DRC’s COVID-19 Crisis Comes as the Country Battles Ebola, Measles, and Rebels

By Rebecca Anne Proctor
Updated Apr 15, 2020

The Democratic Republic of the Congo (DRC), which is already having to cope with two health crises—a year-long measles epidemic and an Ebola outbreak that began a year-and-a-half ago—is now facing a new killer: COVID-19.

The capital Kinshasa recorded the country’s first COVID-19 case on March 10. A Congolese citizen who had returned from France feeling unwell soon after tested positive for the virus. The second case was a Cameroonian national who had arrived in Kinshasa on March 8. Originally asymptomatic, he entered a hospital in the capital a few days later. After a few more cases and the country’s first death on March 21, President Félix Tshisekedi announced the closure of schools,
bars, restaurants, and places of worship. On March 23, the DRC suspended all international flights to and from the country, followed by the declaration of a state of emergency the next day.

A lack of proper healthcare facilities and funds to fight this challenge has already led to a high death rate for the number of confirmed COVID-19 cases. Early in the outbreak, a COVID-19 diagnosis proved lethal in 10 percent of those who were infected. Through April 15, the country had 254 confirmed cases and 21 deaths.

A Matter of Survival

Despite the deadly impact of the virus, a stringent lockdown of the sort enacted elsewhere has not been enforced in the DRC.

“The reason it’s been difficult to enact wide-sweeping lockdowns in the DRC like in Europe and in the US is simply because most people in the country rely on daily income to survive; they simply won’t have enough to eat if they don’t work,” says Josuel Musambaghani, a software engineer from Goma. “They live hand to mouth. If they don’t wake up to work for a day, they might not earn enough to come back and feed their families.”

This hard truth has split the population into two groups: those who are keen to observe more stringent lockdown rules of social distancing and self-isolation at home, and those who have to choose between their financial survival and their own health and safety.

The capital Kinshasa currently has more than 90 percent of the cases in the DRC, with a handful in the east, in Ituri and North Kivu provinces. Kinshasa’s affluent Gombe neighborhood, which is home to diplomats and politicians, is one area where the government has been able to enforce a lockdown. The US embassy in Kinshasa also reported two cases of the virus.

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“There’s been a better response to abiding by protective measures on the eastern side in Goma, where the Ebola outbreak is coming to an end,” says Musambaghani. “It wasn’t uncommon over the past two years for people in Goma to hear phrases such as ‘wash your hands’ or ‘let’s check your temperature’ or ‘cough in your elbow’—all of these instructions that had been received from previous epidemics and are not breaking news for people who live in Goma.”

Professor Jean-Jacques Muyembe-Tamfum, director of the National Institute of Biomedical Research, is one of the world’s leading experts on the Ebola virus. (Matthieu Alexandre / AFP)

Goma is the capital of North Kivu, the areas worst-hit by the Ebola epidemic. The authorities had hoped to declare Ebola defeated on Sunday, April 12—two incubation periods, or forty-two days, after the last new case—but just two days before they could do so another case was confirmed. The Ebola virus has since claimed two more lives in the past week. About 2,200 people have died of Ebola since the outbreak began in August 2018.

And in the past year, an estimated 250,000 people have contracted measles, of whom 6,000 have died. The COVID-19 pandemic has brought international measles vaccination efforts to a halt.
Spare a thought for DRC. Just two days away from being able to announce their Ebola outbreak is over, a new case appears (2,200 have died). Now they’re fighting Ebola, Covid19 and measles.

— Nancy Kacungira (@kacungira) April 10, 2020

Readiness Efforts

“It is sad to hear that, just as the DRC appears to be near ending its worst Ebola outbreak, a new virus is threatening the health of its citizens,” says Dr Matshidiso Moeti, World Health Organization (WHO) Regional Director for Africa. “However, some of the readiness efforts put in place during the Ebola outbreak may help the country respond to COVID-19. WHO is here to support you, just as we continue to do in the Ebola response.”

The local press reported on April 2 that there are only sixty-five ventilators in all of Kinshasa’s hospitals, and that only fifty tests per day were being done at the National Institute of Biomedical Research, not nearly enough to handle a full-blown outbreak in a country with a population of nearly 90 million.

“Some people are being faced with situations where they get to the hospital, and maybe the staff don’t know how to work the ventilator, or maybe the hospital doesn’t even have ventilators,” says Musambaghani.

So what is being done in preparation for the outbreak? On April 2, the World Bank announced a package of US$47 million from the International Development Association (IDA) to fund the emergency response to the COVID-19 epidemic in the DRC. Local non-governmental organizations are also distributing face masks, food, and hygiene advice.

All schools are now closed, including Malaika, a non-profit school for girls in the impoverished village of Kalebuka, near Lubumbashi.
“Most of the girls at our school live with their family in one room, so how will they implement social distancing?” says Noella Coursaris Musunka, founder of Malaika. “Most of the houses the children live in don’t even have water or soap. We taught the girls personal hygiene at school.”

Malaika is currently conducting awareness campaigns in the Kalebuka community and intends to send food parcels to about sixty families per week. “We do still need to raise funds from the outside, and we are working really hard to do so,” says Musunka.

In Goma, a group of young people have formed Goma Actif, an initiative to prevent the spread of the virus and to minimize its impact on the community. They are making masks, providing food, and establishing water points throughout the city where people can wash their hands.

“We are entirely an entirely self-funded initiative,” says Michael Kalamo, one of the founders of Goma Actif. “We are using our own resources and don’t have anyone helping us from the outside. We need to take care of ourselves, knowing that the government will not react as we need them to react. Battling the coronavirus will show how united we as a people can be in the absence of proper government. We hope our efforts will push the government to then react accordingly.”

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Space for Peace?

The arrival of COVID-19 in the DRC coincided with an increase reports of violence involving rebel groups. Ituri and North Kivu provinces have been at the center of many recent skirmishes in the Congo, but violence has also spiked in the city of Lubumbashi in the Copper Belt, and towns elsewhere like Likasi, Kasumbalesa, Pweto, Tenke, Bunkeya, and Kakanda.

“It’s not clear exactly what is spurring the increased number of attacks,” said a Lubumbashi resident who wished to remain anonymous, “but it’s possible they are taking advantage of the situation COVID-19 has placed the DRC in to destabilize the country and take control.”
Others take a different view. “It’s been three weeks since any reports of violence in the Beni region—a region most affected by violence in the past couple of years,” said another Goma resident. “Many people believe Covid-19 has given space for peace in that region. Even the militias are trying to protect themselves from the virus.”

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