**Attacks on Ebola Response**

Latest available open-source safety, security and access information on reported attacks on health care in the Democratic Republic of the Congo.

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**Ituri province**

**02-03 November 2019:** In Lwemba, an Ebola community outreach volunteer was fatally stabbed by suspected Mai-Mai militia. During the attack the victim’s wife was also injured and their house was burnt down. Prior to his assassination the staff member had received death threats related to his work as a local radio journalist on Ebola response. 

**Sources:** [Actualité I, Actualité II, Actualité III, AWSD], [La Prunelle, L’Essentiel, Radio Opaki] and [WHO External Situation Report]

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**10-11 November 2019:** In Biakato village, a group of youths suspected to be affiliated with Mai-Mai militias attempted to attack the local Ebola treatment centre and to burn a WHO truck but were deterred by the intervention of the Congolese military. 

**Sources:** [La Prunelle and Radio Opaki]

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**Kasai Oriental province**

**06 November 2019:** In Mbuji-Mayi city, around 700 health care providers demonstrated at the headquarters of the province’s governorate. The health care workers claim that their salaries and bonuses are in arrears by several months. 

**Source:** [Radio Opaki]

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**North Kivu province**

**November 2019:** In Mulekera commune, Beni city, parts of the local community are resisting vaccination against Ebola and to be checked at Ebola centres despite the disease still being active within the community. 

**Source:** [Radio Opaki]

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**06 November 2019:** In Matembe commune, Butembo city, the Vulamba health post was raided by unidentified gunmen looking for a nurse they accused of collaborating with Ebola response teams. Unable to find her, they stole money and destroyed hand-washing kits. 

**Source:** [Kivu Security]

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**06-07 November 2019:** In Ngoyo village, near Mangina city, Beni territory, an unnamed health centre was attacked by suspected Mai-Mai militants who destroyed medical supplies before burning the facility down along with three near the centre. The health centre was participating in the Ebola response. Note: In June 2019, the health centre closed following threats by Mai-Mai militia for collaborating with the Ebola response teams. 

**Sources:** [L’Interview, Congo France, 24hNewsRDC, Media Congo, Radio Moto, Radio Opaki] and [La Prunelle]

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This information alert is part of the Attacks on Ebola Response project.

It is published by Insecurity Insight from information made available in open sources.

The project supports organisations and health providers with information, analysis and practical recommendations on how to mitigate the impact of attacks on health care to ensure staff safety and better health outcomes.

The incidents reported are not a complete nor a representative list of all events that affected the provision of health care in the DRC and have not been independently verified.

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09 November 2019: In Bulengera commune, Butembo city, several local head of units accused of attempting to block the work being carried out in the area by the Ebola response were removed from their positions. Source: Radio Moto

09 November 2019: In Butembo, members of the Ebola response in twelve health zones declared a three-day partial strike claiming that their salaries are in arrears by several months. On 13 November, the staff members went on a full strike after the issue was unresolved, resulting in the closure of services. Sources: Radio Opaki I, Radio Opaki II, Radio Opaki III, Actualité I, Actualité II, L’Essentiel, Les Volcans and Radio Moto

15 November 2019: In Oicha, Beni territory, recurrent armed incursions by Allied Democratic Forces (ADF) rebels near Oicha General Referral Hospital has raised fears of the possibility militants may attack the hospital and loot medical supplies. Source: L’Actualité

South Kivu province

November 2019: In Minembwe, Fizi-Itombwe territory, fighting and insecurity in the area has resulted in an influx of people, reportedly resulting in a “chaotic” health crisis due to the lack of medical and nutritional resources available to deal effectively with the movement. The medical director of Minembwe General Hospital has appealed to the health authorities and to international NGOs for urgent assistance. Source: La Prunelle

02-03 November 2019: In Chegerà Katana village, South Kivu province, a medical biotechnologist, serving as head of a local medical centre's laboratory within Katana health zone, was shot to death at his home by unidentified armed perpetrators. His son was also severely injured in the attack. Source: L’Essentiel

North-East Congo

November 2019: Security issues and poor access continue to hinder response activities in unspecified health zones, preventing the Ebola response from detecting and responding appropriately to new cases in these areas. Source: WHO External Situation Report

Incidents reported by the World Health Organization’s (WHO) Surveillance System of Attacks on Healthcare (SSA) in the DRC for the period 1-15 November 2019

The SSA² reported 10 incidents – 8 reported intimidation, harassment or threatening behaviour towards health workers, and two reported a health facility being set on fire. The current available information makes it likely that the 6 November open-source report on a health facility in Ngoyo village, North Kivu, being set on fire may have been reported by the SSA; however, without having access to the further details this cannot be confirmed.

Accessed: 18 November 2019

¹ The AWSD database does not include the names of individual victims or the agencies affected by an incident. This is done in consideration of the victims and their families who may not wish to have the names publicised in this format and to afford equal respect to the many victims for whom this information is not available. Accessed 18 November 2019.

² The Surveillance System of Attacks on Healthcare (SSA) is a global standardized and systemic approach to collecting data of attacks on health care. This system utilizes the same methodology across countries to address the knowledge gap of the extent and nature of attacks on health care. The WHO SSA does not include information on location or perpetrator.