

The Dilemma of an Indigenous Community During the COVID-19 Pandemic: A Reflection on Views Expressed by the *Ogiek* of Kenya

Introduction

In 1929, Governor Edward Grigg of Kenya established a committee to investigate and provide a comprehensive report on the issue commonly referred to as ‘the Dorobo question’ in various parts of eastern Africa. The committee’s conception of the Dorobo (Ogiek) question revolved around the issue of governing ‘most hunting people’ in the region under British rule (Ogot 1979; Abuso 1980; Parstiany 1965). This primarily pertained to those people considered ‘pre-tribal and pre-pastoral’ and who frequently resided in recently established forest reserves, presenting logistical challenges for the colonial authorities (Ochieng 1985).

A thorough analysis of the committee’s conclusions provides a valuable understanding regarding the manner in which colonial perspectives on emerging environmental issues were frequently intertwined with the ideologies of social Darwinism prevalent

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during that era. In this context, the European understanding of the Dorobo (Ogiek) as a purportedly diminishing ethnic group residing in forests highlights the intersection between the emerging fields of racial and natural sciences at in that era. This is particularly evident in the context of state responses to the needs and well-being of minority groups (Ndungu 1989).

The current study examined the case of the Ogiek community residing in the Mau Forest complex. It investigated the interconnected colonial narratives surrounding race and nature to contribute to a deeper comprehension of the complex and ongoing processes of identity construction within the (post)colonial context of East Africa. Furthermore, it suggested

that comprehending the intricacies of these dynamics can enhance our understanding of how the enduring legacies of various racial and tribal classifications continue to have an impact on the grievances of affected communities in the present (Anderson 1990). This understanding allows for an explicitly postcolonial viewpoint, rather than one that is solely rooted in primordialist, instrumentalist, or constructivist perspectives. Consequently, it provides insights into recent discussions surrounding the rights of ‘indigenous’ or ‘ethnic minority’ groups in eastern Africa. This perception continues to inform the post-colonial state’s way of dealing with emergencies such as the COVID-19 pandemic (Ronoh 2019).

The Impact of COVID-19 on the Ogiek of Kenya

In October 2020, the United Nations Special Rapporteur on the Rights of Indigenous People told the UN General Assembly that indigenous peoples have

largely been left out of COVID-19 responses globally and that the pandemic was likely to worsen inequalities and racism against them in wider society (UNHCR 2020). The Ogiek were some of the people hardest hit by COVID-19, with consequences that included discrimination, extreme poverty and escalating rates of malnutrition. The UN Declaration on the Rights of Indigenous Peoples is the most widely recognised comprehensive international standard, and its implementation is key to ensuring indigenous peoples are not left behind in the COVID recovery process. However, the potentially beneficial impact of this policy is not felt in the remote areas of Kenya where the Ogiek people live.

It is common knowledge that the COVID-19 pandemic has reshaped the global landscape, affecting populations across cultural, social, and economic boundaries. Indigenous communities have demonstrated unique strengths and vulnerabilities in their responses to the pandemic due to their distinct cultural characteristics and historical contexts. Members of the Ogiek community, known for their close relationship with the environment and their robust traditional knowledge systems, provide a valuable case study for understanding the ways in which indigenous groups navigate the challenges of a pandemic (Ronoh 2020). My personal interviews with Ogiek people living in the vicinity of Naiswet and Taton in the Mau Forest complex about the impact that the COVID-19 pandemic had on them aimed to establish the valuable knowledge they have that is relevant to the pandemic, how this may help in difficult times, and how they see the future.

The impacts of COVID-19 on the Ogiek community included limited access to healthcare, loss of livelihoods due to disruptions in traditional economic activities, and the infringement on their territorial rights as a result of government responses to the pandemic. Under the rubric 'Traditional Knowledge and Adaptations', the Ogiek people's traditional knowledge systems enabled them to respond to the pandemic in innovative ways. Their deep understanding of herbal medicine and natural resources played a role in supplementing modern healthcare solutions, particularly in the absence of readily accessible medical facilities. Under the rubric 'Community Cooperation and Resilience', the Ogiek communal way of life enabled them to manage the impact of the pandemic through sharing resources, supporting vulnerable members, and adhering to community-led infection control measures.

Methodology

Virtual group discussions were convened by the researcher with the assistance of Ogiek community Elders who live in the Naiswet Forest using four questions:

1. How did you deal historically with pandemics, and how did you respond to such circumstances?
2. What aspects of your community's response to the COVID-19 outbreak evoke a sense of pride in you?
3. What factors have contributed to the resilience of your community in its response to the COVID-19 pandemic?
4. What modifications have you implemented that could be adopted by other communities?

Each group discussion lasted about three hours. Participants were divided into virtual discussion groups of between four and eight individuals, commonly referred to as 'talking circles'. The facilitator of each focus group discussion ensured that all participants were given the opportunity to respond to each question for at least two rounds before proceeding to the next question.

In order to pay tribute to indigenous epistemologies and techniques, participants were offered water, and invitations were extended to two Elders and a Knowledge Keeper. Their presence was intended to facilitate the commencement and conclusion of the conversations in a manner that is aligned with indigenous customs and traditions. The talking circles were brought to a close in accordance with customary protocols. Participants were invited to reach out to the researcher if they had any materials they wanted to be incorporated into the report. The research team diligently took comprehensive notes of the discussions.

The focus group discussion sought to understand the level of awareness of disasters and, in particular, how the community responded to the COVID-19 pandemic. The focus group comprised of six members mainly drawn from the Ogiek Council of Elders. The Elders remember hunger and diseases such as the measles epidemic of 1975 that killed many community members. Collectively, the community always sought the assistance of foreseers to perform rituals to prevent further pandemics. Secondly, the community embraces the mobilisation of family kinship to treat patients. Thirdly the community advocates for a form of communal life which also embraces aspects of isolation.

Regarding COVID-19, community members who participated in the interviews said that they were never scared of the pandemic when it was announced because they were always prepared for diseases. However, they argued that the COVID-19 rules announced by the Ministry of Health prevented their children who lived in cities from visiting them. They also held that the proceedings of their claim for reparations from the Government of Kenya before the African Court on Human and People's Rights in Arusha, Tanzania, were heard virtually rather than face to face. Their responses to COVID-19 were strongly informed by religion, rituals (faith), ethics, morals and traditional medicine.

To help mitigate the spread of COVID-19, women delivered their babies at home with the help of traditional birth attendants who enjoyed more trust among the Ogiek than hospital staff. In the words of Alice Cheruto, a Council Elder who participated in the focus group discussion:

we are very few in number as a community, we therefore could not allow our ladies to deliver in hospital and come home with COVID. In any case, our traditional birth attendants have never failed us.

The Council of Elders argued that the government never gave them the support accorded to other people such as supply of masks and even vaccination. In their considered opinion, they were neglected and discriminated against by the government. Another Council of Elders member, Samuel Cheriro said:

These people on the government side (Members of Parliament and Members of County Assemblies) don't like us, they did not give us masks during COVID-19, they never employ our children,

never build school or hospitals for us, but everything including electricity has been supplied to the Kipsigis community only.

The members were in agreement about government discrimination against the Ogiek community. They explained how the COVID-19 vaccine was only administered to the Kipsigis community, whom they referred to as strangers. The result was that very few members of the Ogiek community were vaccinated. According to Council of Elders member, Simon Konana, who participated in the focus group discussion:

Very few of our members, maybe me and a few others, were lucky to be vaccinated, otherwise those who got the jab are less than two percent (2%) of the total population. Nonetheless, our consolation is in our indigenous forest foods such as wild fruits, honey that has protected us for centuries and wild animals such as gazelles.

A significant percentage of Ogiek community members live below the poverty line and were therefore struggling to get necessities such as sanitisers, soap, and face masks. Providing food for their families was also a challenge because of the tough economic situation caused by the COVID-19 pandemic. This was a great disaster to the Ogiek who, according to the Kenya Population and Housing Census 2019, make up only one per cent of the country's population.

Conclusion

This study highlights how a specific indigenous group's resilience to the pandemic was increased when they exercised their right to administer their own health and community programmes, complemented by accessible and non-discriminatory national health and education

systems. In many cases, indigenous peoples are often denied the necessary support to operate their own institutions. In addition, where national protocols cater for the particular situation of indigenous peoples, these were often adopted too late, are underfunded, and were adopted without the necessary consultations to ensure the specific needs of the indigenous peoples were properly addressed. However, during COVID-19, the Ogiek were left with no choice but to rely exclusively on their own traditional medicine to cope with the pandemic. This underscores the resilience of indigenous peoples and calls for greater commitment on the part of government to factor them into decision-making processes on issues that affect them directly.

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