



Covid-19 Case Management in Isolation and Quarantine Centers: A Review of Patients and Suspected Patients' Justification for Abandoning Centers

Raymond Akantege^{1*}, Agus Rahayu², Chairul Furqon³, Puspodewi Dirgantari⁴

^{1,2,3,4} Department of Doctoral Management Science, Faculty of Economics and Business, Universitas Pendidikan Indonesia, Bandung, Indonesia

Abstract

This paper finds out the justification of COVID-19 patients and suspected patients' abandonment of isolation and quarantine centres. In this paper, the authors sought to identify the justification for escaping from isolation centers, to inform and modify decision markers strategies. The questions the paper sought to answer were, has escape from isolation centers by COVID-19 patients happened only in Ghana, what could be the main reasons behind escaping across the world, and how will the knowledge of these reasons help transform management practice achieve the best cooperation from patients. The research method was largely qualitative, adopting a deductive and archival research approach. However, a quantitative research technique was used in reporting counts of documents evaluated for the study including escapes from the centers. In this paper, fifteen published news items, 35 articles, and 22 textbooks were reviewed. The research revealed that escape from isolation centers has happened world-over, while stigmatization stands as the main reason for escaping. In conclusion, patients in the centers should be respected, and receive counseling, and daily updates of information on the well-being of their families and themselves.

Article Info

Correspondence:

Raymond Akantege
(rakantege@upi.edu)

Article History:

Submitted: 12-02-2023

Revised: 20-03-2023

Accepted: 19-05-2023

Published: 20-10-2023

JEL Classification:

D73; G32; G34

Keyword:

Covid-19;
Escape;
Isolation Center;
Stigmatization

1. INTRODUCTION

Isolation is used to restrain confirmed COVID-19 cases from physically associating with the populace until a test confirms the cases to be negative (CDC, 2020). Quarantine on the other hand is detaining a person who has recently come in contact with a COVID-19 patient for 14 days (CDC, 2020). In both situations, the science is to reduce the person-person and spread of the virus. This virus is transmitted to unsuspecting persons who are within 6 feet close to the infected persons (CDC, July 15, 2020). The Centre for Disease Control and Prevention (July 15, 2020) further reported that transmission occurs through the droplets disposed into the atmosphere due to talking, coughing, sneezing, and/or laughing. The unsuspecting victim who inhales the droplets or picks such from contaminated surfaces could also become infected.

The virus spreads quickly, with an incubation period of between three days and two weeks. Affected individuals do not develop immunity, so they may become infected again. According to its mode of transmission, symptoms, and influence on the global economy, social development, and society, COVID-19 is a disease that needs to be completely



eradicated or significantly reduced in severity. The need for isolation and/or quarantine stems from the need to control the disease's spread, safeguard the unaffected population, and strengthen the immune systems of those who have been affected by providing life-saving care. Despite this, it seems that society was not fully informed of the good intentions behind isolation and/or quarantine, leading to resistance and/or escape from isolation. Kyei-Boateng a reporter for the Daily Graphic wrote on May 9, 2020, that a male COVID-19 patient who escaped from the quarantine center at the Akwatia in the Denkyembuor District in the Eastern Region Ghana has been captured by a combined team of the Birim Central Municipal Health Directorate, the Oda police and the Bureau of National Investigations (BNI). Two Nigerians who tested positive for the virus were transferred from the Accra Regional Command Police Holding Facility to the National Treatment Center, according to The Ghanaian Times on April 18, 2020. However, because of their violent actions, they had to be returned to the police station. These events, along with a few others that the media did not cover, happened in Ghana during the time.

Following these instances of COVID-19 patient escapes from isolation and quarantine centers in Ghana, the author set out to:

- a. Determine whether Ghana represented a unique circumstance in relation to COVID-19 patient escapes.
- b. Determine the fundamental causes of escape from seclusion and confinement.
- c. Determine the holes that the causes of escape could fill to reduce occurrences in the future.

Review Of Related Literature

1.1. Organizational Structure

Structure is a control mechanism that has the power to affect how well workers perform. The internal characteristics of a company are described by its structure. Given that it has a favorable and significant impact on how the organization operates, it is a crucial factor that can affect the organization's commitment (Arikan & Kirci, 2015). According to Samuel and Lucent-Iwhiwhu (2021), an organization's structure acts as both an authority and a responsibility for achieving results. They also contend that an organization's structure can have a favorable effect on its performance. The pyramid-shaped structure is made up of the following: Relationship based on hierarchy between the superior and their subordinates;

- a. The coordination of the different tasks and activities;
- b. There is formal relationship with a well defined duties and responsibilities;
- c. Different persons and departments are being assigned tasks and duties, e.g. formulation of a set of policies procedures, standards, and method of evaluation of performance.

Organisational structure is how job is formally divided, grouped and coordinated. It is the anatomy of the organization, providing a foundation within which organisations function. However, According to Nnabuife (2009), organisational structure is defined as the process of creating new structures or altering existing ones to better suit organisational needs and technological requirements. The arrangement of tasks, relationships between different departments, and levels of authority to achieve cooperation of efforts, delegation of authority, and effective communication along the scalar chain of command are referred to as organisational structure. Structure establishes the formal categorization, arrangement, and coordination of job tasks. It displays the hierarchical relationships between organization members (Olajide, 2015). Organisational structure, according to Ajagbe, Maduenyi, Oke, and Olatunji (2015), is the prescribed pattern of work-related behavior that is consciously established for the achievement of organisational goals. According to Shabbir (2017), organisational structure affects how work flows in a company; as a result, a different design or structure can help or hinder a variety of strategic objectives as well as employees in their respective roles. Structure can also determine how strategies are developed. According to Greenberg (2011), organisational structure refers to the formal

arrangement between individuals and groups in terms of task distribution, responsibility distribution, and authority distribution within an organization.

According to Wegwu and Umoru (2021), organisational structure facilitates interactions and communication for the purpose of coordinating and managing the activities of the organization. Specialisation, formalisation, and centralisation are used in its implementation. The number of occupational specialties, the length of training necessary for each, or the extent to which highly specialized requirements are specified in formal job descriptions for various functions are all examples of Specialisation. The term "formalisation" describes the laws, practices, and written materials that specify an employee's rights and responsibilities, such as policy manuals and job descriptions. The process of formalisation entails the development of a formalised structure as well as its ongoing maintenance. An organisational structure is frequently formalised in an effort to make decision-making more logical. The formalised organization is critical for the organization in which issues are known and changes are implemented slowly and purposefully. While centralisation refers to the levels of hierarchy with authority to make decisions (Lim, 2017). The organisational structure in this study refers to how authority and responsibility are distributed among members of the organization and how work processes are carried out. According to Shabbir (2017), organisational structure can be broken down into four different categories: the number of layers in the hierarchy, the degree of formalisation, the definition of internal and external boundaries, and the use of the right technology. These measurements consist of:

a. Number of Layers in the Hierarchy

The complexity of an organization's structure increases with the number of layers present, and as a result, coordination and member integration become more challenging. The recent trend towards flatter organisational structures is a covert admission that complexity will limit flexibility and can hinder an organization's capacity to compete in a fast-paced environment (Nahm, Vonderembse & Koufteros, 2003). Decision-making is facilitated by organisational hierarchies with fewer layers. In the operation, the term "ease of decision-making" refers to those who are more likely to be aware of the precise circumstance that called for the choice. Participating in decision-making with a lower cadre encourages a sense of belonging in the employee. According to some academics, systems with fewer layers have advantages over those with more layers. Macduffie (1995) and Shabbir (2017) posit that firms need a structure that has few layers of hierarchy, allows for a high level of organisational integration, decentralized decision-making, and quick response because they operate in a dynamic environment.

b. Nature of Formalisation

According to Robbin and DeCenzo (2005), formalisation refers to how uniformly jobs are performed. The degree to which rules and procedures are provided to employees that not only stifle but also discourage creativity, independent work, and learning activity is referred to as the formalisation's nature. When an organization loosens its grip on rules and regulations, it promotes innovative, self-directed work, learning, and structures its work units around key procedures in order to increase value to clients. According to Nnabuife (2009), mechanistic systems promote strict bureaucracy: here, organisational activities are set up so that personal goals and authority are clearly defined, power flows are known and strictly followed, personal skills are separated, and specialized tasks are defined. When compared to mechanistic structures, organic structures allow for the use of job skills in group settings, open lines of communication at all organisational levels, and less emphasis on receiving and issuing orders from inferior to superior and vice versa (Shabbir, 2017).

c. Technology

According to Onodugo (2000), technology is a technique or a collection of techniques used to change materials (human or non-human, mental or physical) in a predetermined way. It is a set of potential institutions that could be managed

successfully or unsuccessfully and to varying degrees. Technology is the productive methods used by an organization to turn resources into products and services, as well as factors related to the application of knowledge and the machinery used in the production of goods and services that have an effect on the organization's business (Kamzi, 2003; Shabbir, 2017). Every organization's ability to adapt to technological changes and the degree to which its structure matches the technology adopted determines its performance, success, and ability to survive. The effectiveness of an organization is determined in part by how quickly management adapts to technological changes. Technology is one of the most important factors that affect how the rules of competition are set, according to Porter (1983).

d. Internal Boundary and External Boundary.

The term "organisational boundary" is frequently used in business and the legal field to distinguish between one company and another that is unrelated but separate. A company can be cut off from both internal connections and other external stakeholders using this strategy. A good structure with fuzzy boundaries is essential for an organization to function effectively and efficiently. Every organization's structure serves two crucial functions: it defines the roles of each member and establishes the degree of control that each member has over the organization (Shabbir, 2017). Despite the fact that structure is significant and essential to an organization, it can also serve as a barrier between members of various departments and between the organization and stakeholders outside the organization. If these barriers or boundaries are too strict, they may prevent people from cooperating, which would reduce the organization's effectiveness and responsiveness to customer needs. The business must cross the external boundary with customers, suppliers, and other businesses in order to adapt to the changing environment and provide value to customers (Ashkenas, Ulrich & Jick, 2002). Because customers provide insightful feedback on products or services, loose boundaries encourage involving customers broadly and early in product manufacturing, product development, and delivery activities.

1.2. Business Growth

Jaja (2009) asserts that a company's ability to grow is essential to its success. One of the characteristics that separate successful business operations from unsuccessful ones is the potential for growth. Growth is dynamic because it involves internal organisational development and change as well as adjustments to how the business organization engages with its surroundings. Although a business organization develops as a coherent whole, growth is viewed from a variety of perspectives. Its facets are as numerous as the components of the business organization. One goal of entrepreneurship is business expansion. This could manifest as greater personal wealth, a sense of accomplishment, or a larger business organization. In order to succeed and not just to survive, many businesses want to grow. However, organisational growth can mean different things to various organisations. A company can choose from a variety of metrics to gauge its growth. The most crucial metric is one that shows achievement of the company's stated objectives. Most businesses prioritize income, net profit, sales, and other financial metrics because they can be used as "bottom-line" success indicators (Crosby, 1999).

Additionally, Wegwu and Umoru (2021) assert that a company's long-term success and dominance over its rivals can be described as market or business growth. Additionally, associating the term "sustainable" with "future growth" highlights how management practices already incorporate sustainability. Because growth is typically viewed by many as a sign of success or advancements, many businesses desire it. Organisational growth is a top priority for many managers and is also used as a productivity indicator for both small and large organisations (Cole, 2002). Ultimately, virtually all organisations place a high priority on growth (Crosby, 1999). Thus, it is necessary to establish an appropriate organisational structure in order to achieve growth.

2.3. Organisational Structure and Business Growth

Knowledge reigns supreme in the business world of today. Organisational structure has become an important consideration as businesses vie for a competitive advantage. Most businesses, whether big or small, aim to grow their business. Organisational structure plays a key role in accelerating corporate growth. Instead of looking for the "optimal" structure, organisational managers should focus on creating appropriate alignments between organisational strategies and structures (Chigozie & Chijioke, 2015).

Organisational growth frequently has a transformative impact on the business, especially if it was achieved through dramatic rather than incremental means, such as opening a second location, launching a new marketing campaign for a well-liked product, significantly expanding services, launching an online website, etc.

Organisational structure improves performance by providing all levels of employees with transparency. By focusing time and energy on crucial tasks, systems operate more like well-oiled machines when the organisational structure is taken into account. A clearly defined structure may also include a plan for internal promotions, allowing companies to create effective employee advancement avenues for entry-level workers.

2.4. Empirical Review

Organization structure, according to Brickley, Smith, Willet, and Zimmerman (2002), is the connection between organisational structure and organisational strategy. This perspective was a development of Chandler's (1962) work, which connected it to the growth pattern of American large corporations. This trailblazing researcher discovered that an organization's strategy affects its structure. The stability and effectiveness of the structure is influenced by a variety of organisational variables, including tasks, technology, and the environment. Chigozie and Chijioke (2015) examined how South East Nigerian manufacturing firms' performance is impacted by organisational structure. The findings indicated that employee training had a beneficial effect on the company's ability to provide high-quality products and services. According to the study, an organization's success depends on its fundamental organisational structure. Management that emphasizes employee training will also have a positive impact on the organization's ability to provide high-quality products and services, while flexibility and adaptability will help it increase its sales turnover.

Okafor, Kalu, and Ozioma (2017) examined how the organisational structure of a few manufacturing companies in Enugu, Nigeria, affected their performance. Little attention has been paid to the significance of the structure for manufacturing enterprises, particularly in Nigeria's pharmaceutical industry, especially in terms of empirical evidence. According to the study, the structure had a sizable impact on organisational effectiveness. Their research comes to the conclusion that the organisational structure of pharmaceutical manufacturing enterprises affects production, with the exception of its growth objective. In brewing companies in Nigeria, Organizational structure and employee effectiveness were studied by Shabbir (2017). The purpose of the study was to determine whether Nigerian brewing companies have an appropriate organizational structure and the extent to which it has significantly impacted the staff members' productivity. The 6468 people in the study are the combined staff of the five breweries in Nigeria. The study's results showed that formalization significantly improved employee performance and that the structure of the hierarchical layers significantly affected how well employees performed for brewing companies. The study draws the conclusion that the adoption of the proper structure is the focal point for the effectiveness of Brewing firms by workers in light of the aforementioned findings.

In Nigerian manufacturing firms, Beganwah, Miidom, and Ukoha (2020) looked at the relationship between organisational structure and business growth. Using Yamene's sample size calculation method, 192 respondents were selected from a population of 220 managers and supervisors. Data collection was done through the use of a questionnaire. Regression

analysis was used to examine the data in SPSS Version 23.0. Their study's conclusions showed a strong and significant relationship between organisational structure and business growth. Their study found that organisational structure had a significant impact on how fast businesses grew in Nigeria. They advised management to use formalisation as a tool to increase the structural expansion and financial viability of Nigerian manufacturing firms. Additionally, management should create a proper chain of command from higher organisational levels to lower levels to enhance structural and financial expansion in Nigerian manufacturing firms.

Ezejiolor and Ezekwesili (2021) looked at how the organisational structure of pharmaceutical companies in Nigeria's Anambra State affected employee performance. The study was carried out using a descriptive survey research methodology. 67 employees from 20 pharmaceutical companies in Anambra State are taking part in the study. The researchers examined the hypothesis using regression analysis and SPSS version 20. The study's conclusions showed that formalisation and working conditions significantly improve employee performance in pharmaceutical companies. Based on the results, the study advised management of Nigerian manufacturing companies to create a suitable organisational structure to increase employee productivity.

2.5. Theoretical Framework

This study used the Maturana and Varela (1980) theory of autopoietic systems, which views systems as fully self-productive in nature. It appears to be much more informative when it comes to generating knowledge about organisational structure, much like self-organized and self-maintained systems. Maturana and Varela (1980) first put forth the autopoiesis theory in a study of living things, focusing primarily on the self-generating nature of living systems. Although systems are autopoietic, Luhmann (1995) expressed the opinion that it is also important to take into account psychic (people) and social (interactions and societies) systems. According to Luhmann's theory, which is also known as the "social theory of autopoietics," psychic and social mechanisms both replicate processes (Luhmann, 1995). According to Hatch (1997), "structure" describes the connections between the constituent parts of an ordered whole. Social theory or structure specifically refers to the connections between people, roles, and the organisational units, like departments and divisions, to which they belong in relation to organization theory. He pointed out that the fundamental components of organisational structure had a direct bearing on business expansion.

According to Bausch (2001), the system (self-) produces all the components, processes, frontiers, and systems of autopoietic systems and continuously modifies them through its contacts (internal and external). As a result, the system's structure is constrained by its constant organisational structure. Consequently, the structure varies depending on the organization. Therefore, through interaction within the system, the organization acts as the dynamic, and the components engage in this kind of interaction with one another (Stacey, 2001). For these reasons, the autopoietic structure's inherent nature is one of continuous self-renewal. For those reasons, the continual self-renewal is the fundamental characteristic of the autopoietic structure. Internal operations are responsible for developing the system's components, systems, processes, boundaries, and overall cohesion. As a result, the study looked at organisational structure and connected it to the core ideas of the autopoietic theory as they were conceptualized from such living systems. This implies that because of their distinctive identity, organisational structures are similar to living systems.

In a similar vein, all the components, techniques, and boundaries of organisational structure are continuously modified by the system through its contacts, both internal and external. As a result, the organization's structure is constant and limits the activities of its structure. As a result of internal system interactions, the organization functions as a dynamic system, and its constituent parts also interact with one another in this way. The shared sense of the organisational players, a construction that resulted from their collaborative processes, serves as the foundation of this theory with regard to

organisational structure. They develop a sense of logic within their line of work and an understanding of the parameter of effectiveness to enhance business growth by doing this. This shows that the relationship between organisational structure and business growth is consistent and specific. According to the literature review, this study looked at how the organization of the pharmaceutical industry in Delta State affected business growth.

2.6. Research Hypothesis

The null hypotheses were stated to guide this study.

H₁: There is no significant relationship between organisational structure and business growth of pharmaceutical industry in Delta State.

H₂: Organisational structure has no significant influence on business growth of pharmaceutical industry in Delta State.

2. METHODS

The study was a review, so most of the data was gathered from online and secondary sources. An evolving societal and public health issue is the study's problem. However, it is not now a necessity in the country's mainstream reporting of COVID-19 instances. This indicates that such information is not currently accessible through official government reports or websites. As a result, the news media serves as the primary source of this information. This explained why this review included a lot of written news media information. Video of State Authorities announcing the incident of the escape was used as a source of information in some instances.

This indicates that the author listened to the talk and then wrote it down. To guarantee that only the truthful, playback was used to recap the necessary information. The usage of print and video reports were used after carefully examining the information's content. This guaranteed that only pertinent information was chosen from the group. The next step was item matching, in which relevant subjects were grouped together to help readers better understand the material.

The reporters communicated with the relevant State Agencies for each record utilized in this analysis, who confirmed the occurrence and further described how the government was responding to it. The authenticity and dependability of the data utilized in this study may be attested to as a result of this validation by state agencies.

3. RESULTS AND DISCUSSION

3.1 Escape From Covid-19 Isolation Centers: Reasons And Effects Stigmatization

According to Ebrahimi and Kleinman (n.d.) and Reidy (1993), stigmatizing has led to a certain type of "social death." By stating that stigmatization entails recognizing and designating an undesirable quality in a way that marginalizes a person's social identity to that characteristic, Chen & Courtwright (2016) entirely affirm this. They believe that stigmatization has negative consequences, such as sidelining and, in certain instances, dehumanization. Poor global health outcomes are frequently made worse by stigma, particularly when it comes to the detection and treatment of infectious diseases and mental illnesses. According to Davtyan, Brown, and Folayan (2014), certain diseases have historically had a significant impact on populations, societies, and civilizations. Illness outbreaks like cholera and Leprosy have significantly increased global mortality and morbidity (Benedictow, 1987; Ryan, Dhar, Khan et al., 2000). According to researchers like Herek (1990), Cross (2006), and Herek, Capitanio, and Widaman (2003), these illnesses are particularly notable for the social stigma and labeling they place on those who bear them. Poor and weak results are frequently associated with such stigmas on the affected individuals. For instance, as of October 15, 2014, the Centers for Disease Control and

Prevention (CDC) recorded 4,484 fatalities and 8,973 Ebola virus disease (EVD) cases in West Africa (CDC, 2014). The worse epidemic in the history of the disease, with a survival rate of little under half, this one devastated Liberia, Guinea, and Sierra Leone has been identified as the worst epidemic in the history of the disease, with a survival rate of 53% (Philips & Markham (2014); WHO (2014). additionally, those who have survived the epidemic face the stigma of having had EVD. This is consistent with earlier research findings (Molley (2014); Gbandia & Chen) and makes the issue worse (2014). According to the International Federation of Red Cross and Red Crescent Societies (IFRCRCS), those who have been cleared by medical authorities as healthy have been prohibited from returning to their homes and shunned by their neighbors, acquaintances, coworkers, and even family members (International Federation of Red Cross and Red Crescent Societies, 2014). Additionally, several survivors claim their neighborhood has made violent threats against them (Lasuta, 2014; Guimard, Bwaka, Colebunders et al., 1995). In addition to confirmed fatalities, the illness has also been linked to social disturbance and violence against educators and medical professionals (Yakubu, Folayan, Peterson et al. According to Davies (2014), contemporary epidemics like HIV/AIDS and Ebola Virus Disease (EVD) have not only caused enormous loss of life not only to stigma, which persisted despite international attempts to contain both outbreaks. Communities affected by the stigma associated with HIV/AIDS and EVD have experienced physical violence, social exclusion, and a lower standard of living. Prejudice and discrimination related to having EVD have gotten significantly less attention, despite the fact that numerous interventions to lessen the stigma associated with these diseases have been developed and implemented (Sengupta, Banks & Jonas, 2011; Hewlett & Amola, 2003). The difficulties that People Living with HIV (PLHIV) encounter in terms of stigmatization and discrimination (such as fear, misinformation, and denial (MOH, 2008) of HIV-related stigma is increasingly seen as the single largest hurdle to halting the transmission of the illness, according to Koka, Ahorlu, and Agyeman (2013) (Varni, Miller & Solomon, 2012). even if the number of HIV-positive people has decreased

Stigmatization of patients, persons who have recovered, and/or those suspected of having contracted COVID-19 is not an exception to the aforementioned. In this article, the researcher has taken lessons from the stigmas surrounding mental health, HIV/AIDS, and EVD and applied them to the more recent unique COVID-19 pandemic, which has claimed a large number of lives worldwide. Since the beginning of the year, the COVID-19 pandemic has largely affected the entire world, with an increase in the number of people who have tested positive for the virus dying in practically every nation. Despite this unfortunate situation, though. Since a substantial number of victims have recovered and been discharged, there have been some encouraging results. For instance, as of May 8 at 13:59 GMT, there were 3,948,075 updated cases worldwide, 271,725 deaths overall (7 percent), and 1,358,275 recovered cases overall (34 percent). Ghana's trajectory is consistent with the rest of the world, with 3,091 total cases, 18 (0.6%) fatalities, and 303 (10%) recovery cases. 2020 (World meters). According to the data, those who have made a full recovery outnumber those who have passed away. However, individuals who have recovered are alienated and humiliated in the society in which they live, which has detrimental effects on their psychological and mental health. In Ghana, the circumstance is fairly typical. This troubling situation has drawn stakeholders from across the board. Akufo-Addo, the President of Ghana condemned such acts during one of his addresses to the nation on COVID-19 to speak to the issue. His Excellency President Nana Addo Dankwa Akuffo Addo informs the country. In his remark, he noted that "contracting the Coronavirus is not always a death sentence, as has been accurately highlighted by the Ghana Medical Association (GMC)". I have read reports of some people who have recovered from the illness but are now dealing with stigmatization, which fills me with tremendous concern. This is wrong because it will discourage individuals from getting checked out, tested, and treated. The stigmatization of people who have recovered must stop because, even though the virus did not end their lives or their means of subsistence, community members should not continue to hold them in contempt (Graphic online, 2020). In his speech to the country on Workers

Day on 1st May “I would plead with you – stop the stigmatization of recovered persons as it will rather drive people away from getting screened, tested and treated. The stigmatization of recovered persons must not go on, because if the virus did not end their lives and livelihoods, the stigma from members of their communities should not continue” (Graphic online, 2020). In his address to the nation during the workers’ day on 1st May, he reiterated his discontentment with stigmatization again.

According to a June 12, 2020 report from the World Health Organization (WHO) Africa in Abuja, Fatima Mustapha, a 25-year-old student from Kano state who recently recovered from COVID-19, is having serious problems as a result of stigma among her peers and even family. She has become more private and alone within her family's house as a result of the emotional trauma of this event. She had hoped to reunite with her friends and family after spending 14 days in the isolation facility, but alas, it was not to be. To wit, "Last week, my aunt came to visit, and she specifically asked my mum to make sure I stay in my room till she left as she doesn't like to come here," she said. This should not end their lives and livelihoods, the stigma from members of their communities should not. The overwhelming majority of them will continue to live perfectly normal lives and cease to be sources of infections” (Communications Bureau, 2020). These are thoughts of a survivor: They ought to survive. These are thoughts of a survivor "The shops near us always refuse to sell to my family when they go out to buy something. “Whenever my family goes out to buy something from the stores around us, the stores refuse to sell to them. In some circumstances, even though they have the particular item, they will not sell it with the excuse that they don’t have it. Currently buying outside is becoming very challenging for us; they address our house as a Covid-19 house. They just don’t want to accept anything from us forgetting that we have been tested and we are negative but they rather don’t know their status. So in any case, we’re scared of them getting close to us. So the stigma is real, unbearable, and still going on,” (Nyame, 2020). This is what his wife had to say in a different interview: “When I saw him on TV that evening, I wished I had the power to drag him out of the TV set because of the stigma that would follow” (Citi news, 2020). At the moment, purchasing outside is becoming challenging. In some cases, even though they own the specific item, they will refuse to sell it to us; they address our house as the Covid-19 house. They just don’t want to accept anything from us forgetting that we have been tested and we are negative. The overwhelming majority of them who tested positive and were treated and discharged will continue to live perfectly normal lives and cease to be sources of infections” (Communications Bureau, 2020). These are thoughts of a survivor: they rather don’t know their status. So in any case, we’re scared of them getting close to us. So the stigma is real, unbearable, and still going on,” (Nyame, 2020). The agony in the expressions of the victim and his wife mirrors the fact that stigmatization is gradually killing every life around them. Koka et al. (2013) offered insights from an in-depth interview with female AIDs patients to support this further. From this, we can make conclusions and discuss the consequences for COVID-19 survivors. She stated, "At first, I was thinking and sobbing all the time, so it truly affected me, but now I don't care; it is badly harming me, psychologically and physically; I have lost my self-esteem and identity; it was bothering me when my mother was avoiding me." Conversely, PLHIV who had favorable treatment and reception described their thoughts as follows: "I am fine because my wife treats me well; Since people are friendly to me, I am fine; The love and care and concern they show, rather make me robust and healthy" (Koka et al., 2013). In view of these, stigmatization poses a great danger to the survivors of the novel COVID-19 pandemic leading to social death. We urge Ghanaians and people worldwide to stop using such pejorative terms to describe the survivors in order to stop this strange upward trend and to help them become more capable and self-assured in all aspects of their lives.

3.2. Other Reasons For Escaping The Covid-19 Isolation Facilities

Patients and suspects with COVID-19 escape from isolation facilities for reasons other than stigmatization. Some African nations reportedly lack adequate isolation facilities to

house COVID-19 suspects and patients, according to venture.com, an online social media outlet. Some African nations, notably Zimbabwe, have lowered the two-week statutory quarantine period set by the World Health Organization for suspected COVID-19 by half as a result of the poor condition of the isolation centers. Due to the crowding and close proximity of the isolation centers, the spread of the diseases may have been slowed down or maybe accelerated. The Guardian.com claimed that police arrested large portions of COVID-19 patients and suspected patients in Africa had failed to give justifications for evading the COVID-19 isolation facilities. Additionally, Guardian.com claimed that police in large portions of Africa had failed to take whole of COVID-19 patients and suspects due to a lack of logistics. The paper finds it alarming because it could indicate that those in quarantine centers, where they share social amenities and dine in crowded dining halls, are contracting the virus or being sick by it.

Human Rights Watch's examination of Kenya's living circumstances discovered inadequate beds, water, food, and cleaning materials. People housed in quarantine facilities complained to Human Rights Watch that workers did not wear personal protective equipment (PPE) and that they were not informed of test findings. On March 23, 2020, a twenty two year old guy who had just returned from France informed the group that he was without electricity, running water for baths, food, and drinkable water. Mattresses and other coverings are absent from beds. On occasion, those under quarantine are told to buy their own water. Many others described similar conditions in other facilities and said the authorities sometimes extend the quarantine period beyond the mandatory fourteen days to thirty days, even when people test negative several times.

Before being allowed to leave some isolation centres, people are required to pay for lodging, food, and other expenses. According to victims and witnesses, many people who were unable to pay were detained for additional days, and in one case police were called to assault people who insisted on claiming they were unable to pay.

Eight people, including six COVID-19 patients and two suspects, aged between twenty-four and forty-six, were reported to have escaped from an isolation facility at a hotel in the Manhya neighborhood of the Indian city of INDORE on April 16, 2020, according to the First Post.com. Three of the suspects were later apprehended and taken to the hospital, according to the police. The three patients that were located and apprehended described themselves as being disturbed for staying in an isolation center for seventeen days. The online social media site Venture.com stated on April 23, 2020, that there has been a report of COVID-19 suspected cases escaping isolation facilities in Africa. An angry Coronavirus patient at the Lagos state isolation center, for instance, sought to flee in Lagos, Nigeria, citing the illness' horrible nature as motivation. The awful condition of the isolation center is intolerable, according to a high official who spoke to journalists but asked that his identity not be disclosed. The administration has faced harsh criticism for managing the quarantine facilities like jails, extending days without saying a word to people housed there, as was also observed in Kenya. Some centers have received special attention for not only living in cruel conditions but also subjecting individuals in quarantine to the coronavirus. On Tuesday, April 21, 2020, a video shared on social media showed an undetermined number of persons being held in an isolation facility at the Kenya Medical Training College (KMTC) headquarters in Nairobi escaping the facility. The escapees were observed scaling the wall, landing on Mbagathi Road, where they hid amongst passersby before fleeing in the direction of Nairobi West. Besides hurling their suitcases and other belongings over the concrete fence, the violators were also observed carrying them. Medical sources and eyewitnesses in Sudan report that hundreds of people who are thought to have COVID-19 or who are being watched after returning from a recent trip abroad have abandoned hospitals and isolation facilities due to a lack of medical staff, food, and protective equipment. One of the individuals who fled the isolation facility Ahmed Abdul Azim informed MEE in Bahri that he had undergone screening at the Argeen border crossing, where he was warned he was in danger. Abdul Azim claimed he left the facility, though, because it was not ready to welcome patients.

African nations that have experienced incidents of solitary individuals escaping are at extremely high risk and may find themselves fighting the COVID-19 pandemic for a very long period. Therefore, it is advised that African leaders stand up, be innovative and give isolation centers high-quality medical care and a comfortable setting. An isolated patient may leave if they don't feel comfortable, which might cause the virus to spread and cause chaos across the nation.

3.3. Strategies to Transform Management Practice in Achieving Cooperation from Covid-19 Patients and Suspected People

In the United States, most people with suspected or probable COVID-19 are isolated at home; hospital isolation is reserved for those who required such care or had no appropriate home environment. (e.g., homeless, out-of-town visitors). Isolation is continued when symptoms persist for 10 days thereafter. In some other countries, most persons with suspected or probable COVID-19 are isolated in the hospital. For contact management, the U.S. Centre for Disease Control and Prevention (CDC) recommended quarantine only for healthcare workers who had high-risk exposure to a coronavirus patient. In some states, however, local health officials “furloughed” healthcare workers who are exposed to high-risk probable cases. In general, CDC recommended only passive observation. Persons, who are exposed to suspected or probable coronavirus as well as travelers returning from areas with COVID-19 transmission, are asked to monitor their health for 10 days and seek medical attention immediately if fever or respiratory symptoms develop. Active supervision is reserved for probably and lab-confirmed cases and their high-risk close contacts; this is usually conducted by members of the local or state health departments.

In some countries other than the United States (e.g., China, Taiwan Singapore, and Canada), home quarantine is used for most close contacts of people with suspected or probable coronavirus. Designated quarantine facilities are used in some situations for homeless persons, travelers, and people who did not wish to be quarantined at home. In some situations, as a result of staffing shortages and relatively high exposure rates in hospitals, exposed healthcare workers and ambulance personnel are placed on “work quarantine,” which entails working during their regular shifts, using comprehensive infection control precautions and personal protective equipment, and staying either at home or in a building near the hospital when off duty. Most persons in home quarantine are asked to monitor their temperature regularly, once or twice a day; health workers call them twice a day to get a report on temperature and symptoms. Other healthcare workers usually had their temperature checked twice a day or more at work. In Singapore, video cameras linked to telephones are occasionally used to monitor patients and suspected people.

Authorities used a variety of methods to enforce quarantine during the COVID-19 pandemic. In select places, quarantine orders are given to all persons placed in quarantine, while in the majority, only those who demonstrate noncompliance are given orders. Under some orders, noncompliant individuals are isolated in guarded rooms; others were confined at home wearing security ankle bracelets; yet others receive fines or even jail sentences. However, these instances of compulsory enforced quarantine orders are clearly the exception rather than the norm in the COVID-19 pandemic.

3.4. Local Containment

Community containment strategies in some countries including the US focused primarily on informing the public, health professionals, and others about the COVID-19 response efforts through emergency operations centers. This technique entails meeting with communities and organizations who are experiencing stigmatization, publishing guidelines, and fact sheets on websites, conducting news conferences, delivering presentations to various audiences, and publishing guidelines and fact sheets.

Large-scale quarantines are occasionally imposed on travelers arriving from other coronavirus-affected areas, work and school contacts of suspected cases, and, in some cases,

entire apartment complexes where high coronavirus attack rates are occurring, as happened in mainland China, Hong Kong, Taiwan, and Singapore.

Many areas with high transmission (such as Hong Kong, Singapore, Taiwan, Toronto, and mainland China) implemented measures like mandatory fever screening before entry to schools, workplaces, and other public buildings; required masks in certain settings; and population-wide temperature monitoring and disinfection campaigns, in addition to imposing large-scale quarantines in some cases. Community Mobilization initiatives are also created to inform the public about COVID-19 and how to prevent and control it. For instance, a population-wide body temperature monitoring campaign and a COVID-19 hotline are promoted to encourage early identification of fever as a warning sign for the virus. Mainland and Taiwan Additionally, China launched a number of community disinfection operations in which bleach was freely distributed throughout the neighborhood and was sprayed onto buildings, vehicles, and streets.

The experience of nations that implemented extensive quarantine measures in reaction to the virus can teach us many crucial lessons. First, when the population was informed clearly about the necessity of quarantine, it was accepted well—much better than many public health officials would have expected or foreseen. In fact, voluntary quarantine worked in the vast majority of situations. Quarantine was widely accepted and supported, but despite this, it still required a significant deal of sacrifice from many individuals due to its negative effects that include loss of income, worries about their families' health, feelings of isolation, and stigma. The implementation of large-scale quarantine was also found to be difficult and resource-intensive, posing logistical, financial, ethical, and psychological difficulties for public health authorities. Recent information on the effectiveness of quarantine during the pandemic in Taiwan and Beijing, China, suggests that efficiency could be increased by concentrating quarantine activities on people with known or suspected contact with coronavirus cases. In order to get ready for upcoming epidemics and pandemics, innovatively improved systems and personnel people under quarantine, to keep an eye on their health, direct them to the appropriate medical care, and provide mental health and other forms of assistance.

4. CONCLUSION

Modern quarantine includes a variety of scalable treatments to keep communities or persons exposed to or infected with very dangerous contagions apart or to restrict movement (e.g., detain, isolate, or conditionally release). These strategies can be a crucial component of the public health toolkit for reducing transmission and putting an end to epidemics like COVID-19 or SARS. The modern quarantine can be resource-intensive and labor-intensive to administer ethically. The quarantine will be most effective when used in conjunction with other containment measures and customized to a particular situation. Quarantined individuals must be provided with the necessary support services. Comprehensive preparatory planning increases the effectiveness of quarantine. Since effective communication and public trust are crucial elements, the public must be informed clearly about the use and significance of quarantine as a tool for controlling specific infectious diseases both before and during the epidemic.

It may be important to urge quarantine in addition to other containment measures if there are any future pandemics or epidemics that have the potential to spread throughout the world like SARS did in other nations in 2003 and what the coronavirus is doing currently. Therefore, it is crucial that preparation be done at every level of government, and far before the necessity, for the proper execution of quarantine and other containment measures. To ensure our readiness in an emergency, strategic operational plans should be put to the test at all levels to identify and fix any holes or problems in less critical situations.

5. REFERENCES

- Anderson, R. M., Heesterbeek, H., Klinkenberg, D., & Hollingsworth, T. D. (2020). How will country-based mitigation measures influence the course of the COVID-19 epidemic?. *The lancet*, 395(10228), 931-934. [https://doi.org/10.1016/S0140-6736\(20\)30567-5](https://doi.org/10.1016/S0140-6736(20)30567-5)
- Bogoch, I. I., Watts, A., Thomas-Bachli, A., Huber, C., Kraemer, M. U., & Khan, K. (2020). Potential for global spread of a novel coronavirus from China. *Journal of travel medicine*, 27(2), taaa011. <https://doi.org/10.1093/jtm/taaa011>
- Bogoch, I. I., Watts, A., Thomas-Bachli, A., Huber, C., Kraemer, M. U., & Khan, K. (2020). Pneumonia of unknown aetiology in Wuhan, China: potential for international spread via commercial air travel. *Journal of travel medicine*, 27(2), taaa008.
- Chan-Yeung, M. Xu., & R H. Sars (2003): *Epidemiology*. Respirology Carlton.
- Chen, W., Wang, Q., Li, Y. Q., Yu, H. L., Xia, Y. Y., Zhang, M. L., ... & Feng, Z. J. (2020). Early containment strategies and core measures for prevention and control of novel coronavirus pneumonia in China. *Zhonghua yu fang yi xue za zhi [Chinese journal of preventive medicine]*, 54(3), 239-244. <https://doi.org/10.3760/cma.j.issn.0253-9624.2020.03.003>
- Cyranoski, D. (2020). What China's coronavirus response can teach the rest of the world. *Nature*, 579(7800), 479-481.
- Kucharski, A. J., Russell, T. W., Diamond, C., Liu, Y., Edmunds, J., Funk, S., ... & Flasche, S. (2020). Early dynamics of transmission and control of COVID-19: a mathematical modelling study. *The lancet infectious diseases*, 20(5), 553-558. [https://doi.org/10.1016/S1473-3099\(20\)30144-4](https://doi.org/10.1016/S1473-3099(20)30144-4).
- Lau, H., Khosrawipour, V., Kocbach, P., Mikolajczyk, A., Schubert, J., Bania, J., & Khosrawipour, T. (2020). The positive impact of lockdown in Wuhan on containing the COVID-19 outbreak in China. *Journal of travel medicine*, 27(3), taaa037. <https://doi.org/10.1093/jtm/taaa037>.
- Mahase, E. (2020). Coronavirus: covid-19 has killed more people than SARS and MERS combined, despite lower case fatality rate, *BMJ*, 368, m641. <https://doi.org/10.1136/bmj.m641>
- Police hunt for Nigerian COVID-19 positive escapee in Ghana <https://www.ghanaweb.com/GhanaHomePage/NewsArchive/Police-hunt-for-Nigerian-COVID-19-positive-escapee-in-Ghana-926416>
- Prem, K., Liu, Y., Russell, T. W., Kucharski, A. J., Eggo, R. M., Davies, N., ... & Klepac, P. (2020). The effect of control strategies to reduce social mixing on outcomes of the COVID-19 epidemic in Wuhan, China: a modelling study. *The lancet public health*, 5(5), e261-e270. [https://doi.org/10.1016/s2468-2667\(20\)30073-6](https://doi.org/10.1016/s2468-2667(20)30073-6)
- Quality BJ, Clifford S, Flasche S and Eggo RM (2020): Effectiveness of airport screening at detecting travelers infected with the novel coronavirus. *Euro Surveillance*, 25. <https://doi.org/10.2807/1560-7917.25.5.2000080>.
- Rothe, C., Schunk, M., Sothmann, P., Bretzel, G., Froeschl, G., Wallrauch, C., ... & Hoelscher, M. (2020). Transmission of 2019-nCoV infection from an asymptomatic contact in Germany. *New England journal of medicine*, 382(10), 970-971. <https://doi.org/10.1056/NEJMc2001468>
- Tanne, J. H., Hayasaki, E., Zastrow, M., Pulla, P., Smith, P., & Rada, A. G. (2020). Covid-19: how doctors and healthcare systems are tackling coronavirus worldwide. *Bmj*, 368, m1090. <https://doi.org/10.1136/bmj.m1090>
- Van Doremalen, N., Bushmaker, T., Morris, D. H., Holbrook, M. G., Gamble, A., Williamson, B. N., ... & Munster, V. J. (2020). Aerosol and surface stability of SARS-CoV-2 as compared with SARS-CoV-1. *New England journal of medicine*, 382(16), 1564-1567. <https://doi.org/10.1056/NEJMc2004973>

- Wang, C., Horby, P. W., Hayden, F. G., & Gao, G. F. (2020). A novel coronavirus outbreak of global health concern. *The lancet*, 395(10223), 470-473. [https://doi.org/10.1016/s0140-6736\(20\)30185-9](https://doi.org/10.1016/s0140-6736(20)30185-9)
- Wilder-Smith, A., Chiew, C. J., & Lee, V. J. (2020). Can we contain the COVID-19 outbreak with the same measures as for SARS?. *The lancet infectious diseases*, 20(5), e102-e107. [https://doi.org/10.1016/s1473-3099\(20\)30129-8](https://doi.org/10.1016/s1473-3099(20)30129-8).
- Wilder-Smith, A., Telesman, M. D., Heng, B. H., Earnest, A., Ling, A. E., & Leo, Y. S. (2005). Asymptomatic SARS coronavirus infection among healthcare workers, Singapore. *Emerging infectious diseases*, 11(7), 1142. <https://doi.org/10.3201/eid1107.041165>
- South China Morning Post (February 18, 2020). Russian woman ordered back to the hospital after escape from coronavirus quarantine <https://www.youtube.com/watch?v=uBpMXXcXdBg>
- African news (March 9, 2020). Suspected coronavirus patient missing from Zimbabwe hospital <https://www.africanews.com/2020/03/09/suspected-coronavirus-patient-bolts-from-zimbabwe-hospital>
- Times Now (March 14, 2020) Five Coronavirus suspects escape from isolation wards in Nagpur, Manhunt launched <https://www.youtube.com/watch?v=DGUg2JGbKPw>
- Ghanaian Times (April 1, 2020) One Tamale COVID-19 case escapes from quarantine <https://www.ghanaiantimes.com.gh/one-tamale-covid-19-case-escapes-from-quarantine>
- NDTV (April 7, 2020). Coronavirus Patient Uses His Clothes As Rope To Escape From UP Hospital <https://www.youtube.com/watch?v=ItqzNCqKZYk>
- African news (April 22, 2020). Escape from COVID-19 quarantine: Uganda convicts six Chinese <https://www.africanews.com/2020/04/22/uganda-arraigns-chinese-quarantine-escapees-after-treatment>
- Kyei-Boateng S (Daily Graphic May 9, 2020) COVID-19 patient recaptured after escaping from quarantine <https://www.graphic.com.gh/news/general-news/don-t-push-for-release-of-quarantined-covid-19-cases-families-relatives-advised.html>
- Elsa, E.(June 25, 2020) India: COVID-19 positive convict uses coronavirus as a tool to threaten, escape from cops <https://gulfnnews.com/world/asia/india/india-covid-19-positive-convict-uses-coronavirus-as-a-tool-to-threaten-escape-from-cops-1.1593097265702>
- 1 News (July 5, 2020) Government faces more questions over isolation facilities after woman's escape in Auckland. <https://www.youtube.com/watch?v=ksrC05NDGWw>
- Nzherald. Co. nz (July 8, 2020) New Covid case escaped isolation to go to Auckland supermarket | https://www.youtube.com/watch?v=_ysYYPwJ0OE
- 1 News (July 10, 2020) Third person to escape managed isolation in a week charged, refused bail. <https://www.youtube.com/watch?v=yHOem-Urse4>
- NZ Herald (July 10, 2020). Hamilton isolation escapee held in jail after alleged brazen booze run. https://www.nzherald.co.nz/nz/news/article.cfm?c_id=1&objectid=12347167
- CDC (July 20, 2020) COVID-19: Quarantine vs. Isolation <https://www.cdc.gov/coronavirus/2019-ncov/downloads/COVID-19-Quarantine-vs-Isolation.pdf>General News (Ghana web, April 17, 2020)
- Smith, Anneke of RNZ (August 28, 2020). Covid 19 coronavirus: Woman gave 14-day jail sentence for escaping isolation facility https://www.nzherald.co.nz/nz/news/article.cfm?c_id=1&objectid=12360207