



Uganda: Ebola Outbreak

Social Media Monitoring

November 2022

Context

On 22 September 2022 health authorities in Uganda declared an Ebola outbreak for the first time since 2012 after a patient was declared positive for the Sudan strain (SUDV) in Mubende district. As of 02 November 2022, the Ugandan health ministry had confirmed 129 cumulative cases and 37 deaths, and the outbreak had spread to other districts, including Bunyangabu, Kagadi, Kampala, Kassanda, Kyegegwa, and Wakiso.

The outbreak of the Sudan Ebola strain, for which a vaccine has not yet been fully developed, is of particular concern not only to Uganda, but also to its neighbouring countries such as the Democratic Republic of the Congo (DRC), South Sudan and Kenya. This bulletin examines the public response on social media to the Ebola crisis in Uganda.

Mistrust in authorities and public institutions

Occurring a year after a bitter electoral process marred by [allegations of fraud and repression](#), the public reaction on social media to the latest Ebola outbreak in Uganda appears to have been shaped by the prevalent mistrust among some segments of the population towards the country's public institutions and authorities.

Many Ugandan commentators responded to developments by expressing their concern that the ruling government was fabricating the epidemic – or, at the very least, instrumentalising it – for the enrichment of those in power.

Fears of financial embezzlement

A particularly common claim among social media users in the initial phase of the outbreak was that the ruling authorities were inventing the epidemic or using it to obtain funds from international organisations that could be embezzled.

The World Health Organisation (WHO) was at times mentioned as the source of such funds when these claims were made.

The terms “Ebola money” or “Ebola business” have been used in similar contexts to refer to a dynamic of generating profit from the activities surrounding efforts to contain the epidemic.



Comment

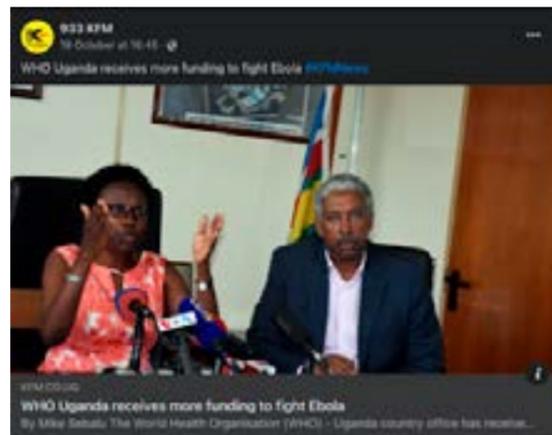
Bintu bapaanga naawe bipaange...please don't waist your time on this lies. They need money from WHO to finish their story buildings.

Speculations about the government syphoning off funds obtained from international organisations and other sources intensified after international donors announced financial assistance for Uganda. It is worth noting that some social media users interpreted increased funding for the WHO Uganda office to combat Ebola as a way for the Ugandan government to embezzle more funds.

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In general, suspicion that international organisations are providing money that the government would siphon off is a risk to donor reputation in Uganda, even if social media users believe that donors are sometimes unaware of the suspected misappropriation of funding by local authorities.

In other cases the corruption is believed to extend to UN agencies.



Comments

There's too much corruption in those UN agencies, that amount [i.e. funds provided by donors] will be shared by M7 [i.e. President Yoweri Museveni] & and the guys [who] authorised it [i.e. officials of the UN agencies].

Better give it directly to people who are affected not the national robbers movement govt, they will eat it all and continue locking the affected people indoors.

Fianlly this is wat the government wants, funds!!! We had Ebola before nd we fought it without lockdown but dis tym it's like it going to spend up to outside countries, people r suffering.

Fears of land-ownership and mining interests

Another major narrative, also fuelled by the lack of trust in governing institutions, is that the pandemic was concocted to evict locals from their lands in mineral-rich zones to allow mining interests to mine these areas.

The question of land ownership is a historically divisive and at-times violent issue surrounding mineral exploration and extraction in a country abundant with natural resources.

This widely believed allegation was also nourished by the fact that the outbreak initially occurred in a mining community and that the epicentre of the epidemic, Mubende district, had experienced a gold rush since the early 2010s and had thus become known for its mining opportunities.

Moreover, assuming that the virus was imported from neighbouring countries, especially the DRC, many social media users interpreted the sudden appearance of the strain in a gold-rich region located in the centre of the country as evidence of a ploy on the government's part.

Comments

Ebola jumped from congo and came stright to mubende but skipping all the neighbouring districts but choose the one with gold.

How many districts from Sudan to mubende, how can it jump from Sudan staright to mubande, These are monkey tricks in Uganda.

Misinformation and possible disinformation

The circulation of misinformation, including the belief that witchcraft is the reason behind the deaths caused by the epidemic, has been a crucial factor in previous major disease outbreaks in Uganda, and the latest Ebola outbreak is no exception in this regard.

A popular video uploaded by a pastor, in which he links the Ebola outbreak to divine retribution for what he considers to be increasing immorality in Ugandan society, reached more than 61 thousand people in Uganda. As in the case of witchcraft, messages that attribute a non-medical explanation to the outbreak could undermine awareness campaigns run by health professionals on the ground.

At the same time, some social media personalities or profiles sought to exploit the widespread mistrust of the government among some sections of the Ugandan population by propagating what might constitute disinformation.

An important example is that of Fred Kajjubi Lumbuye, an exiled political activist with a large following on social media. In a series of videos posted on YouTube and watched by tens of thousands of his followers, Mr Lumbuye, who is affiliated with the National Unity Platform (NUP) opposition party, alleged that the government was making up the epidemic in order to steal funds from international organisations.

Profile analysis

An analysis of a small sample of social media users suggests that political affiliation is a key factor in influencing users' worldview on this issue.

A high number of commentators expressing mistrust towards authorities' claims on Ebola – including the belief that Ebola was fabricated or instrumentalised to obtain additional foreign funding or to take over land for mining – appear to be either affiliated with the main opposition political party (the NUP) or to express opinions sympathetic to its positions.

Finally, the gender of the users analysed in the sample was predominantly male.

Conclusions

To date, little indication of hostility towards or mistrust of international organisations was found on social media.

However, social media users close to the political opposition in particular appear to interpret and instrumentalise the disease outbreak in terms of their political struggle. This increases the risk that medical and public health interventions are also interpreted as being linked to political and financial interests, undermining the neutrality and impartiality of these interventions.

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Recommendations

For donors funding the Ebola response and those responding on the ground:

- Be conscious of the risk that actors on social media may make allegations regarding the intentions of Ebola-related health programmes that have the potential to damage the effectiveness and reputation of these programmes.
- Be conscious of the risk that the distrust towards state authorities and institutions could rapidly extend to international organisations and donors by association.
- Follow social media and other discussions around health interventions and be prepared for the need to issue proactive communications around the political neutrality and impartiality of the efforts to prevent and treat Ebola, the principle of doing no harm, and the medical facts around the disease outbreak.
- Train frontline medical staff in communication skills that will support the building of trust among the Ugandan population.
- Carry out background checks on providers of services to Ebola-related health interventions such as accommodation, transport, etc. to avoid giving the impression that these health programmes are designed to provide economic benefits to people with close ties to those in power.

Further resources

- Social Media Monitoring: [14th Ebola](#) Response in the DRC (Apr 2022).
- Social Media Monitoring: [12th Ebola](#) Response in the DRC (Mar 2021).
- Attacks on Health Care: [10th Ebola](#) Response in the DRC (Nov 2020).
- Delivering Aid and Emergency Healthcare in Insecure Settings: [Recommendations](#) for Work in the DRC in the Context of Ebola Response. (Jan 2020).
- Emergency Healthcare in Insecure Settings: 15-min [mobile guide](#) with [PDF](#)
- Attacks on Health Care Bi-Monthly [News Briefs](#): Available since October 2017
- Attacks on Health Care News Briefs [Dataset](#): Available on HDX.
- Website: insecurityinsight.org/projects/healthcare/attacks-on-ebola-response
- [Sign up](#) to receive all the latest news and resources.

This document is published by Insecurity Insight. The publication of this report is funded and supported by the Foreign, Commonwealth and Development Office (FCDO) of the UK government through the RIAH project of the Humanitarian and Conflict Response Institute at the University of Manchester and through the project 'Ending violence against healthcare in conflict: documentation, tools, and data-informed advocacy to stop and prevent attacks' funded by the European Union. The contents are the responsibility of Insecurity Insight. Insecurity Insight is a Humanitarian to Humanitarian ([H2H](#)) organisation committed to the [Humanitarian Principles](#).

Insecurity Insight. 2022. Social Media Monitoring, Uganda: Ebola Outbreak, November 2022. Switzerland: Insecurity Insight. bit.ly/UGAEbolaNov2022

