

Brief on Public Health and Social Measures Implementation in the Democratic Republic of the Congo

COVID-19



June 8–22



Methodology & Limitations

- This report compiles and synthesizes data on COVID-19 trends in DRC from multiple sources for the period of June 8-June 22, 2020. Data include official reports of cases and deaths, reports of government response measures, analysis of traditional and social media narratives, and reported security incidents.
- Analysis is limited to data reported in the listed data sources and may not include incidents/trends reported elsewhere. Available data sources cover different date ranges, and some are subject to delays and retrospective corrections. Findings reflect the latest available information at the time of analysis.
- **Traditional and social media analysis provide qualitative information which is not representative and should be interpreted carefully, particularly when making comparisons across countries.**
- Data are subject to limitations related to quality and completeness.



Traditional and Social Media Sources

- **Traditional media analysis:** Research for this report was conducted using African media, as well as human-curated aggregation of open source content from a variety of key African sources. Article- and quote-level metadata was then added in the framework of Novetta Mission Analytics. Results were then culled on the basis of relevance, resulting in a sample of 92 articles and 315 quotes from African media outlets from June 1- 21, 2020.
- **Twitter analysis:** Research for this report was conducted using geo-located African Twitter sources. Currently there are approximately 1M Twitter users from DRC. Quote-level metadata was then added in the framework of Novetta Mission Analytics. Results were then culled on the basis of relevance, resulting in a sample of 135 DRC-focused Tweets from June 1 – June 21, 2020.
- **Social media analysis:** Research for this report was conducted using geo-located African Facebook sources. Currently, there are approximately 3.1M Facebook users in DRC. Post and comment level metadata was added in the framework of Novetta Mission Analytics. Results were then culled on the basis of relevance, resulting in the sample of 257 DRC-focused Facebook posts and comments from June 1 - 21, 2020.

Key trends and recommendations

Key trends	Recommendations
New cases reportedly peaked in early June, though lab detection of COVID-19 cases is low. Calculations estimate that only 7% of cases are being detected. The total cases in DRC could be as high as 80,952, based on the number of reported deaths, which have increased by 96% over the past two weeks.	<ul style="list-style-type: none">Consider increasing community-wide public health and social measures (PHSMs) or improving adherence to currently implemented PHSMs while simultaneously increasing lab capacity and expanding testing.
Percent positivity is high for lab testing data, suggesting that testing has been concentrated among higher risk persons.	<ul style="list-style-type: none">Testing and criteria for testing should be expanded significantly, particularly at the provincial level, to identify additional cases.
Dis/misinformation narratives through social media are casting doubt on the existence of COVID-19 and strongly impacting risk perception. Government and local health officials have stated that some citizens continue to resist PHSMs and fail to acknowledge the severity of the disease.	<ul style="list-style-type: none">Strengthen risk communication to focus on risk perception and the importance of PHSMs, and to incorporate any current surveys/data on public beliefs/misconceptions*Deploy risk communication strategies that highlight 'recovered' cases to give verbal testimonies of their experiences being infected with the virus.Strengthen public awareness of COVID-19 and counter dis/misinformation through trusted media sources
Misinformation on the impact and efficacy of COVID-19 response appears to be intimately tied to more localized concerns over corruption and poor governance . This narrative is similar to that seen in North Kivu during the Ebola outbreak.	<ul style="list-style-type: none">Use lessons learned from Ebola outbreak to build trust with local communities and foster confidence in COVID-19 data and information.The COVID-19 response team should be cautious when associating with groups or figures perceived as corrupt and make sure to identify trusted government, community and religious leaders who can be advocates.



Key trends and recommendations (cont.)

Key trends	Recommendations
<p>The reports of water and food insecurity as well as limited access to health services threaten to undermine adherence to PHSMs and facilitate the spread of COVID-19. These affect regions with pre-existing water and food insecurity more than other regions.</p>	<ul style="list-style-type: none">• Strategic food and water distribution should be implemented to alleviate immediate need. If not addressed, this may lead to wider unrest and further instability.• Continue mapping areas at highest risk of COVID-19 and with low access to food, water and health services. Prioritize these areas for humanitarian aid and COVID-19 response activities.
<p>Positive sentiment toward the COVID-19 response was primarily driven by the distribution of humanitarian and medical aid to local DRC institutions, including hospitals, NGOs, and branches of international humanitarian aid groups</p>	<ul style="list-style-type: none">• Strengthen local governance structures.• Leverage multi-stakeholder collaboration for the distribution of humanitarian and medical aid as part of the COVID-19 response.
<p>DRC is facing a twin threat of Ebola and COVID-19 outbreaks, stretching an already thin response capacity.</p> <p>While not discussed in depth in this report, DRC is also experiencing a measles outbreak. Challenges that need to be addressed are problems with daily reporting on measles cases, poor multisectoral coordination and community engagement, insufficient nutritional kits in some areas and poor technical facilities in some hospitals for management of complicated measles cases.</p>	<ul style="list-style-type: none">• Ensure response measures to COVID-19 are complementary to, and coordinated with, responses to Ebola, measles, and other infectious disease outbreaks that may occur concurrently.



Disease Dynamics

New reported cases increased in June and continue to average **>100 cases** per day (Figure 1). After Cameroon, DRC reports the highest increase in COVID-19 cases in the Central Africa region (Figure 2). The prevalence of COVID-19 in DRC is **7.16 cases per 100,000 population** (Table 1). Only Chad and Burundi currently have lower prevalence rates in Central Africa. However, lower incidence may be due to lower testing rates and should therefore be interpreted with caution.

Figure 1. New reported cases by date of report, DRC

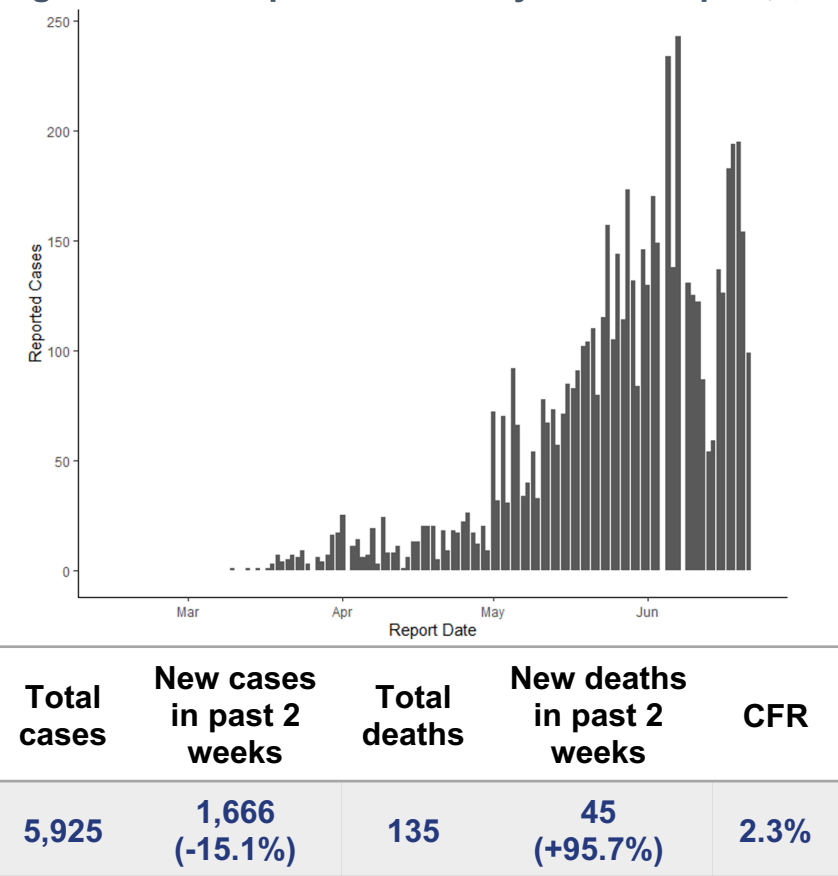


Figure 2. Total cases on logarithmic scale, DRC and selected countries

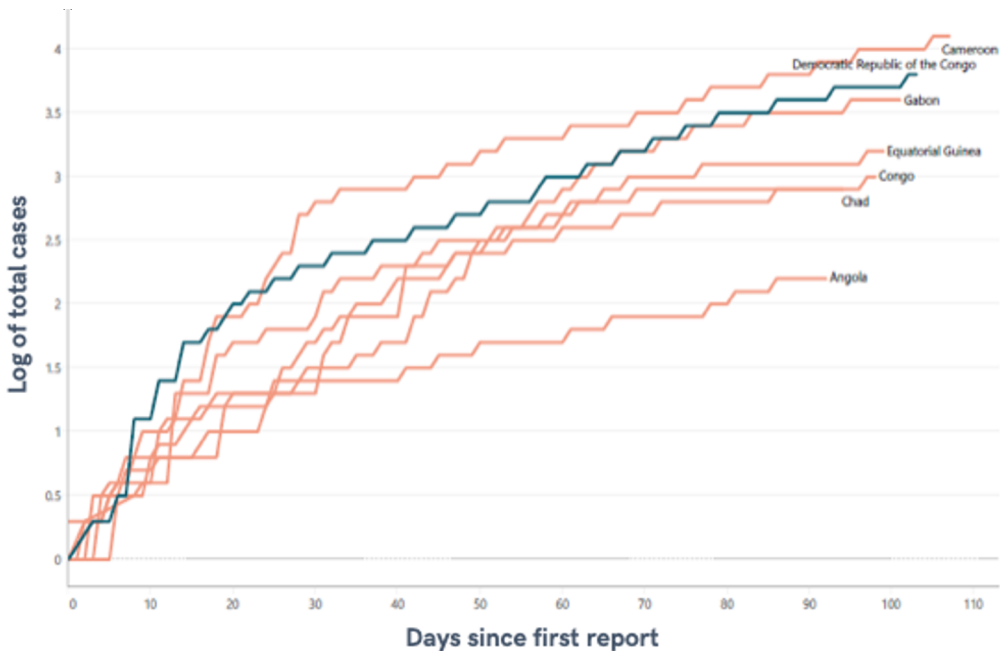


Table 1. Prevalence by country

Country	Cases per 100,000 population
Gabon	223.19
Equatorial Guinea	147.57
CAR	64.30
Cameroon	47.42
Congo	20.20
DRC	7.16
Chad	5.39
Burundi	1.25



Disease Dynamics (continued)

Lab testing

- Percent positivity is high, suggesting testing is concentrated among higher risk persons and should be expanded to identify additional cases.

$$\frac{5,924 \text{ positive tests}}{22,527 \text{ persons tested}} = 26.3\% \text{ positive}$$

Geographic distribution of cases

- As of June 21st, **89.2%** of cases were located in Kinshasa, followed by 4.6% in Kongo-Central.
- Between June 8th and June 21st, total cases in Haut-Katanga increased more than **three-fold**.

12 provinces reporting

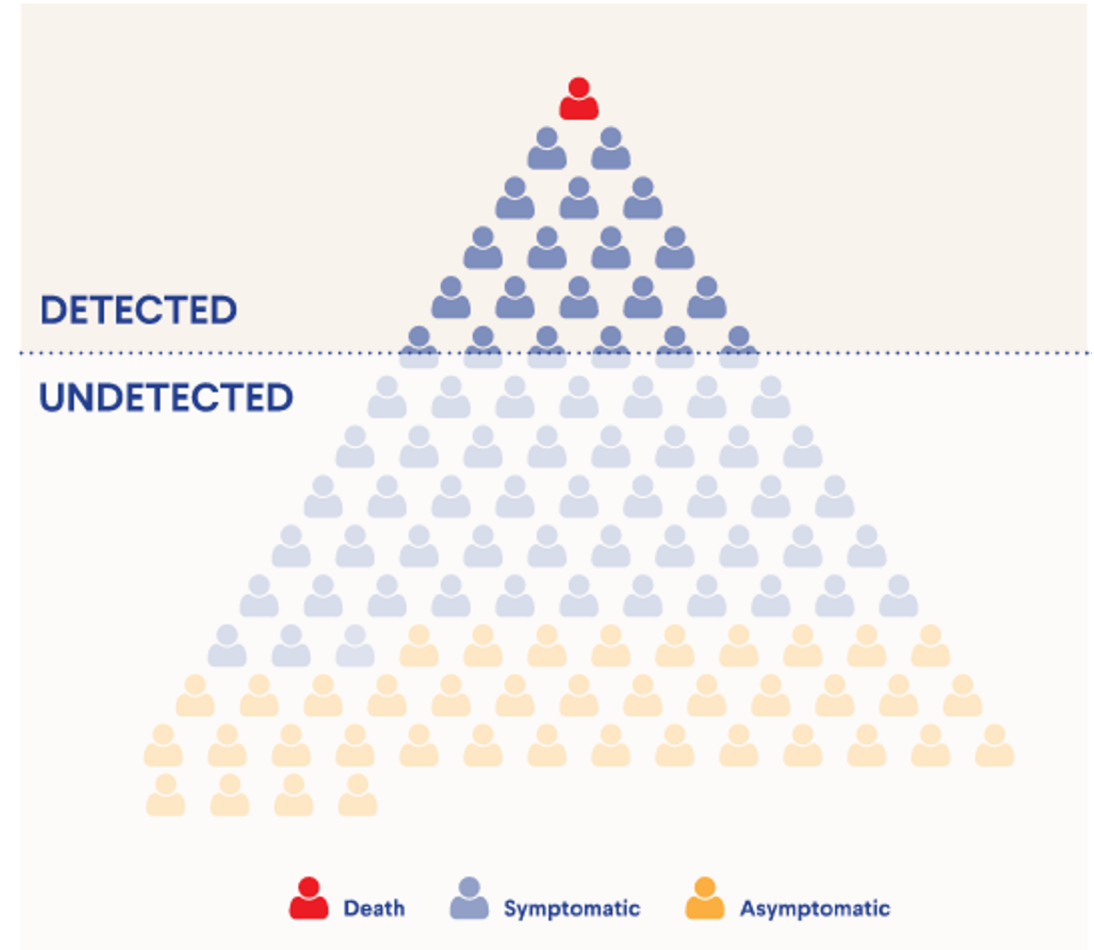
Severity

- An average of **3 deaths per day** were recorded over the past two weeks, representing an increase from previous weeks.

$$\frac{19 \text{ severely ill patients}}{1,178 \text{ hospitalized patients}} = 1.6\% \text{ severely ill}$$

COVID-19 Case Iceberg

- Using [RTSL's COVID-19 Prevalence Calculator](#), the total number of cases is estimated using the total number of deaths*
- The number of estimated total cases in DRC could be as high as **80,952**
- Only **7.3% of cases** have been detected in DRC, and an estimated 75,027 cases may be missing from the official count



Misinformation on COVID-19

Misinformation narratives are casting doubt on the existence of COVID-19 and the impact and efficacy of the COVID-19 response. These narratives appear to be closely related to more localized concerns over corruption and poor governance.

- Analysis shows that DRC Facebook users* **have amplified dis/misinformation about COVID-19** during the monitored period. Many users expressed **doubt about the existence of the virus**.
- Misinformation narratives surrounding COVID-19 appear to **correspond with allegations of localized and national corruption**. Users claimed that churches, NGOs, and politicians were exploiting COVID-19 to steal money. Another prominent narrative is that the **virus was created and spread in order to benefit businesses, the global elite, and domestic Congolese leadership**.
- **In traditional media***, **misinformation about COVID-19 was the key driver of negative sentiment**. According to local media reports, private citizens were seen shouting at officials while they were conducting a COVID-19 awareness campaign in Kinshasa.

One Facebook user asked, “my question is: Have you ever had a single case of covid in your family?”



These misinformation narratives are similar to those spread during the Ebola outbreak in North Kivu -- one study found that 24% of respondents did not believe Ebola was real ([Vinck et al., May 2019](#)).

Citizens allegedly shouted, “Corona is in Europe, in China” but not in the DRC and that **people in the DRC have “antibodies from the time of our ancestors.”**



PSHM Implementation and adherence

Reported PHSMs Currently Implemented in DRC

Personal	Surveillance	International travel	Domestic travel
4 April: Mandatory use of face masks	<p>28 May: Mass testing center opened in Kinshasa stadium*</p> <p>There have been recurring short lockdowns of cities/areas (e.g. Lubumbashi, Kasumbalesa et Kipushi last weekend) to allow investigation and response teams to collect samples and identify contacts</p>	27 May: Borders still closed, partial opening with Zambia and Rwanda	<p>11 May: limits on maximum passengers on public transport; provincial air travel is still blocked with only minor exceptions</p> <p>Internal restrictions still in place to enter and leave Gombe district in Kinshasa; plans to lift restrictions by 29 June announced</p>

PSHM Implementation and adherence

Reported PHSMs Currently Implemented in DRC

Mass gatherings	Schools	Businesses	Stay at home
29 May: Restrictions on gatherings more than 20 ppl (including places of worship)	24 March: Schools closed	29 May: Bars and restaurants	6 April: Gombe, Kinshasa Human rights groups reported that some mining companies told employees to either stay and work – confined on site 24 hours a day, seven days a week – or lose their jobs. On at least six mining sites, workers have been confined for over two months.*

PHSM implementation and adherence

Although sentiment in traditional media coverage of COVID-19 and PHSMs was overall more positive than negative, **negative sentiment recently increased, as government and domestic health officials warned that some citizens are not taking the virus and PHSMs seriously.**

- Twitter users amplified public awareness campaigns in Bukavu, Goma, and Kinshasa addressing hand-washing, and public and personal hygiene measures. These highly visible campaigns suggest **public awareness and acceptance of hygiene measures.**
- However, Facebook users complained of poor public adherence to PHSM and lax enforcement by local authorities in the North Kivu Region and Bukavu.
- Another narrative showing unfavorable coverage of PHSMs was about government warnings that **hundreds of Congolese citizens returning to the country are not adhering to quarantine guidelines.**

A Facebook user in Bukavu observed that many people had stopped wearing masks and quarantining: "neither wearing a mask nor confinement is no longer compulsory. There is entry and exit as usual." 

Burden: Food & Water Security

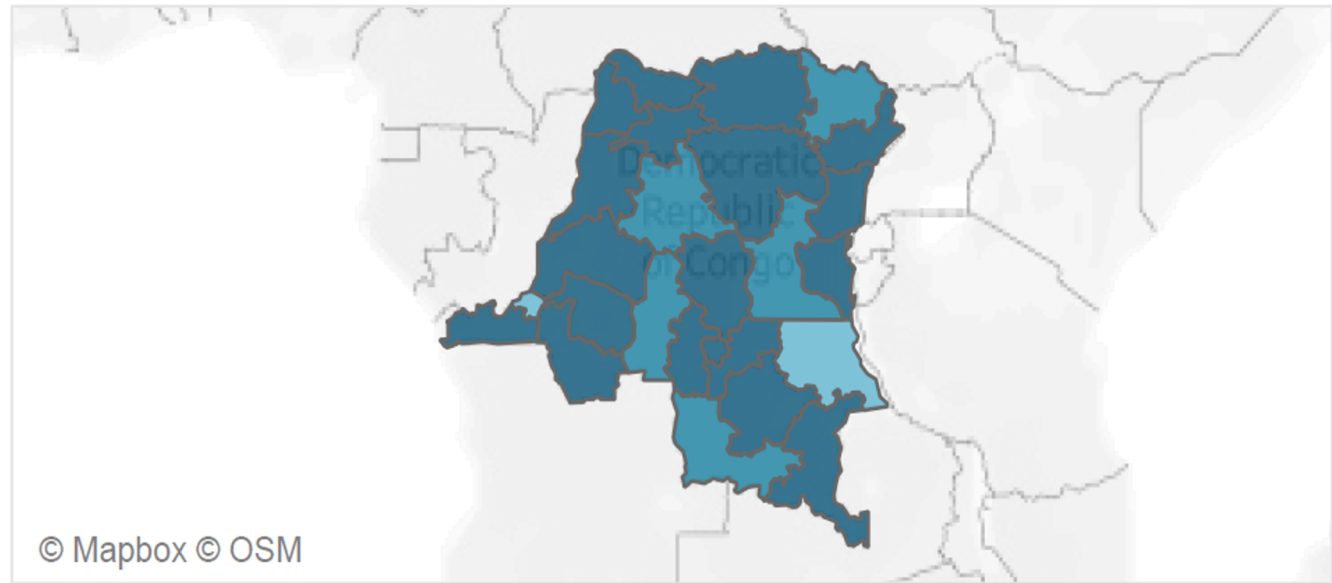
While food and water insecurity persisted even before COVID-19, there have been growing reports of more insecurity since COVID-19. **This situation threatens to undermine adherence to PHSM and may increase the spread of COVID-19. These affect regions with pre-existing water and food insecurity more than other regions.**

- The World Food Programme estimates the **number of people with insufficient food intake has increased by 6.7 million** over the past month (to a total of 37.9 million, 45% of the population).
- Among Twitter users, **water security is a major concern**, often cited as an obstacle to PHSM adherence—particularly in Goma.

One resident wrote: "the Goma populace always endures these situations with potable water, but we do not know how to deal with it during this pandemic when water is essential in curbing the spread of the disease. [Water supply] is the responsibility of the government authorities."



Prevalence of insufficient food consumption*

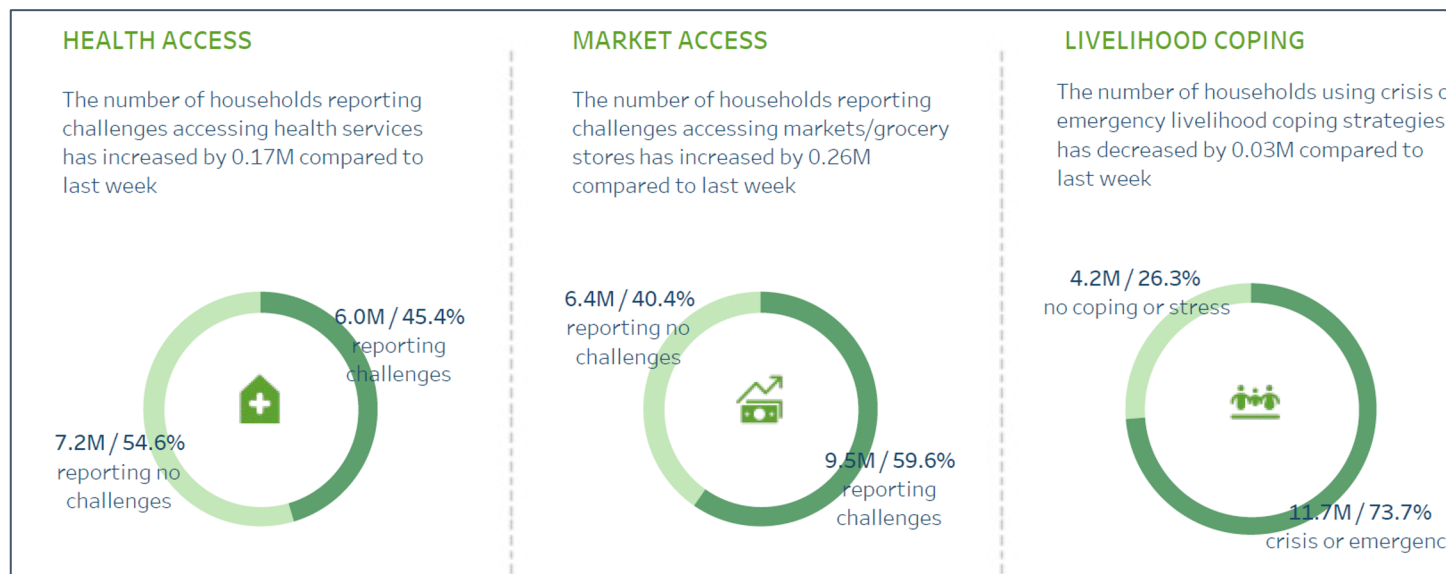


**People with insufficient food consumption refer to those with poor or borderline food consumption, according to the Food Consumption Score (FCS). Data from rolling telephone interviews. Source: [World Food Programme](#), 19 June 2020*

Burden: Livelihoods & Access to Services

According to the World Food Programme, there was an increase in the number of households that report challenges accessing health services and market/grocery stores on June 15, when compared to polling from June 8.

- Access to **health services*** is a challenge for 45% of households. The majority of these cite **lack of money (97.7%)** as the key barrier to access.
- Access to **markets/grocery stores** is a challenge for ~60% of households, with **lack of money (55.5%)**, **concerns about disease risk (23.4%)**, and **travel restrictions (13.6%)** the main barriers.
- Three in four households report using one or more emergency coping mechanisms like spending down savings (18%), borrowing (15%), consuming seed stocks (13%), selling productive assets (11%) and reducing non-food expenses (10%).



Data from rolling telephone interviews. Source: [World Food Programme](#), 19 June 2020

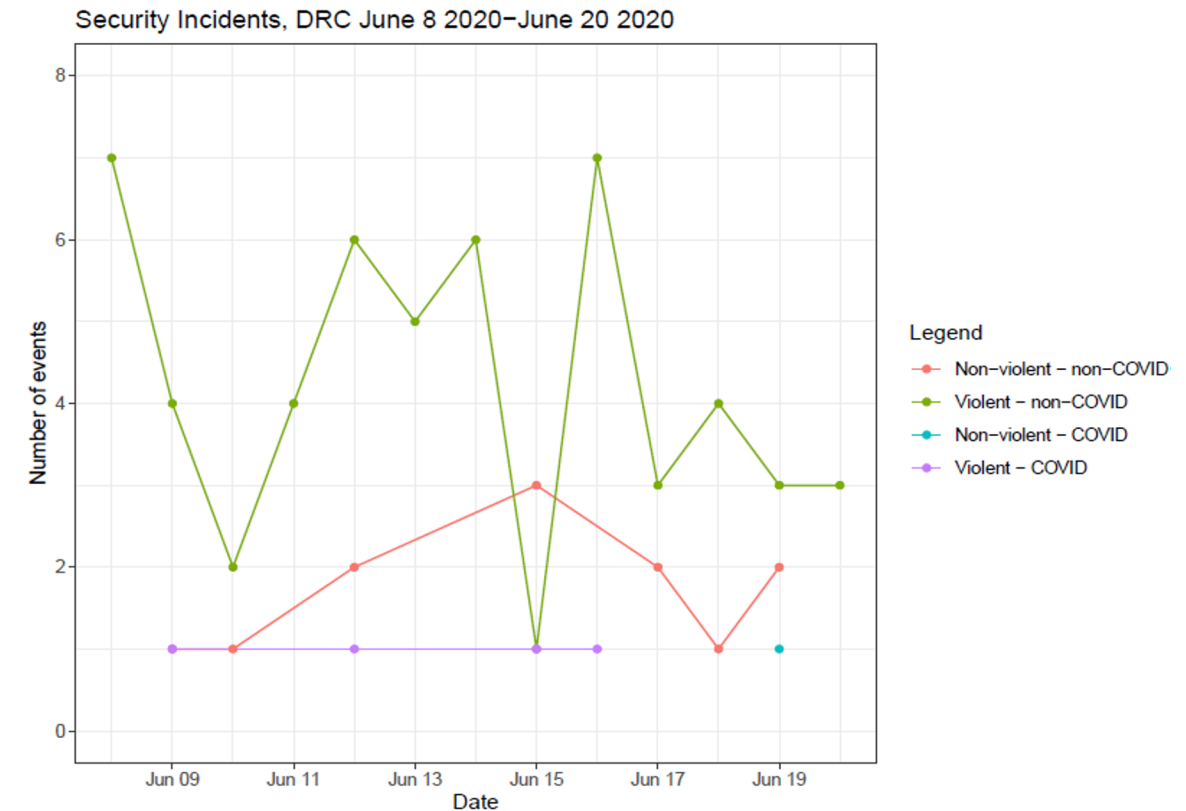


Burden: Security

Media scraping shows that public frustration over police brutality in enforcing PHSMs, especially curfews, has contributed to negative sentiment.

Key COVID-19 related security incidents included:

- June 9: One violent demonstration in Kinshasa to **demand the reopening of the market**. Police action triggered confrontations, and up to three people reportedly died.
- June 12, 15: **Two violent attacks against civilians** in Bukavu. Police arrested, beat, and robbed a group of civilians who were accused of having breached the curfew. A police officer shot and killed a motorbike taxi driver following a quarrel about the victim not wearing a mask.
- June 18: Reports that riots broke out at the Bwindi treatment center after a young man was killed by a police officer for violating curfew.
- June 19: One peaceful protest in Butembo by members of LUCHA. Protesters were against the formal request by some members of Parliament to raise their salaries and per diem allowances amidst an economic crisis worsened by COVID-19.





Government Response

Although the national government announced a revamped COVID-19 strategy, Facebook and Twitter posts highlight public dissatisfaction with the government's response to the virus

- On June 18, President Tshisekedi announced a **9-month Multisectoral Emergency Mitigation Program for COVID-19** with a budget of US \$2.6 billion
 - 15% of the budget will focus on for the health response, including surveillance and strengthening of the health system
 - 41% will support macroeconomic stability and revival of the economy
 - 44% will go to the preservation of the population's living conditions during this crisis period and risk mitigation
- However, the Facebook and Twitter discussions on COVID-19 and the DRC government were primarily negative, as users criticized the government for the mismanagement of its COVID-19 response and public citizens for poor adherence to PHSMs.
- On Saturday 20 June, the Congolese Parliament voted for the fifth time to renew the state of emergency measures taken to deal with the Covid-19 pandemic (Tshisekedi had declared the 1st state of emergency on 24 March).



International Response

Greater positive sentiment emerged between June 1 - June 21 than in the last six weeks as government and international aid organizations highlighted the distribution of medical and humanitarian aid to combat COVID-19.

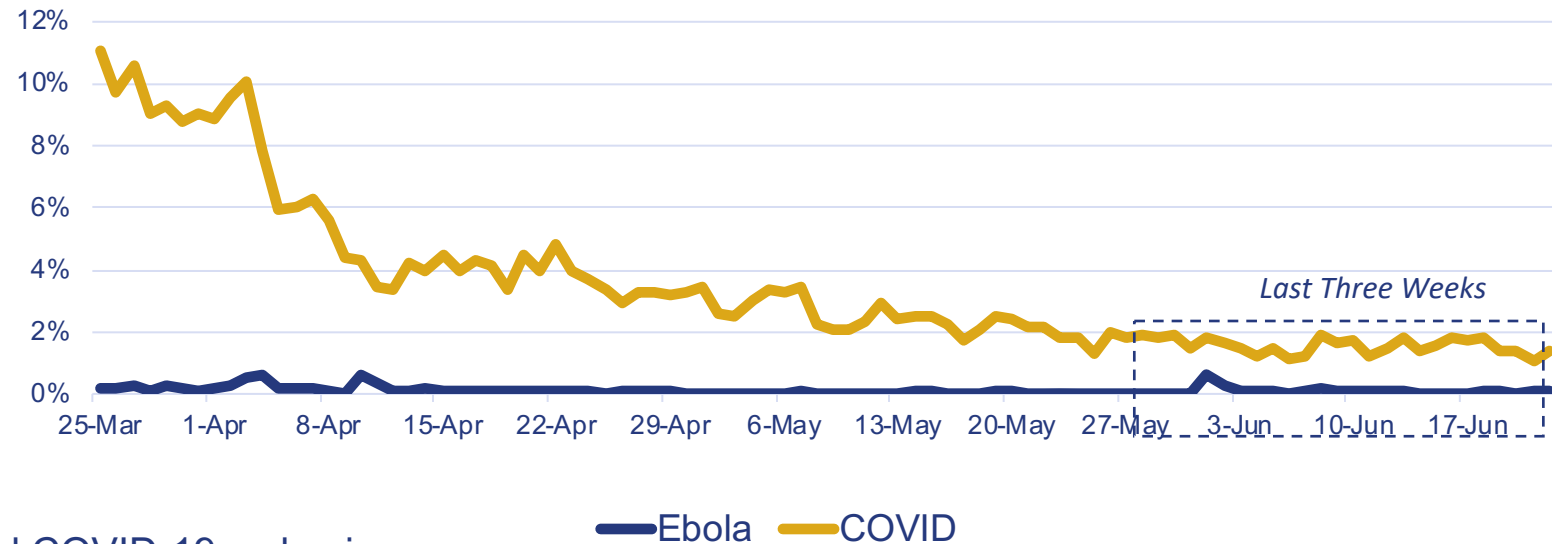
- **Positive sentiment** in the DRC between June 1 –June 21 was driven by reporting about the distribution of humanitarian and medical aid to local DRC institutions. On June 21, *Agence Congolaise De Presse (ACP)* reported that the Coordinator of the National Fund for Solidarity Against COVID-19 (FNSCC) donated **\$600,000 to four hospitals in Kinshasa**.
- On June 8, *ACP* reported that DRC officials welcomed European authorities, including French Foreign Minister Jean-Yves le Drian, to the country and **lauded additional humanitarian and medical support from the EU**.
- While some regional news outlets reported that two members of the EU delegation in the DRC tested positive for COVID-19, this story did not gain significant traction in traditional media coverage over the last few weeks.

COVID-19 & Ebola in DRC

Coverage of Ebola remained low, accounting for 1% of all tweets from DRC since early April. **One-third of all tweets mentioning Ebola also mentioned COVID-19.** Coverage of Ebola peaked on 1 June after reported Ebola cases in several locations in Équateur Province.

- Twitter users in DRC often discussed Ebola and COVID-19 as having a **shared impact and threat to the health care capacity and infrastructure** in DRC. In early June, users referred to the spread of COVID-19 and Ebola as a “**double war**.”
- Coverage of Ebola has dropped significantly since early June, while discussion of COVID-19 has remained consistent. This suggests **COVID-19 is viewed as a more immediate concern** to Congolese Twitter users.
- Congolese Twitter users seem most concerned with rising case numbers, as well as testing capacity in the country.

DRC Twitter Coverage of COVID-19 and Ebola:
March 25- June 21, 2020



One DRC Twitter user addressed the country's president, political leaders, and major media outlets on June 3, writing “A positive case in Bikoro. #Ebola and #Covid-19 are a double war against Équateur province, which cannot face it alone. Equal treatment [of the two diseases] is mandatory in respect of the constitution.”





Acronyms

COVID-19: Coronavirus Disease 2019

CSO: Civil society organization

DRC: Democratic Republic of the Congo

EVD: Ebola Virus Disease

NGO: Non-governmental organization

PHSM: Public health and social measure

PPE: Personal protective equipment

COVID-19



Visit **PreventEpidemics.org** for more. Prevent epidemics is a project of Resolve to Save Lives, an initiative of Vital Strategies.