



## Democratic Republic of the Congo (DRC)

INSIGHT: Resurgent Ebola in North Kivu: locals' response

**Less than a year after the tenth Ebola outbreak was declared over in north-eastern DRC in June 2020, health providers are again struggling to contain a spate of new Ebola cases around the city of Butembo in North Kivu province. Distrust and resistance underpinned and enhanced by rumours spread and reinforced through social media are making this task more difficult.**

On Sunday 21 February an Ebola response team was dispatched to a village in Lubero territory, North Kivu province, to vaccinate people who had been in contact with a confirmed Ebola case. The team was met with hostility and violence by community members. Its equipment was damaged, but no casualties or injuries were reported. Only after several hours of discussions with community members were the health workers allowed to start vaccinating people.

This incident is a concrete example of how community resistance can adversely affect the ongoing public health campaign in North Kivu province to stem the rising number of Ebola cases. Indeed, the widespread community resistance and distrust accompanying public health efforts during the tenth Ebola pandemic are acknowledged to have hindered the progress of the health campaign, but are also reflected in the number of security incidents involving health workers in the area.

Local community distrust and resistance to the Ebola health response have been underpinned by false rumours, often spread or reinforced through social media websites.

### HOW CAN SOCIAL MEDIA IMPACT PUBLIC HEALTH CAMPAIGNS?

Social media can be linked to resistance to health measures in several different ways. Individuals voice their personal thoughts on social media. Social media are also an echo chamber where individuals reinforce their views and like-minded people validate and reinforce them with their approval. Social media groups can become a key medium in the incitement of violence, while social media comments left in response to reports of violence against health providers can be used to justify and validate such violence.

## SOCIAL MEDIA, RUMOURS AND THE EBOLA RESPONSE IN NORTH KIVU

- Social media reactions to news surrounding the new Ebola outbreak indicate that the damaging rumours which negatively impacted public health campaigns during the tenth Ebola epidemic by supporting and increasing community resistance are still shared by some members of local communities.
- Some of these rumours include the claim that Ebola is a plot by outsiders and corrupt institutions or individuals to make money from the outbreak.

In one example a social media user from north-eastern DRC reacted to a news story shared on Facebook featuring Congolese virologist Dr Muyembe's call for increased Ebola testing. (Dr Muyembe is the general director of the Institut National de Recherche Biomedical – the official DRC institution that provides support to the government and WHO on the pandemic.)

Ebola monté encore , Corona a échoué alors les agents de l'ancien coop croient qu'ils ont gagné , cette fois ci nos yeux seront ouverts , aller le faire dans d'autres Provinces ,N/Kivu ns sommes fatigués avec vos conneries ,les massacres silence Radio... See more



The social media user reacted by claiming that the 12th Ebola outbreak is being “staged” to compensate for the “failed” COVID-19 pandemic. They continue by warning that “this time our eyes will be open”, urging the Ebola response to “go to other provinces, [for] in North Kivu we are tired of your lies” (see image on previous page).

Reacting to the same news story, another social media user from Butembo – the epicentre of the new outbreak – accused Dr Muyembe of being motivated by financial interests.



Using a very local and colloquial Swahili expression, they accused Dr Muyembe of being “again caught in his business, he loves money. Friends of money, you want again to increase the Ebola cases to enrich yourself[;] may God forgive you” (see image above).

Continuous monitoring of social media reactions to Ebola-related news stories from the beginning of the latest Ebola epidemic suggests that these examples featured above are far from being isolated occurrences, suggesting that distrust and suspicion regarding the intentions of the Ebola response remain widespread in north-eastern DRC.

**In light of this, if the local resistance encountered during the tenth Ebola epidemic is not to be repeated, community acceptance strategies should be urgently put in place.**

## FROM ANALYSIS TO ACTION: LOCAL COMMUNITY ACCEPTANCE IS KEY TO PUBLIC HEALTH EFFORTS AGAINST PANDEMICS

Local and international health service providers should ensure that structures are in place to facilitate systematic and close cooperation and engagement with local communities.

If the outbreak persists, these health service providers would then be able to rely on the indispensable support of locals, at least in the medium to long term.

The brief 11th Ebola outbreak in Équateur province showed that a localised and community-driven strategy is key to a successful health campaign.

### STAY INFORMED

Concerned about social media, the health response or aid operations? Get in touch and send us your questions: [info@insecurityinsight.org](mailto:info@insecurityinsight.org)

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