted process of progressive social rupture, detaching groups and individuals from social relations and institutions and preventing them from full participation in the normal, normatively prescribed activities of society in which they live." (Levitas, 2024). The following passages demonstrate how motor vehicle capacity limits exacerbated social inequality in transportation by disproportionately affecting the community's most vulnerable members who relied more on public transportation:

*Many of our community members rely on matatus, and we must ensure that capacity limits do not disproportionately affect vulnerable populations who may struggle to find alternative means* (Male, a 35-year-old jua kali Artisan)

*Capacity limits disproportionately affect marginalized communities who rely on public transport for essential services. This measure only deepens existing inequalities in access to healthcare and employment opportunities.* (Male, 45-year-old smallholder farmer)

According to Thompson and Rohwerder (2023), vulnerable populations in Kenya were disproportionately impacted by motor vehicle capacity constraints. This was because the capacity restrictions led to higher travel expenses, which in turn decreased mobility, particularly for low-income individuals who primarily used public transportation. Their results, which align with the study's findings, demonstrate how arguments that motor vehicle capacity limits disproportionately impacted vulnerable groups of people led to their contestation, underscoring the necessity of including safeguards for inclusivity when creating health policies.

### **Contestation of School Closures**

The respondents also described how parents and educational institutions opposed school closures as a COVID-19 containment strategy. This was because closing schools presented a number of previously unheard-of difficulties.

### **School Closures as Perpetuating Inequality**

Concerns were raised that children from low-income families who were unable to pay for homeschooling were always at a disadvantage and that exposure to negative household dynamics,

like gender-based violence, was made worse by other COVID-19 policies, like curfews and social gathering bans:

*The government declared the closure of all learning institutions when the first victim was reported in the country. Schools remained closed for several weeks as the pandemic persisted contrary to the initial expectation that it would be short lived. There was a growing concern among parents who felt their children were missing out on their right of education. Besides not all parents could afford gadgets to facilitate virtual learning...Parents were also concerned about school fees that they had already paid before schools were closed. They felt it had gone to a waste. It was also saddening to hear over the radio that cases of gender-based violence had risen during the pandemic. Some people said that it was linked to the mental health crisis that was aggravated by COVID-19 containment measures. (Male 40-year-old Jua kali Artisan)*

*We felt that school closures had disproportionately affected students from mainly low-income families, who were likely to rely on the school for meals and resources. We therefore found it to be unfair because the new situation would require them to live without the support systems that education institutions provided.... We also felt that remote learning also perpetuated considerable educational gaps, especially for younger students still mastering foundational skills. We therefore felt that closing schools is a disservice to our children's futures and overall development. (Female, 45-year-old- trader)*

Ikoni and Ogundele (2020) investigated how school closures affected education in Nigeria as the country's educational system transitioned from in-person to virtual instruction. The obstacles that were linked with this paradigm change included weak public infrastructure and technology to facilitate digital learning, consequently disenfranchising children from vulnerable households who were the main clients in public institutions. However, the disparity in households among children from low-income families was not the main focus of their study. However, their results are somewhat consistent with the study's findings, which showed that perceived inequity in access to digital learning resources during school closures influenced contestation. This emphasizes how important it is for health officials to think about the effects of policies like closing schools to avoid similar disempowerment during subsequent pandemics.

### **School Closure as a Mental Health Trigger**

The following examples demonstrate how school closures were a catalyst for mental health issues, which further fuelled opposition to them:

*Children's emotional wellbeing is at stake; being isolated from peers and school structure can lead to long-term mental health issues. We should prioritize safe, in-person learning to support our kids during this crisis. (Female, 40-year-old Salonist)*

*While we understand the need for safety during a pandemic, schools can be modified to protect students and staff rather than closed entirely. With proper protocols in place, schools can be safe environments for learning. (Female, 38-year-old Smallholder farmers)*

Lee (2020) examined how the shutdown of schools during the pandemic affected mental health, pointing to the fact that young students encountered significant emotional difficulties. In contrast to the typical school routine they were accustomed to, the author observed elevated anxiety and melancholy because of home isolation. These results align with those of the study, which reported that students and worried parents both experienced mental health issues related to school closure. This emphasizes the necessity of focused approaches meant to address mental health issues to encourage adherence.

### **Contestation of Prohibition Against Social Gatherings**

Prohibitions against public events and social gatherings also generated considerable controversy. This was because it was perceived as weakening social bonds, upsetting culturally significant customs, upsetting local economies that depended on face-to-face interactions, and igniting discussions about individual liberties. These factors underscored the necessity of public health policies that are culturally aware, economically supportive, and rights-conscious.

### **Prohibition Against Social Gatherings as a Tool for Weakening Social Ties**

The following extract illustrates how the ban on social gatherings hampered culturally significant events like weddings and funerals:

*Prohibition against social gatherings affected the social fabric of the Luo. Our way of life as Luo was greatly affected. When somebody was dead there was a prohibition against gatherings hence the deceased's kinsmen could not give him a befitting send off. The restrictions further affected other cultural activities such as weddings and dowry payment. Thus, it was even believed that this was a conspiracy to thwart social interactions (Male 28-year-old youth)*

*In times of crisis, our relationships are what keep us strong. Prohibition against social gatherings feels like a severing of those essential social ties. The prohibition of social gatherings during the COVID-19 pandemic disrupted people's traditional ways of connecting, limiting opportunities for celebrations, family events, and communal activities. Many individuals experienced isolation and*

*a sense of disconnection, which impacted mental health and well-being.* (Male, 40-year-old Juakali Artisan)

Völker (2023) examined the effects of social gathering bans on interpersonal relationships, observing that the reduced physical connection led to feelings of social isolation and loneliness. Despite this, the study found that technology helps people who are not physically close to each other retain social connections. The conclusion, which is consistent with the study's findings, emphasizes the need to be considerate of people's social well-being when enforcing such regulations by viewing the opposition to social gathering bans as motivated by feelings of isolation and a weakening of social bonds.

### **Prohibition of Social Gathering as an Economic Destabilizer**

Even while some industries adjusted by using digital alternatives, as shown in the following excerpts, the ban on social gatherings had a significant impact on small enterprises that relied on face-to-face interactions, endangering livelihoods and local economies:

*Many small businesses rely on social gatherings for survival. The prohibition has not only impacted our ability to connect but also jeopardized our local economy.* (Male, 46-year-old trader)

*The prohibition of social gatherings had a significant economic impact, particularly on industries reliant on in-person interactions, such as hospitality, events, and retail. Many businesses faced closures or reduced operations, leading to job losses and financial instability for workers.* (Male, 30-year-old business man)

Sheridan *et al.* (2020), on the other hand, examined the effects of COVID-19 measures and found that they didn't actually cause losses in the Scandinavian nations. In addition to the resilience of company operations, which highlighted the necessity of government support when implementing measures that have the potential to disrupt economic activities, this was due to the government mitigation measures that were put in place in those countries. Economic incentives were therefore more likely to overcome that resistance, even if the study found that economic interest was the primary motivator behind opposition to the ban on social gatherings

### **Prohibition of Social Gatherings as an Affront to Individual Liberties**

As shown in the following paragraphs, the ban on social gatherings during COVID-19 generated controversy about government overreach because many believed that safety precautions violated people's rights to privacy and autonomy over their own health:

*While we understand the need for safety, the limitations feel like an infringement on our personal freedoms. The debate intensifies as we weigh community welfare against our rights to gather.*  
(Female, 43-year-old peasant farmer)

*The prohibition of social gatherings during the COVID-19 pandemic was viewed by some as an infringement on individual liberties, limiting personal freedoms to socialize and make decisions about their own health. Critics argued that such restrictions overstepped government authority, curtailing basic rights like freedom of assembly and personal choice. While intended to protect public health, these measures sparked debates about the balance between safeguarding the community and preserving individual autonomy.* (Female, 58-year-old homemaker)

With an emphasis on the rights violations inflicted on the general public, Odigbo *et al.* (2023) investigated COVID-19 actions, such as the ban on social meetings. The writers described the tension between law enforcement and the people by citing instances of forced eviction and police brutality as examples of civil liberties abuses. Their observation is consistent with the study's findings, which found comparable infringements on individual liberty. This emphasizes how important it is for health officials to respect citizens' rights to gain the support they need to follow health recommendations and improve health outcomes.

## **CONCLUSION**

The study presents nuanced perspectives on the COVID-19 containment measures in Alego-Usonga highlighting the sociocultural, economic and political concerns around the implementation of the COVID-19 protocols as well as the role of misinformation and conspiracy theories in the contestation of health initiatives.

## **RECOMMENDATIONS**

The findings underscore the need to develop a communication strategy for pandemic response that is attuned to the sociocultural demands of the community to ensure compliance and foster public trust in disease interventions. In order to prepare for future pandemics, policy players must balance sociocultural and economic realities while enhancing community resilience.

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