

Social Media Reactions in the DRC to the Mpox Health Emergency



August 2024

To support humanitarian work in the Democratic Republic of the Congo, Insecurity Insight conducts regular social media monitoring to understand perceptions and key concerns around aid responses, with the aim of contributing to the development of aid agencies' communication and security risk management strategies in response to community sentiment.

Summary

On 14 August 2024 the World Health Organization declared mpox (formerly known as monkeypox) a public health emergency of international concern following a dramatic rise in cases. By mid-August 2024 approximately 14,000 cases and 524 deaths had been reported worldwide, marking a severe escalation from previous years. The outbreak's epicentre is in the Democratic Republic of the Congo (DRC), where mpox has spread to 22 of the country's 26 provinces (i.e. 85% of the country), particularly North and South Kivu.

This brief assesses social media reactions in the DRC to the worsening mpox health emergency. To this end, around 650 Facebook comments published in August 2024 were collected and analysed.

Social media reactions to the mpox health emergency in the DRC are particularly marked by mistrust and scepticism, in particular towards local authorities. Facebook comments accuse local authorities of exploiting the crisis for financial gain, with repeated allegations of corruption and the embezzlement of aid funds. This mistrust extends to doubts about the legitimacy of the outbreak itself, with some people viewing it as exaggerated or fabricated for profiteering purposes.

In addition to concerns about local governance, suspicion was also expressed regarding Western involvement in the crisis. Some commentators believe that "Western" powers are inflating or manipulating the situation to exploit Africa – or had even deliberately caused it. This sentiment reflects a broader perception of the continuing disease outbreaks in the DRC as part of ongoing manipulation by external actors.

Recommendations

- Enhance transparency and communication about the disease.
- Strengthen local partnerships to ensure that interventions are culturally sensitive.
- Address community concerns by directly addressing the roles of the various partners in the response.
- Include local perspectives and feedback in decision-making processes to ensure that health interventions are both relevant and accepted by the community.

Context

On 14 August 2024 the World Health Organization (WHO) **declared** mpox (formerly known as monkeypox) a public health emergency of international concern (PHEIC) in response to a dramatic increase in cases worldwide. By mid-August the outbreak had **resulted** in approximately 14,000 cases and 524 deaths, highlighting a severe escalation from previous years.

The epicentre of this crisis is in the eastern Democratic Republic of the Congo (DRC), particularly in the provinces of North and South Kivu. The DRC initially declared a national outbreak of mpox in December 2022, but the situation has since deteriorated. As of May 2024 mpox has spread to 22 of the country's 26 provinces (i.e. 85% of the country). The outbreak is exacerbated by the emergence of new virus variants and persistent challenges affecting resource allocation and public health infrastructure.

The DRC is grappling with a complex health landscape, having faced numerous disease outbreaks in recent years, including Ebola (notably in 2018-2020 in the eastern DRC and in 2020 in Equateur Province), measles (2019-2020), and cholera. These recurrent health crises are compounded by ongoing conflicts and insecurity, such as the recent conflict involving M23 Movement rebels, which has **displaced** millions of civilians in the eastern DRC and severely hindered the delivery of health care services and vaccination efforts.

Additionally, misinformation, disinformation, and hate speech targeting health interventions have fuelled community **mistrust** toward health workers and vaccination efforts. These factors further complicate the response to the mpox outbreak, undermining efforts to control the spread of the virus and protect public health.

Reactions on social media to the mpox health emergency

Local authorities suspected of corrupt practices to obtain or divert aid funding

Numerous comments expressed doubt about the legitimacy of the health crisis, with some suggesting it is a fabricated event designed to syphon off funds (e.g. *“Mensonges, ils sont à la recherche des financements”* and *“Les premiers menteurs au monde au profil d’argent”*). Accusations of corruption were often made, with claims that government officials are using the situation to embezzle and divert aid funds (e.g. *“Détournement en cours de téléchargement”*).

The underlying sentiment was that the government's primary focus is on securing financial gains, often from international organisations like the WHO, rather than effectively addressing the public health crisis (e.g. *“Le gouvernement congolais cherche l’argent”* and *“Ils ont recommencé leurs complots”*). The repeated references to corruption and embezzlement underscore a deep-seated belief that public funds intended for health emergencies are being misappropriated and diverted from their intended beneficiaries.

Distrust towards the authorities' intentions may have inspired some commentators to express disbelief about the disease's existence and severity. Some comments dismissed the outbreak as exaggerated or compared it to less serious conditions, notably chickenpox (e.g. *“C’est comme VARICELLE ça”*). Some comments demanded that the authorities provide proof of the outbreak, while others accused them of wanting to scare people (e.g. *“Toujours vouloir faire peur aux gens”*).

Distrust of local authorities' handling of the public health emergency

Beyond suspicions of corruption, comments also highlighted concerns over transparency, accountability and the effectiveness of the authorities' response to the emergency. Some commentators criticised the authorities' transparency and effectiveness, with some expressing scepticism about official statements. For instance, in reaction to a statement by the authorities, one user commented, *"Situation sous contrôle? Lol! Je ne peux jamais croire venant de nos autorités"*, reflecting doubts about the government's assurances.

Criticism was also directed at the perceived inadequacy of the government's preventive measures. Users questioned the authorities' delay in taking action, with comments like, *"Quand l'épidémie était au début, nos autorités étaient où?"* highlighting a belief that the slow response has exacerbated the spread of the disease. Concerns extended to the failure to restrict people's movement from affected areas, which many believed had contributed to the epidemic reaching major cities such as Kinshasa, as noted in comments like, *"Vous saviez que cette épidémie est à Mai-Ndombe, vous laissez les habitants de ce coin sillonner la capitale"*.

Some commentators called for greater accountability and more effective action from the authorities, with social media users demanding that the government be more transparent about the real state of the crisis and take its responsibilities seriously. Comments such as *"Demandez au ministre: la situation est sous contrôle signifie quoi"* and *"Nous voulons voir l'État prendre ses responsabilités pour endiguer ces fléaux car LA vie est sacrée"* underline the commentators' demand for improved governance in the management of the health crisis.

Suspicion of Western manipulation in the mpox emergency

The reactions also revealed suspicion towards the perceived role of "Western" powers and organisations in the creation and management of the public health crisis.

Some commentators suspected that the outbreak is a manufactured or exaggerated issue designed by Western entities to further exploit Africa. Comments such as *"Pourquoi seule ce genre de maladie sont que en Afrique?"* and *"Tout ceci est l'œuvre des blancs pour nous maintenir dans la même situation de la précarité"* suggest a belief that the disease serves as a tool for ongoing Western exploitation and control.

Several comments also revealed the belief that "Western" countries, including through organisations like the WHO, are orchestrating or inflating the crisis (e.g. *"L'Occident [est] pointé du doigt"* and *"Je suis médecin, je vous jure que l'OMS est une organisation terroriste"*). This suspicion is compounded by claims that Westerners are deliberately infecting people (e.g. *"Les blancs nous polluent de force et nous largue des bactéries"*).

Conclusion

The social media reaction to the mpox emergency in the DRC highlights a complex interplay of scepticism, mistrust and suspicion. While the WHO's declaration of mpox as a PHEIC underscores the seriousness of the situation, many local responses are marked by profound doubts about the authenticity of and intentions behind the crisis.

Many commentators expressed mistrust of local authorities, accusing them of corruption and financial exploitation. An important sentiment is that the public health emergency is or will be manipulated for financial gain, undermining genuine efforts to combat the disease. This mistrust extends to the perceived role of Westerners and Western powers, with allegations that they are either inflating or fabricating the crisis to maintain control over and exploit Africa – and even deliberately causing it.

Such scepticism, combined with a history of recurrent health crises and ongoing conflicts in the DRC, complicates efforts to effectively manage and address the mpox outbreak. The need for transparent, accountable, and effective responses reinforced by community engagement is critical in overcoming both the disease and the pervasive distrust that has in the past hampered public health efforts.

Recommendations

- **Enhance transparency and communication:** Establish regular, transparent communication channels with local communities to provide clear and factual updates about the mpox outbreak. Address misinformation and clarify the nature and severity of the disease. Engage with local media and community leaders to disseminate accurate information and counteract false narratives.
- **Strengthen local partnerships:** Work closely with local health authorities, NGOs, and community organisations to ensure that interventions are culturally sensitive and address the specific needs of affected populations.
- **Address community concerns:** Actively address and respond to community concerns and suspicions regarding the role of international organisations and the authenticity of the crisis. Include local perspectives and feedback in decision-making processes to ensure that health interventions are both relevant and accepted by the community.

Methodology and limitations

Publicly available social media data published on Facebook related to the mpox health emergency in the DRC in August 2024 was collected using keywords associated with the disease. To do so, Insecurity Insight used proprietary technology powered by an artificial intelligence tool to identify pertinent data. The collected data, consisting of around 650 Facebook comments, was subsequently analysed and the findings presented in this brief. For ethical and technical reasons, the data does not include private social media content.

Should you wish to provide us with any feedback or to get in touch, kindly write to: info@insecurityinsight.org

Further resources

Information from past public health responses on social media in the DRC

- [Ebola in Equateur](#), April 2022
- [Ebola in North Kivu](#), March 2021
- [Ebola in Equateur](#), November 2020
- [Ebola in the DRC: rumours and allegations](#), July 2020

Analysis of violence

- [Violence against the Ebola response in the DRC in 2019-2020](#), November 2020
- [Lessons learned and recommendations from the Ebola response](#), February 2020

Safeguarding Health in Conflict Coalition DRC reports

- 2023: [English](#), [French](#)
- 2022: [English](#)
- 2021: [English](#), [French](#)
- 2020: [English](#)

This document is published by Insecurity Insight. The analysis and opinions expressed in this report belong solely to the publisher, Insecurity Insight. Insecurity Insight is a Humanitarian to Humanitarian ([H2H](#)) organisation committed to the [Humanitarian Principles](#). This document is funded and supported by the generous support of the American people through the United States Agency for International Development (USAID) and and by the Tides Foundation. The opinions expressed in it do not reflect in any way the position of the USAID, the U.S. Government or the Tides Foundation who are not responsible for the content expressed in this document.

Insecurity Insight. 2024. Social Media Reactions in the DRC to the Mpox Health Emergency, August 2024. Switzerland: Insecurity Insight. bit.ly/DRCMpoxAug2024